# **BUSINESS LOAN APPLICATION**

Requested Loan Amount\$\_\_\_\_\_ Loan Type



If applying for a checking account, would you like to include Overdraft One Protection for your account? 

Important Information About Procedures for Opening a New Account: To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. When you open an account, we will ask you for your identifying information. Each business owner must complete a separate application. You must be a member of CommonWealth One to obtain a business loan.

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OWNER/GUARANTOR INFORMATION								
First	Middle	Last		Suffix				
Date of Birth	Social Security Number	% of Business	Owned					
Address								
City, State, Zip								
Home Phone	Cell Phone							
Email Address								
OWNER/GUARANTOR MONTHLY INCOME INFORMATION*								
Employer		Duration	Years	Months				
City, State, Zip								
Work Phone								
Gross Monthly Income								
Other Income 1 Amount	t\$	Other Income	1 Description					
Other Income 2 Amount	t \$	Other Income	2 Description					
*Alimony, c	hild support and separate maintenance income d			not wish to have them				
	considered as a basis for	repaying this obligat	ion.					
	COMPANY IN	FORMATION						
Member Account Numb	per							
Business Name		City, State, Zip						
Entity Type		Phone		Fax				
TAX ID Number		Email Address						
DBA Name		Website Addre	ess					
Organized in the State o	f	Present Mana	gement Since					
Nature of Business		Number of Lo	cations	Number of Employees				
Most recent year's tax re	eturn Year	Interest Expen	ise					
Current Annual Gross Re	evenue	Officer's Comp	pensation					
Current Annual Net Prof	fit	Total Assets						
Depreciation Expense		Total Liabilities	S					
Date of Incorporation or	r Established Date	Net Worth/Eq	uity					
	MISCELLANEOUS	INFORMATION						
Has the business or any	principal/owner ever declared bankruptcy?			er agreement that would change				
□Yes □No			of the business	?				
		□Yes □No						
	rincipal/owner a party to any tax lien or lawsuit?		ess changed nam	nes in the past 5 years?				
□Yes □No		□Yes □No						
Has the business incurre	ed a loss in any of the past 3 years?*	Are any of the	business assets	pledged as collateral for any loan?				
□Yes □No		□Yes □No						
Are there any delinguen	at State or Federal taxes owed by the business?	Has the busine	ess or principal/o	owner ever settled a debt for less				
□Yes □No		than the amou						
		□Yes □No						
Are all principals/owner	s US citizens?							
ΠVes ΠNo								

ISC		

#### **Representation and Warranties:**

The information contained in this statement is provided with the intent of the undersigned to establish, modify or otherwise maintain an extension of credit from the credit union. The undersigned acknowledges and understands that the credit union is relying on information provided herein in deciding to grant or continue credit to the undersigned. Each of the undersigned represents, warrants and certifies that the information provided herein is true, correct and complete. Each of the undersigned agrees to notify the credit union immediately and in writing of any change in name, address, or employment and of any material adverse changes (1) in any of the information contained in the statement or (2) in the financial condition of any undersigned or (3) in the ability of any of the undersigned to perform its (or your) obligations to the credit union. In the absence of such notice or a new and full written statement, this should be considered as a continuing statement and substantially correct. If the undersigned fail to notify the credit union as required above, or if any of the information herein should prove to be inaccurate or incomplete in any material respect, we may declare the indebtedness of the undersigned or the indebtedness guaranteed by the undersigned, as the case may be, immediately due and payable. The credit union is authorized to make all inquiries we deem necessary to verify the accuracy of the information herein and to determine the creditworthiness of the undersigned. The undersigned authorize any person or consumer reporting agency to give information about our credit experience with the undersigned. As long as any obligation or guarantee of the undersigned to the credit union is outstanding, the undersigned shall supply annually an updated financial statement. This personal financial statement and any other financial information that the undersigned gives us shall be credit union property.

☐ I have read and agree to the above Representation and Warranties Agreement.

## **Commercial Use**

The undersigned certifies that any property and/or proceeds from the proposed request will be used by the applicant for commercial purpose only and not for any personal, family or household purposes, and that the proposed request would constitute a business loan which is exempted from the disclosure requirements of Regulation Z – Truth in Lending Act. The applicant agrees to indemnify and hold lender harmless from any and all claims, loss or damage resulting or caused by the request being subject to any of the provisions of the federal Consumer Credit Protection Act (Truth-in-Lending Act) and Regulation Z. The undersigned certifies that he/she has full authority to act on behalf of applicant in connection with the above referenced credit request.

☐ I have read and agree to the above Commercial Use Agreement.

## Permission to Obtain a Credit Report

By the box labled "I agree", below you authorize us to verify the information you submitted and to obtain credit reports concerning you. Upon your request, we will tell you if a credit report was obtained and give you the name and address of the credit reporting agency that provided the report. You warrant to us that the information you are submitting is true and correct. By submitting this application, you agree to allow us to receive the information contained in your application, as well as the status of your application.

□ I agree

## **Equal Credit Opportunity Act Notice**

The Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided that the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this credit union is: National Credit Union Administration, Office of Consumer Protection (OCP), Division of Consumer Compliance and Outreach (DCCO), 1775 Duke Street, Alexandria, VA 22314. Phone - (703) 518-1141; Fax - (703) 837-2460.

## **Right to Statement of Denial**

If CommonWealth One denies your application for credit, you tain the statement please contact CommonWealth One at 48 (60) days from the date you were notified of the Credit Union the denial within thirty (30) days of receiving your request.	75 Eisenhower Ave, Alexand	Iria, VA 22304 or by phone at 703-823-5211 within s	ixty
IGNATURE		DATE	
CREDIT UNION USE ONLY Date of Membership: Opened/Changed By: Government List(s) Checked: ☐ Treasury CIP List ☐ OFAC ☐ Approved By: By:		Membership Officer Approval:	 
☐ Credit Report ☐ Qualifile ☐ OFAC Verification	☐ Phone One PIN ☐ Onli	ne Banking Verification	