

Commercial Real Estate Loan Application

This is an Application for a Conventional Real Estate Loan, SBA, USDA B&I or Bridge Loan. Please complete this Application in as much detail as possible SIGN and DATE and return to your Loan Representative.

OPERATING COMPANY				
Legal Name of Business:				
D/B/A (if applicable):				
Complete Business Address:				
Work Phone:		Cell Phone:		
Business Tax ID:	_ Date Business Started:	State of	Formation:	
Type of Entity: C-Corporation	S-Corporation LLC	Sole Proprietorship	Other:	
Type of Business (example hotel, gas st	tation etc.):			
# of Current Employees at Business: _	# of Em	ployees post loan closing:	#	of Business Locations:
Business Website if applicable:				
Business Contact Person:		Contact Title:	C	Contact Phone:
Contact Email:				
OPERATING COMPANY OWN	ERSHIP – must account	for 100% of ownership, use add	itional sheet if ne	ecessary
<u>Name</u>	<u>Title</u>	Ownership %	<u>SSN</u>	Birthplace
				_
REAL ESTATE HOLDING COM	MPANY – if applicable			
Legal Name of Real Estate Holding Co.	mpany:			
D/B/A (if applicable):				
Complete Business Address:				
Business Tax ID:	Date Business Started:	State o	f Formation: _	
Type of Entity: C- Corporation	S – Corporation LI	CC Sole Proprietorship	Other:	
# of Current Employees at Business: _	# of Em	ployees post loan closing:	#	of Business Locations:
REAL ESTATE HOLDING COM	APANY OWNERSHI	P – must account for 100% o	ownership, use	additional sheet if necess
<u>Name</u>	<u>Title</u>	Ownership %	<u>SSN</u>	Birthplace
Illiance Business Capital Inc.				
commercial Real Estate Loan Application				Revised 12/21/2021

DETAILS OF	TRANSACTION							
Loan Purpose:	New Purchase	Refinance	☐ New Con	struction	enovation	Other:		
Loan Program:	☐ Conventional	SBA 7(a)						
Property Use:		d (must occupy a minimum of 51% of the total rentable space)					ty	
USE OF LOA	AN PROCEEDS							
Land Acquisit	ion:			Payoff SB	A Loan:	_		
-	ing Acquisition:			•	n-SBA Loan:			
New Building		Payoff Other Loans:						
Building Impr		Payoff Other:						
	ninery/Equipment:	Estimated Lender Fees:						
Inventory Pure		Est. SBA/USDA Guaranty Fees						
Working Capi		Est. Additional Closing Costs:						
Acq. Of Existi					ject Costs:	_		
-					ower Injectior	1 :		
		TOTAL LOAN REQUEST:						
	E COLLATERAL							
Land Only:				Furniture &	& Fixtures:			
Land & Buildin	ıg			Accounts l	Receivable:			
Machinery & E	quipment:		Other Commercial Real Estate:					
Inventory:		Residential Real Estate:						
Other:								
				TOTAL COLLATERAL:				
CURRENT L	LENDER / LOAN	INFORMAT	ION – needed	on all refinanc	ces			
	e on all refinances.					a copy of N	otes/Liens against	the property
rease complet	c on an remances.	Only needed on					_	Note
Lender Name			Current Balance	Original <u>Balance</u>	Current <u>Rate</u>	Current Payment		Expiration
1 st.								<u>Date</u>
Other:							-	
AFFILIATE	COMPANIES – a	all companies o	wned, use add	litional sheet if	necessary			
Company Name	<u>e</u>	Owner	· Name	<u>, </u>	<u>Γitle</u>		Ownership %	<u>SSN</u>
								
								
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SUBJECT PROPERTY INFORMATIO	N				
Subject Property Address:					
Property Type:	Year Built: Date of Last Renovation:				
Original Purchase Price:	Purchase Date: Cost of Renovations:				
Total # of Buildings: Total F	Building(s) Sq. Feet:	Lot Size:	Acres	Square Feet	
Total # or Rooms / Rental Units: A	VG Occupancy %: Cu	rrent Occupa	nncy %: Owner	Occupied %:	
Estimated Property Value:	☐ Borrower Estimate ☐ Purc	hase Price	Appraisal – please em	ail Appraisal	сору
Tax Assessed Value:	Yearly Tax Amount:		Taxes Current: Yes	☐ No	
Property is/will be held in the name(s) of:					
Exterior Property Condition: Good Fa	ir Poor – explain:				
Interior Property Condition: Good Fa	ir Poor – explain:				
PROFESSIONAL CONTACTS					
Type of Firm Firm Name	Contact Person	Phone:	Email:		
CPA:	Contact I cison	<u>r none.</u>	<u>Linan.</u>		
Attorney:					
Insurance					
Agent:					
Title Company:					
SBA / USDA DECLARATIONS – must it	be completed on all SBA / USDA	Loan Appl	ications		
Does any applicant or their spouse or any members or their spouses or members of their holds Advisory Council, SCORE or ACE, or any Federal	ousehold, work for the Small Business		•	☐ Yes	□ No
Do you buy from, sell to, or use the services of		nas a signific	ant financial interest?	Yes	☐ No
Is this business a franchise? If yes name of franchise:					□ No
Does your business presently, or will it as a result of this loan, engage in export trade?					□ No
Would you like additional information on exporting?					☐ No
Have you received any counseling or training from SBA, SCORE, ACE, SBDC, WBC, etc.?					☐ No
Does your company (or any of its owners) have an existing SBA or other government loan?				☐ Yes	☐ No
If Yes, Name of Agency (i.e. SBA):					
Original Loan Amount: D	ate of Loan: State	us:			
ADDITIONAL DECLARATIONS – mu	st be completed on all loan reque	sts			
Have you or any officer of your company ever b	been involved in bankruptcy or insolved	ency proceed	dings?	Yes	☐ No
Are you or your business involved in any pending lawsuits?					☐ No
Is any applicant, or any director, executive office shareholder of a financial institution?	er or principal shareholder, an execut	ive officer, c	lirector, or principal	Yes	☐ No
Does your business use of store any hazardous/toxic materials or produce hazardous / toxic waste?					☐ No
Alliance Business Capital Inc.			D		

Does your company mainta	in Izazz nargan lifa inguranga an g		Additional Declarations continued						
	Does your company maintain key person life insurance on any owner, officer, of			☐ Yes ☐ No					
nsured	<u>Beneficiary</u>	<u>Amount</u>	<u>Agent</u>	<u>Phone:</u>					
ALLIANCE BUSINES	S CAPITAL DISCLOSURI	E AND THIRD-PART	TY FEES						
As part of the Loan Proc Survey Fees, Environm will be underwriting yo Partner may require as	ital will act as a Commercial Leriting decisions and for any loan cess, you may be responsible for nental Reports, or other Third-Papur loan request. In addition, you part of the Loan Process. Allian Party Report Fees. Completing	the payment of Third-Part arty Reports that are requi can expect to pay closing ace Business Capital has n	re as a result of this Comm y Fees which include but at red by the Alliance Busine costs fees, title insurance o control over these fees, i	re not limited to Appraisal Fees, ess Capital Lending Partner that and other fees that our Lending nor do we participate or receive					
ORROWER CERTIF	TICATION AND AUTHOR	IZATION							
information contained i are accurate to the best Commercial Loan Appl Partners as deemed nec or our assigns, to verify	indicates you have the authorition this Commercial Loan Applic of your knowledge. You hereby lication, as well as all subsequen ressary by Alliance Business Capy any and all information contains supplied to Alliance Business C	ration, as well as all subset give Alliance Business (at documentation supplied pital. Additionally, your sined in this Commercial	quent documents submitte Capital authorization to sha to Alliance Business Capit ignature below authorizes	ed to Alliance Business Capital, are information gathered in this tal, with our Business / Lending Alliance Business Capital, and					
Signature		Date							
Printed Name		Title							
Signature		Date							
Printed Name		Title							
Signature		Date							
Printed Name		Title							



Commercial Real Estate Loan Application Guarantors Information

GUARANTOR / OWNER 1						
First Name:	Middle Name:	Last Name:	Last Name:			
Date of Birth:	Birthplace:	SSN:				
Current Address:			Years:	Months:		
Previous Residence Address:			Years:	Months:		
Home Phone:	Cell Phone: Email: _					
U.S. Citizen: Yes No	Resident Alien: Yes No – if yes Resid	ent Alien #:				
Married: Yes No	Spouse Name if applicable:					
I certify the above information is correct:	Signature:	Signature: Date:				
GUARANTOR / OWNER 2						
First Name:	Middle Name:	Last Name:	ast Name:			
Date of Birth:	Birthplace:	SSN:				
Current Address:			Years:	_ Months:		
Previous Residence Address:			Years:	_ Months:		
Home Phone:	Cell Phone: Email: _					
U.S. Citizen: Yes No	Resident Alien: Yes No – if yes Resid	ent Alien #:				
Married: Yes No	Spouse Name if applicable:					
I certify the above information is correct:	Signature:	Dat	e:			
CHARANTOR / OWNER A						
GUARANTOR / OWNER 3						
First Name:						
Date of Birth:	Birthplace:	SSN:				
				_ Months:		
Previous Residence Address:			Years:	_ Months:		
Home Phone:						
U.S. Citizen: Yes No	Resident Alien: Yes No – if yes Resid	ent Alien #:				
Married: Yes No	Spouse Name if applicable:					
I certify the above information is correct:	Signature:	Dat	e:			
I certify the above information is correct:	Signature:	Dat	e:			