

# SMALL BUSINESS LOAN APPLICATION



**STATE BANK**  
OF SOUTHERN UTAH

## Business Loan Application Contents:

Business Loan Application, Business Debt Schedule,  
Personal Finance Statement



If applying for credit in your name, check the appropriate box: (Not applicable for Corporations or LLC's)

I am applying for an individual account in my own name and relying on my own income and assets.

We are applying for a joint account and our assets are jointly held (Initial Below)

We are applying for a joint account and our assets are NOT jointly held (Initial Below, Separate Personal Financial Statements required.) **Applicant:** **Co-Applicant:** **Date:**

## Loan Request Information

Requested Amount \_\_\_\_\_ Purpose \_\_\_\_\_  
Source of Repayment \_\_\_\_\_ Terms \_\_\_\_\_

## Company Information

Company Name \_\_\_\_\_  
Tax ID # \_\_\_\_\_ Date Established \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone \_\_\_\_\_ Fax \_\_\_\_\_  
Type of Organization \_\_\_\_\_ Organized in (State) \_\_\_\_\_  
Corporation Partnership Sole Proprietor State Incorporated \_\_\_\_\_ LLC  
Nature of Business (Please supply a brochure and/or literature) \_\_\_\_\_  
Additional Locations \_\_\_\_\_

## Officers/Owners

Name \_\_\_\_\_ Title \_\_\_\_\_ SS# \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Drivers License # \_\_\_\_\_ State \_\_\_\_\_ DOB \_\_\_\_\_  
%Ownership \_\_\_\_\_ Email Address \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ SS# \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Drivers License # \_\_\_\_\_ State \_\_\_\_\_ DOB \_\_\_\_\_  
 %Ownership \_\_\_\_\_ Email Address \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ SS# \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Drivers License # \_\_\_\_\_ State \_\_\_\_\_ DOB \_\_\_\_\_  
 %Ownership \_\_\_\_\_ Email Address \_\_\_\_\_

### Accountant

Name \_\_\_\_\_ Telephone \_\_\_\_\_ Fax \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Drivers License # \_\_\_\_\_ State \_\_\_\_\_ DOB \_\_\_\_\_  
 Financial Statement Prepared    Monthly    Quarterly    Annually \_\_\_\_\_

### Insurance

Carrier \_\_\_\_\_ Agent/Broker \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_ Fax \_\_\_\_\_ Coverage \_\_\_\_\_

### Banking

Bank Name	Account Type Account Number	Bank Telephone	Bank Contact

# Suppliers

Name _____	Contact _____	Phone _____	Fax _____
Name _____	Contact _____	Phone _____	Fax _____
Name _____	Contact _____	Phone _____	Fax _____

I/We hereby certify that all statements made by me/us on this application are true and complete, and I/we authorize you to make any credit inquiries you feel necessary in processing this application or in collection of any credit extended. Any credit investigation and information furnished you by any person or consumer reporting agency is hereby authorized, and whether credit is extended or not, is to remain your property.

_____	_____	_____
Authorized Signature	Title	Date
_____	_____	_____
Authorized Signature	Title	Date
_____	_____	_____
Authorized Signature	Title	Date

## Please provide the following information:

### Financial Statements

- Business - Company's financial statements for the past 3 years
- Personal - Owner's current personal financial statement
- Current Accounts Receivable Aging
- Current Accounts Payable Aging

### Tax Returns

- Business - Copies of company's Income Tax returns for the past 3 years
- Personal - Copies of owner's Income Tax returns for the past 3 years

### Other Information

- Current Business Debt Schedule
- Articles of Incorporation/Organization/Partnership Agreement
- Business Plan



Dated As of: \_\_\_\_\_

**If applying for credit in your own name, check the appropriate box: (Not Applicable for Corporations or LLC's)**

- I am applying for an individual account in my own name and relying on my own income and assets.
- We are applying for a joint accounts and our assets are jointly held - Initial Below.
- We are applying for a joint account and our assets are NOT jointly held - Initial Below  
(Separate Personal Financial Statements required.)

**We intend to apply for joint credit (please initial):** \_\_\_\_\_  
Applicant Co-Applicant

Name(s)		Residence Phone	
Residence Street Address		Business Phone	
City, State & Zip		Date of Birth	
Business Name			

ASSETS	(Omit cents)	LIABILITIES	(Omit cents)
Cash, Savings Accounts, & CD's		Notes Payable to Bank & Others <i>(Describe in Section 2)</i>	
Stocks & Bonds <i>(Describe in Section 3)</i>		Accounts Payable <i>(Include Credit Cards)</i>	
Accounts & Notes Receivable		Installment Account (Auto/Other) <i>(Describe in Section 2)</i>	
Life Insurance - Cash Surrender Value <i>(Describe in Section 9)</i>		Unpaid Taxes <i>(Describe in Section 7)</i>	
Real Estate - Current Market Value <i>(Describe in Section 4)</i>		Mortgages on Real Estate <i>(Describe in Section 4)</i>	
Closely Held Business Interests <i>(Describe in Section 5)</i>		Home Equity Line of Credit <i>(HELOC)</i>	
IRA or Other Retirement Account		Loan on Life Insurance	
Other Personal Property <i>(Describe in Section 6)</i>		Other Liabilities <i>(Describe in Section 8)</i>	
Automobile - Present Value		<b>Total Liabilities</b>	
Other Assets <i>(Describe in Section 6)</i>		<b>Net Worth</b>	
<b>TOTAL ASSETS</b>		<b>TOTAL LIABILITIES AND NET WORTH</b>	

Section 1. Source of Income	Contingent Liabilities
Salary	As Endorser or Co-maker
Net Investment Income	Legal Claims & Judgements
Real Estate Income	Provision for Federal Income Tax
Other Income <i>(Describe below) *</i>	Other Special Debt
<b>TOTAL</b>	<b>TOTAL</b>

**Section 1. Description of Other Income**

*\*Please only include alimony or child support payments if they should be counted toward total income.*



**Section 6. Other Personal Property / Other Assets**

*\*List each item separately. Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.*

**Section 7. Unpaid Taxes**

*\*Describe in detail. (i.e. type, to whom payable, due date, amount, property description, and tax liens)*

**Section 8. Other Liabilities**

*\*Describe in detail.*

**Section 9. Life Insurance Held**

*\*Give face amount and cash surrender value of policies, name of insurance company and beneficiaries.*

*I hereby certify that all statements made by me on this financial statement are true and complete, and I authorize you to make any credit inquiries you feel necessary. These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. Any credit investigation and information furnished you by any person or consumer reporting agency is hereby authorized, and is to remain your property.*

Signature \_\_\_\_\_

Date \_\_\_\_\_

Social Security # \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Social Security # \_\_\_\_\_

