

COMMERCIAL LOAN REQUEST FORM

AFFILIATES List below all entities in which the company or any of the individuals listed in its ownership have a controlling interest. Use additional sheets if required.

AFFILIATE NAME	RELATED OWNERSHIP	PERCENTAGE OWNERSHIP
		%
		%
		%
		%
		%

ESTIMATED PROJECT BUDGET

ITEM	EQUITY	OTHER SOURCES	BANK LOAN	TOTAL COST
Land acquisition	\$	\$	\$	\$
New construction	\$	\$	\$	\$
Land and building acquisition	\$	\$	\$	\$
Building improvements and repairs	\$	\$	\$	\$
Acquisition of machinery and equipment	\$	\$	\$	\$
Inventory purchase	\$	\$	\$	\$
Working capital needs <i>(including accounts payable)</i>	\$	\$	\$	\$
Acquisition of an existing business	\$	\$	\$	\$
Repayment or refinancing of debts [+]	\$	\$	\$	\$
Closing costs	\$	\$	\$	\$
Other [+]	\$	\$	\$	\$
TOTAL AMOUNT	\$	\$	\$	\$

[+] SPECIFY: _____

LOAN REQUESTED: \$ _____

COMMERCIAL LOAN REQUEST FORM

COLLATERAL OFFERED FOR LOAN

Description	Estimated Market Value	Existing Liens
	\$	\$
	\$	\$
	\$	\$

PERSONAL GUARANTEES OFFERED

Name, Address & Social Security Number	Net Worth
	\$
	\$
	\$

I/we certify that all of the above information is true and correct to the best of my/our knowledge and belief. I/we hereby authorize the release to Hoffman Consulting Group all credit history and information required for the purpose of processing and evaluating the applicant's credit transaction. The undersigned also permit(s) Hoffman Consulting Group to release the applicant's credit information and otherwise exchange information regarding applicant's credit transaction to various business professionals involved in the transaction, including but not limited to, commercial real estate brokers, real estate agents, appraisers, accountants, attorneys, the U.S. Small Business Administration, and third party financial institutions.

SIGNATURE

TITLE

DATE

SIGNATURE

TITLE

DATE

SIGNATURE

TITLE

DATE

SIGNATURE

TITLE

DATE

COMPANY HISTORY

Please help us learn about your business. You may include any relevant information or supporting documentation as a separate exhibit.

Nature of the business and services provided _____

Describe your customer profile _____

KEY CUSTOMERS		KEY SUPPLIERS	
MAJOR COMPETITORS		KEY RISK FACTORS FOR THE BUSINESS	

Date company was acquired or began operations _____

Any significant changes during control? [] YES [] NO If YES, explain _____

What plans for future? _____

How will the loan requested help the company? _____

Will this funding generate employment? _____

SIGNATURE

DATE

AUTHORIZATION TO PULL COMPANY HISTORY REPORTS

The undersigned individual(s) hereby authorize(s) the release to Hoffman Consulting Group of all credit history and information required for the purpose of processing and evaluating the applicant's credit transaction. The undersigned also permit(s) Hoffman Consulting Group to release his/her credit information and otherwise exchange information regarding the applicant's credit transaction to various business professionals involved in the transaction, including but not limited to, commercial real estate brokers, real estate agents, appraisers, accountants, attorneys, the U.S. Small Business Administration, and third party financial institutions.

1. Name _____ Signature _____ Home Address _____	SSN _____ Date _____
2. Name _____ Signature _____ Home Address _____	SSN _____ Date _____
3. Name _____ Signature _____ Home Address _____	SSN _____ Date _____
4. Name _____ Signature _____ Home Address _____	SSN _____ Date _____
5. Name _____ Signature _____ Home Address _____	SSN _____ Date _____

MANAGEMENT RESUME

Please fill all spaces. If an item is not applicable or the information is not available, please indicate. You may include any relevant information or supporting documentation as a separate exhibit.

PERSONAL INFORMATION

NAME _____ SSN _____

DATE OF BIRTH _____ WHERE? _____

HOME (____) _____ BUSINESS (____) _____ EMAIL _____

ADDRESS _____

_____ FROM _____ TO _____

PREVIOUS ADDRESS _____

_____ FROM _____ TO _____

SPOUSE _____ SSN _____

ARE YOU A U.S. CITIZEN? YES NO, Alien Registration Number _____

EDUCATION

SCHOOL	DATES	MAJOR	DEGREE

MILITARY SERVICE

BRANCH _____ DATES OF SERVICE _____

WORK EXPERIENCES

Begin with more recent experience and list chronologically

1. Company name & location _____

From _____ To _____ Title _____

Duties _____

2. Company name & location _____

From _____ To _____ Title _____

Duties _____

3. Company name & location _____

From _____ To _____ Title _____

Duties _____

SIGNATURE

DATE