

SBA 504 LOAN APPLICATION



CONTACT INFORMATION

Operating Company Name:	Holding Company Name:
Coordinating Individual:	Bus Phone:
Cell Phone:	Email:
Current Bank:	Website:
Name of your Accountant:	Accountant Phone:
May we contact your accountant regarding financial questions?	Accountant Email:

BUSINESS INFORMATION

Type of business:	Date Established:	
Existing location address:	Tax ID:	
Current lease payment:	Lease expiration:	NAICS Code:
Has there been any change in ownership in the past six months? If so, provide details:		
Is the operating company owned 51% or more by: <input type="checkbox"/> Woman <input type="checkbox"/> Minority* <input type="checkbox"/> Veteran/Active Service		
*African American, Hispanic American, Native American or Asian Pacific American		
Does your company have a succession plan/buy sell agreement and/or key man life insurance? If so, provide details:		
If a franchise, name of franchise:		

JOBS

Number of current full time employees:	Number of current part time employees:
Projected number of full time employees in 2 years:	Projected number of part time employees in 2 years:

BUSINESS DEBT (do not list if debt is personal)

Lender	Original Date	Maturity Date	Interest Rate	Monthly Payment	Current Balance	SBA Loan? Yes/No	Collateral

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PREMIER CAPITAL

Operating Company Ownership/Guarantor Information for all 20%+ owners and/or guarantors

Owner/Guarantor Name	Percent Owned	US Citizen		Own 20%+ or have control over another business		Previous <u>personal</u> government financing		Ever Arrested**		Involved in a pending lawsuit**		Ever involved in bankruptcy**	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No

***If "Yes" please attach explanation of relevant details. Additional documentation may need be to completed.*

Ownership of the entity that will own the project property (HOLDING COMPANY) for all 20%+ owners and/or guarantors

If ownership is the same as the Operating Company skip this section.

Owner/Guarantor Name	Percent Owned	US Citizen		Own 20%+ or have control over another business		Previous <u>personal</u> government financing		Ever Arrested**		Involved in a pending lawsuit**		Ever involved in bankruptcy**	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No

***If "Yes" please attach explanation of relevant details. Additional documentation may need be to completed.*

Signatures

all 20% + owners and/or guarantors

I/we hereby authorize the release to Premier Capital Corporation of any information that may be required at any time for the purpose related to my/our transactions for this project and authorize Premier Capital Corporation to make personal credit inquiries on each signor below:

Signature	Type (Print) Name	Title	Date

Copy this page if more than 5 owner/guarantors

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PREMIER CAPITAL

PROJECT INFORMATION

Project location address:

Building Square footage:

Size of lot Sq/Ft or Acreage:

What percentage will you occupy?

What is your request for? Examples below:

Tenants? Yes/No

If yes see bottom of page

Relocating

Adding a new location

Expanding existing building

Purchasing building currently leasing

Ground up construction

Purchase no renovations

Purchase with renovations

Equipment only financing

Prior use of building/property:

SOURCE OF EQUITY

Personal cash =

Business cash =

Pre-paid expenses =

Existing equity in land or building =

Other =

TOTAL EQUITY

Describe: _____

ABOUT OUR COMPANY

Describe your key products:

Who are your major competitors?

Who are your major customers?

What is your competitive advantage

Is your business seasonal? If so, in what way?

Please attache a brief history of the company

Tenant information for those that will remain:

Tenant name:		Square feet occupied:	
Tenant name:		Square feet occupied:	
Tenant name:		Square feet occupied:	

SBA 504
Government
Debt Schedule
SBA and/or Student Loans

Government Debt Schedule

Applicant certifies below ANY past or current government financing by any principals or affiliate companies, including names of the agency, the original date and amount, the outstanding balance, status of the loan (current, delinquent or paid in full), and collateral securing the loan. In addition, applicant confirms no loss to the U.S. Government on any previous loan.

Borrower Name	Agency Name	Original Date	Date Opened	Current Balance	Status Open/Closed	Collateral/\$ Guarantee	Gov't Loss Y / N