

## SBA LOAN APPLICATION

### Company Information

Business Name \_\_\_\_\_ Established On \_\_\_\_\_ Tax ID \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Principal in Charge \_\_\_\_\_ Work Phone \_\_\_\_\_ Work Fax \_\_\_\_\_  
 Email \_\_\_\_\_ Cell Phone \_\_\_\_\_  
 Type of business \_\_\_\_\_  
 Type of entity (check one): ☐ Proprietorship ☐ Partnership ☐ LLC ☐ Corporation—years business incorporated \_\_\_\_\_  
 Number of current employees \_\_\_\_\_ Estimated number of new employees within the next two years as a result of this loan \_\_\_\_\_

### New Project Information

Street address of project \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_  
 What is the square footage of the new building? \_\_\_\_\_ What is the square footage your company will occupy?\* \_\_\_\_\_  
 \*Please note—we require your company to occupy 51% of an existing building or 60% of a new building.  
 Escrow closing date \_\_\_\_\_ Realtor's name \_\_\_\_\_ Phone \_\_\_\_\_  
 How will the property be vested (i.e. individually, husband and wife, partnership, LLC, corporation, trust...)? \_\_\_\_\_  
 If there are any tenants that will remain in the building, please provide the following information: Also, please have your realtor provide copies of all existing leases.

Tenant name	Square footage	Lease expiration	Rent amount

### Checklist

Please provide the following documents and information

#### Business information (Borrowing entity & all affiliate entities)

<input type="checkbox"/>	Business financial statements for the last three years
<input type="checkbox"/>	Projections (form attached)
<input type="checkbox"/>	Interim financial statement dated within the last 60 days
<input type="checkbox"/>	Business debt schedule (form attached)
<input type="checkbox"/>	Federal tax returns for the last three years
<input type="checkbox"/>	Other _____

#### Personal information (for each individual with 20% or greater ownership)

<input type="checkbox"/>	Personal tax returns for the last three years
<input type="checkbox"/>	Personal resumé (form attached)
<input type="checkbox"/>	Personal financial statement (form attached)

#### Legal entity documents (as applicable)

<input type="checkbox"/>	Sole Proprietorship— Fictitious Business Name Statement (filing and proof of publication with county recorder's stamp)
<input type="checkbox"/>	Corporation—Articles of Incorporation, Corporate Bylaws and Stock Certificates
<input type="checkbox"/>	Partnerships (General, Limited or Limited Liability)— Partnership Agreement (with all exhibits) and State Registration, if any
<input type="checkbox"/>	Limited Liability Company —Articles of Organization Form (LLC-1) and Operating Agreement
<input type="checkbox"/>	Trust—Trust Agreement with all exhibits

#### Real estate information

<input type="checkbox"/>	Real Estate Purchase Agreement and Escrow Instructions OR Escrow Closing Settlement Sheet and Grant Deed
<input type="checkbox"/>	Construction cost budget and/or equipment bids
<input type="checkbox"/>	Existing environmental studies

## References

Bank Name \_\_\_\_\_ Account Officer \_\_\_\_\_ Phone \_\_\_\_\_

Accountant \_\_\_\_\_ Firm Name \_\_\_\_\_ Phone \_\_\_\_\_

Attorney \_\_\_\_\_ Firm Name \_\_\_\_\_ Phone \_\_\_\_\_

Property Insurance \_\_\_\_\_ Insurance Agent \_\_\_\_\_ Phone \_\_\_\_\_

## Company Ownership

Name \_\_\_\_\_ Title \_\_\_\_\_ % of Ownership \_\_\_\_\_

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Name \_\_\_\_\_ Title \_\_\_\_\_ % of Ownership \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ % of Ownership \_\_\_\_\_

If a corporation, please indicate who is President and Secretary

## Affiliate Businesses

List any other business owned by any principal with 20% or more ownership in operating company.

Business Name \_\_\_\_\_ Owner \_\_\_\_\_ % of Ownership \_\_\_\_\_

Business Name \_\_\_\_\_ Owner \_\_\_\_\_ % of Ownership \_\_\_\_\_

Business Name \_\_\_\_\_ Owner \_\_\_\_\_ % of Ownership \_\_\_\_\_

Business Name \_\_\_\_\_ Owner \_\_\_\_\_ % of Ownership \_\_\_\_\_

## Existing Business Locations

Business Address \_\_\_\_\_ Own ☐ Lease ☐ Replaced by new facility? ☐ Yes ☐ No

\_\_\_\_\_ Square Feet \_\_\_\_\_ Mortgage/Lease payment \$ \_\_\_\_\_ Lease expiration \_\_\_\_\_

Business Address \_\_\_\_\_ Own ☐ Lease ☐ Replaced by new facility? ☐ Yes ☐ No

\_\_\_\_\_ Square Feet \_\_\_\_\_ Mortgage/Lease payment \$ \_\_\_\_\_ Lease expiration \_\_\_\_\_

Business Address \_\_\_\_\_ Own ☐ Lease ☐ Replaced by new facility? ☐ Yes ☐ No

\_\_\_\_\_ Square Feet \_\_\_\_\_ Mortgage/Lease payment \$ \_\_\_\_\_ Lease expiration \_\_\_\_\_

Business Address \_\_\_\_\_ Own ☐ Lease ☐ Replaced by new facility? ☐ Yes ☐ No

\_\_\_\_\_ Square Feet \_\_\_\_\_ Mortgage/Lease payment \$ \_\_\_\_\_ Lease expiration \_\_\_\_\_

## Total Project Costs

Enter Dollar Amounts

Real estate (land and building) ..... \$ \_\_\_\_\_

New construction/expansion/repair ..... \$ \_\_\_\_\_

Acquisition and/or repair of machinery and equipment .... \$ \_\_\_\_\_

Inventory purchase ..... \$ \_\_\_\_\_

Working capital (including loan fees) ..... \$ \_\_\_\_\_

Enter Dollar Amounts

Acquisition of existing business ..... \$ \_\_\_\_\_

Payoff SBA loan ..... \$ \_\_\_\_\_

Payoff bank loan (non SBA associated) ..... \$ \_\_\_\_\_

Other debt payment (non SBA associated) ..... \$ \_\_\_\_\_

TOTAL PROJECT ..... \$ \_\_\_\_\_

**Personal Resumé Form**

To be completed by each principal involved in the loan. Please make copies as needed for each individual.

Name FIRST \_\_\_\_\_ MIDDLE \_\_\_\_\_ LAST \_\_\_\_\_ SSN #: \_\_\_\_\_Former Name FIRST \_\_\_\_\_ MIDDLE \_\_\_\_\_ LAST \_\_\_\_\_ WHEN USED \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Residence Telephone (\_\_\_\_\_) \_\_\_\_\_ Business Telephone (\_\_\_\_\_) \_\_\_\_\_

Residence Address STREET \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_Previous Address STREET \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_

Are you employed by the U.S. Government? \_\_\_\_\_ Agency/Position \_\_\_\_\_

Spouse Name \_\_\_\_\_ SSN # \_\_\_\_\_ Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

**Personal information**Are you a U.S. Citizen? (If no, please provide a copy of your Alien Registration or Visa Card). . . . . ☐ Yes ☐ NoIs your spouse a U.S. citizen? (If no, please provide a copy of their Alien Registration or Visa Card). . . . . ☐ Yes ☐ NoAre you presently under indictment, on parole or probation?  
(If yes, furnish details in separate exhibit. List name(s) under which held, if applicable.) . . . . . ☐ Yes ☐ NoHave you ever been charged with or arrested for any criminal offense other than a minor motor vehicle violation?  
(If yes, furnish details in separate exhibit. List name(s) under which held, if applicable.) . . . . . ☐ Yes ☐ NoHave you ever been convicted of any criminal offense other than a minor motor vehicle violation?  
(If yes, furnish details in separate exhibit. List name(s) under which held, if applicable.) . . . . . ☐ Yes ☐ NoIndicate gender (optional) . . . . . ☐ Male ☐ Female

With which race you more closely identify? Choose only one (optional):

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> African American          | <input type="checkbox"/> Native American (other than Eskimo or Aleut) | <input type="checkbox"/> Eskimo or Aleut |
| <input type="checkbox"/> Asian or Pacific Islander | <input type="checkbox"/> White  | <input type="checkbox"/> Hispanic        |
| <input type="checkbox"/> Other _____               |   |  |

**Education (college or technical training)**

Name and Location	Dates Attended	Major	Degree or Certificate
1. _____	_____	_____	_____
2. _____	_____	_____	_____

**Military Service background**Branch \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Honorable Discharge? . . . . . ☐ Yes ☐ No Vietnam Veteran? . . . . . ☐ Yes ☐ No**Work Experience**

List chronologically, beginning with present employment. Attach separate exhibit if necessary . . . . .

Company name/location \_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_ Title \_\_\_\_\_  
Duties \_\_\_\_\_Company name/location \_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_ Title \_\_\_\_\_  
Duties \_\_\_\_\_Company name/location \_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_ Title \_\_\_\_\_  
Duties \_\_\_\_\_**Credit Report Authorization**

I declare that the information provided in this application is true and correct. I hereby authorize the release of any and all credit report and other information required in the processing of my loan application and as required in the servicing and/or during the term of my loan. I further authorize AVANA Capital, its affiliates and its successor to release such information to any entity as required in the processing of my loan application.

I/We hereby certify that the enclosed information, including any attachments or exhibits provided herewithin or at a later date is valid and correct to the best of my/our knowledge.

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of spouse \_\_\_\_\_ Date \_\_\_\_\_

Company Name \_\_\_\_\_

Describe the type of business you are in and how/why you became involved \_\_\_\_\_

Type of products or services offered (include any catalogs or brochures) \_\_\_\_\_

Geographic market area served \_\_\_\_\_

What is your outlook concerning the business activity in which you are engaged? \_\_\_\_\_

How will this loan benefit your company? \_\_\_\_\_

Will this loan create new employment opportunities?      Yes      No      If yes, state how: \_\_\_\_\_

#### Customer profile

What primary markets use your products? \_\_\_\_\_

List key customers \_\_\_\_\_

List major competitors \_\_\_\_\_

Major suppliers \_\_\_\_\_

Future plans (What is your growth strategy? Rapid growth, moderate, or maintain market position? What are the impediments that may impede your success?) \_\_\_\_\_

Major past accomplishments, how your business differs from the competition, and your competitive advantages: \_\_\_\_\_

Marketing analysis and strategy (Explain your promotional, pricing, and distribution strategies?) \_\_\_\_\_

#### Previous SBA or other Federal Government Debt

Name of agency \_\_\_\_\_ Original amount of loan \_\_\_\_\_

Date of request \_\_\_\_\_ Approved or declined \_\_\_\_\_ Current balance \_\_\_\_\_ Status Current Past Due

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Have you or any officer of your company ever been involved in bankruptcy or insolvency proceedings? If yes, please provide details ..... Yes No

Are you or your business involved in any pending lawsuits? If yes, please provide details ..... Yes No

Do you or your spouse or any member of your household, or anyone who owns, manages, or directs your business or their spouses or members of their households work for the Small Business Administration, Small Business Advisory Council, SCORE, ACE, any Federal Agency, or the participating lender? If yes, please provide the name and address of the person and the office where employed. .... Yes No

Do you buy from, sell to, or use the services of any concern in which someone in your company has a significant financial interest? If yes, please provide details. .... Yes No

Does your business presently engage in export trade? ..... Yes No

Do you have plans to begin exporting as a result of this loan? ..... Yes No