

COMMERCIAL LOAN PACKAGE CHECKLIST

GENERAL DOCUMENTS: Signed Commercial Loan Application (attached) ☐ Business Description (attached) or Business Plan Personal Financial Statement for each guarantor, complete and signed (attached) ☐ Applicant Employment History (attached) ☐ Business Debt Schedule (attached) Last 3 years business tax returns, including K-1 Schedules, and audited financial statements ☐ Last 3 years personal tax returns with all schedules for each guarantor ☐ Interim year to date profit and loss / balance sheet with prior year comparable ☐ Last 2 months of business bank statements ☐ Primary form of ID for all borrowers **ADDITIONAL DOCUMENTS: Real Estate Loans** Purchase Agreement ☐ Construction Contract or Bid for improvements ☐ Most recent property tax notice if available **Term Loans & Lines of Credit** Detailed purchase agreement or invoice for equipment or vehicle to be purchased (Year, Make, Model, options, mileage and/or hours used) Detailed equipment list with year, make, model, options, mileage and/or hours used Detailed list of Accounts Receivable

What you can expect:

A commercial loan officer will contact you within one business day after we receive your application to discuss your request. PFCU will attempt to make the decision on the forms you supplied; however, it is possible that additional information may be required. Incomplete or unsigned applications may delay your request.

Can PFCU contact you via text messaging?	Yes - (Include number here)
can i i co contact j ca i a tent i i costa a a a	res (meiade namber nere)

□ No



Commercial Loan Application

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 or business that opens an account.

What this means for you: When you open an account, we will ask for your name, address, date of birth, if applicable, and other information that will allow us to identify you.

We may also ask to see your driver's license or other identifying documents.

				8						
Credit Request	ed									
	tal Funds Needed:				Term of Credit:			Loan Type:		
Less Funds provided by you										
			Loan Purp	ose:						
	tal Loan Needed:									
Business Inform	<u>nation</u>				l==					
Business Name:					DBA Nam	ne (if applical	ble):			
Address: City:			•		State:		Zip Code:			
Phone: Fax:					Website/Email	1:				
EIN:		Date Establish	ed:		Owner Sir	Owner Since: # Employees:			# Locations:	
Type of Business:	○ Ser			nolesale		O Distribut		C	Other	
	○ Re	etail		ıfacturing		O Real Est				
	☐ Individual		□ Limited	Partnership		☐ Unincorp	orated Associa	tion	□ C-Corp	
Business Structure:	☐ Sole Proprieto	rship	□ Limited	Liability Pa	rtnership	☐ Unincor	porated Organiz	zation	□ S-Corp	
	☐ General Partne	ership	□ Limited	Liability Co	ompany	□ Corporat	tion		□ Other	_
Owner/Guaran	tor Informa	tion								
Name:			SSN:			Title:			DOB:	
Address:			City:		<u> </u>	State:		Zip Code:		
Currently Rent or Own	Currently Rent or Own: From: To:		То:		% Ownership of Business:			PFCU Account #		
Phone:		Email:		•		Marital Sta	Marital Status: Single		Married Separated	
Name:		•	SSN:			Title:			DOB:	
Address:			City:			_L	State:		Zip Code:	
Currently Rent or Own	1:	From:	То:			% Ownership of Business:			PFCU Account #	
Phone:		Email:		•		Marital Sta	tus: Single		Married Separated	
Name:			SSN:			Title:			DOB:	
Address:			City:				State:		Zip Code:	
Currently Rent or Own: From: To:		То:		% Ownersh	nip of Business:		PFCU Account #			
Phone:		Email:			Marital Status: Single			Married Separated		
Name:			SSN:			Title:			DOB:	
Address:			ı	City:		L	State:		Zip Code:	
Currently Rent or Owr	1:	From:		То:		% Ownersh	nip of Business:		PFCU Account #	
Phone:		Email:				Marital Sta	tus: Single		Married Separated	

Collateral Offered By Appl	icant					
Description	Valı	ue	Total Liens	Ownership Appl		Creditor Name
				☐ Purchase N ☐ Present	-	
				□ Purchase N □ Present	-	
				□ Purchase N □ Present	-	
				□ Purchase N □ Present	-	
Professional Services						
Accounting Firm:	Contact Nan	ne:		Phone # or Em	nail:	
Insurance Agency:	Contact Nan	ne:		Phone # or Em	nail:	
Miscellaneous Information						
HAS THE BUSINESS CHANGED NA	MES IN THE LAST 5 YEAR	RS?		[] YES		[] NO
HAS THE BUSINESS RELOCATED I YEARS?	FROM ONE COUNTY TO A	NOTHER I	N THE PAST 5	[]YES		[]NO
IS THE BUSINESS FOR SALE OR UN OWNERSHIP OF THE BUSINESS? DO YOU HAVE AN UP TO DATE BU				[]YES		[]NO
WITH YOUR APPLICATION)				[]YES		[] NO
HAS THE BUSINESS OR ANY PRIN	CIPAL/OWNER EVER DEC	LARED BA	ANKRUPTCY?	[] YES		[] NO
IS THE BUSINESS OR ANY PRINCI		ANY LIEN	OR LAWSUIT?	[] YES		[] NO
ARE YOU A MARIJUANA RELATEI ARE THERE ANY DELINQUENT ST		OWED BY	THE BUSINESS?	YES []YES		NO []NO
Required Signatures						
By signing below you certify that to the						
documents is true and correct. You agree applying for is for a business purpose. Applicant's credit relationship to busine property of PFCU whether or not the loapplicant(s), and guarantor(s), as appropureau reports, accessing information al means if applicable. Borrower further g commercial lending including sharing the	You authorize PFCU or its assess credit reporting and credit an is granted. Applicant(s) signiate grants to the credit union bout borrower, co-applicant(s rants to credit union the right	signs to make bureau ager gning the apon the author, and guara to share this arty for purp	e inquiries to the Inter- acies and associations of plication is/are indeed with the use reasonable intor(s), as appropriate information with third poses of underwriting to	mal Revenue Se and other credit authorized to a means to verify from other thir d parties as reas	ervice, and to prors. This application information informatical party informatical informatica	rovide information concerning eation remains the sole the borrower. Borrower, co- ormation by requesting credit ation providers, and other
Applicant Signature			Title:	Date:		
Applicant Signature		7	Title:	Date:		
Applicant Signature			Title:		Date:	
Applicant Signature			Title: Date:			
For Lender's Use Only						
Officer No./Name	Approved By	(Committee Date		Application D	ate
Decision Comments:	Denied 🗌 (Countered	☐ Conditional	Approval		

Business Description
(Use separate attachments to answer questions if necessary or substitute with a business plan)

Nature of Business:
Type of Products/ Services:
Customer Profile:
Competitors How do you differentiate your company/ product from those of your competitors?
Major Past Accomplishments:
Future Plans for Growth/ Expansion:
How will this loan benefit your company?



Personal Financial Statement

The following is submitted for the purpose of procuring, establishing and maintaining credit with you in behalf of the undersigned or persons, forms, or corporations in whose behalf the undersigned may either severally or jointly with others execute a guaranty in your favor. The undersigned warrants that this financial statement is true and correct until a written notice of changes is given by the undersigned. Phone: Name: Business Phone: _____ Business Name: _____ Address: City, State, & ZIP: **Assets** (Omit Cents) Liabilities (Omit Cents) Loans Payable to Banks & Others Cash On Hand at PFCU \$ (Describe in Sec. 2) Loans Payable to Banks Unsecured Cash On Hand at other institutions \$ (Describe in Sec. 2) IRA or Other Retirement Accounts \$ Auto Loans & Leases \$ Accounts & Notes Receivable \$ Loan on Life Insurance \$ Mortgages on Real Estate (Describe in Stocks and Bonds (Describe in Sec. 3) \$ Section 4) \$ Credit Cards \$ Real Estate (Describe in Sec. 4) Automobile (Present Value) \$ Unpaid Income Tax (Describe in Sec. 7) Book Value of Business Ventures \$ Other Liabilities (Describe in Sec. 8) (Describe in Sec. 6) Personal/Other Assets \$ Total Liabilities \$ (Describe in Sec. 5) Life Insurance - cash surrender value only (Describe in Sec. 9) Total Assets \$ Net Worth \$ Section 1. Source of Income **Contingent Liabilities** Salary.....\$ As Endorser or Co-Signer\$ Net Investment Income\$ Legal Claims & Judgements..... \$ Real Estate Income\$ Provision for Federal Income Tax\$ Other Special Debt\$ Other Income (Describe Below)\$ Description of Other Income in Section 1 (ex. Child Support, Alimony, or any additional income) Section 2. Loans Payable to Banks and Others (Use Attachments if necessary. Each attachment must be signed.) Name and Address of Noteholder(s) Original Balance Current Balance Payment Type of Collateral

Number of Shares Name of Securities Cost Market Value Total Value Section 4. List each parcel separately. Use attachment if necessary. Each attachment must be signed. Real Estate Owned Property A Property B Property B Property C Property Address Date Purchased Original Cost Present Market Value Mortgage Holder Mortgage Balance Mortgage Balance Mortgage Payment Section 5. Other Personal Property and Other Assets (Describe, and if any is pledged as security, state name of lien holder, amount of lier fibroschold liens, ATVs, Boats, Valuables/Collections, etc.) Section 6. Business Ventures (Include business name, % of ownership, your dife, line of business, and years in business.) Section 7. Unpaid Taxes (Describe in detail, as to type, to whom payable, when due, and amount.) Section 8. Other Liabilities (Describe in detail) Section 9. Life Insurance Held (Give face amount and cash value of policies - name of insurance company and beneficiaries.) Personal 8 Miscellaneous Information Do you have a will? Are you a defendant in any suite or legal action? Have you ever declared bankruptcy? (If yes, please provide year bankruptcy filed.) By signing this form, Lectify that all information on this form and any additional supporting information is true and complete to the best of my knowledge. Signature: Print Name: Date: Date: Date: Date:	Section 3. Stocks and Bonds (Use attachments if necessary. Each attachment must be signed.)					be signed.)	
Real Estate Owned Type of Property Type of	Number of Shares	Name of Securities	Cost		Market Value	Total Value	
Real Estate Owned Type of Property Type of							
Real Estate Owned Type of Property Type of Property Property Address Date Purchased Original Cost Present Market Value Mortgage Holder Mortgage Balance Mortgage Balance Mortgage Balance Mortgage Payment Section 5. Other Personal Property and Other Assets (Describe, and if any is pledged as security, state name of lien holder, amount of lier (Household liens, ATVs, Balas, Valuables/Collections, etc.) Section 5. Other Personal Property and Other Assets (Describe, and if any is pledged as security, state name of lien holder, amount of lier (Household liens, ATVs, Balas, Valuables/Collections, etc.) Section 6. Business Ventures (Include business name, % of ownership, your title, line of business, and years in business.) Section 7. Unpaid Taxes (Describe in detail, as to type, to whom payable, when due, and amount.) Section 9. Life Insurance Held (Give face amount and cash value of policies - name of insurance company and beneficiaries.) Personal 8. Miscellaneous Information Por you a defendant in any suite or legal action? Have you ever declared bankruptcy? (if yes, please provide year bankruptcy field.) By signing this form, Leartily that all information on this form and any additional supporting information is true and complete to the best of my knowledge. Signature: Date: Date:							
Real Estate Owned Type of Property Type of							
Real Estate Owned Type of Property Indicentification (Consecutal or VL) Property Address Date Purchased Original Cost Present Market Value Mortgage Holder Mortgage Balance Mortgage Payment Section 5. Other Personal Property and Other Assets (Describe, and if any is pledged as security, state name of lien holder, amount of lier (Household Rems, ATVs, Boass, Valuables Collections, etc.) serd payment amount) Section 6. Business Ventures (Include business name, % of ownership, your title, line of business, and years in business.) Section 7. Unpaid Taxes (Describe in detail, as to type, to whom payable, when due, and amount.) Section 9. Life Insurance Held (Give face amount and cash value of policies - name of insurance company and beneficiaries.) Personal 8. Miscellaneous Information Do you have a will? Have you ever declared bankruptcy? (if yes, please provide year bankruptcy filed.) By signing this form, I certify that all information on this form and any additional supporting information is true and complete to the best of my knowledge. Signature. Date: Date:	Section 4.	List each pa	arcel separately. Us	se attachment	I if necessary. Each attachment r	 nust be signed.	
Property Address Date Purchased Original Cost Present Market Value Mortgage Holder Mortgage Balance Mortgage Payment Section 5. Other Personal Property and Other Assets (Describe, and if any is pledged as security, state name of lien holder, amount of lier (Household Items, ATV's, Boats, Valuables/Collections, etc.) Section 6. Business Ventures (Include business name, % of ownership, your title, line of business, and years in business.) Section 7. Unpaid Taxes (Describe in detail, as to type, to whom payable, when due, and amount.) Section 9. Life Insurance Held (Give face amount and cash value of policies - name of insurance company and beneficiaries.) Personal 8. Miscellaneous Information Do you have a will? Have you ever declared bankruptcy? (If yes, please provide year bankruptcy flied.) By signing this form, I certify that all information on this form and any additional supporting information is true and complete to the best of my knowledge. Signature: Date: Date: Date:	Real Estate Owned		, ,				
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Original Cost Present Market Value Mortgage Holder Mortgage Balance Mortgage Payment Section 5. Other Personal Property and Other Assets (Describe, and if any is pledged as security, state name of lien holder, amount of lier (Household Items, ATV's, Boats, Valuables/Collections, etc.) Section 6. Business Ventures (Include business name, % of ownership, your title, line of business, and years in business.) Section 7. Unpaid Taxes (Describe in detail, as to type, to whom payable, when due, and amount.) Section 8. Other Liabilities (Describe in detail.) Section 9. Life Insurance Held (Give face amount and cash value of policies - name of insurance company and beneficiaries.) Personal & Miscellaneous Information Do you have a will? Have you ever declared bankruptcy? (If yes, please provide year bankruptcy filed.) By signing this form, I certify that all information on this form and any additional supporting information is true and complete to the best of my knowledge. Signature: Date: Date: Date: Date:	Property Address						
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Mortgage Payment Section 5. Other Personal Property and Other Assets (Describe, and if any is pledged as security, state name of lien holder, amount of lier and payment amount.) Section 6. Business Ventures (Include business name, % of ownership, your title, line of business, and years in business.) Section 7. Unpaid Taxes (Describe in detail, as to type, to whom payable, when due, and amount.) Section 8. Other Liabilities (Describe in detail.) Section 9. Life Insurance Held (Give face amount and cash value of policies - name of insurance company and beneficiaries.) Personal & Miscellaneous Information Do you have a will? Have you ever declared bankruptcy? (If yes, please provide year bankruptcy filed.) By signing this form, I certify that all information on this form and any additional supporting information is true and complete to the best of my knowledge. Signature: Date: Date:	Mortgage Holder						
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Have you ever declared bankruptcy? (If yes, please provide year bankruptcy filed.) By signing this form, I certify that all information on this form and any additional supporting information is true and complete to the best of my knowledge. Signature: Print Name: Date:	Personal & Miscella	neous Information					
By signing this form, I certify that all information on this form and any additional supporting information is true and complete to the best of my knowledge. Signature: Print Name: Date: Date:	Do you have a will?			Are you a	defendant in any suite or	legal action?	
Signature:	Have you ever declared bankruptcy? (If yes, please provide year bankruptcy filed.)						
Signature: Date:	By signing this form, I certify that all information on this form and any additional supporting information is true and complete to the best of my knowledge.						
Signature:Date:	Signature: Print Name:				Date:		
EL THIC MALINO.	Signature:				Date:		



Applicant Employment History

Applicant 1					
Name:		Current Emp	loyer:		
Income:	Position:	L	Hire Date:		
Street Address:					
City:	State:		ZIP:		
Previous Employer:	I	Income:			
Position:	Dates of Employ	yment: From:	To:		
Street Address:	L				
City:	State:		ZIP:	ZIP:	
Applicant 2		1			
Name:		Current Emp	loyer:		
Income:	Position:	l l	Hire Date:	Hire Date:	
Street Address:					
City:	State:		ZIP:		
Previous Employer:		Income:			
Position:	Dates of Employ	yment: From:	To:		
Street Address:	I				
City:	State:		ZIP:		

	Current E	Employer:
P	sition:	Hire Date:
L		
S	ate:	ZIP:
	Income:	
[tes of Employment: From:	То:
S	ate:	ZIP:
	Current E	Employer:
P	sition:	Hire Date:
S	ate:	ZIP:
	Income:	<u> </u>
	tes of Employment: From:	То:
s	ate:	ZIP:



Credit official							
Business Debt Schedule							
Business Name: Indebtedness: Furnish the following information for all installment debts, contracts, notes, and mortgages payable for the business. Indicate by asterisk (*) items to be paid with loan proceeds and your reason for paying the debt off. The present balance should agree with the information provided on the current Personal Financial Statement or Balance sheet submitted. Please do not include accounts payable or accrued liabilities.							
Creditor Name and Address	Original Date	Interest Rate	Maturity Date	Original Amount	Present Balance	Monthly Payment	Collateral/Security
	-						
	<u> </u>					1	
	1						
	1						

Personal Information Verification Form

Date Completed:
The information contained in this statement is provided to the Lender for the purpose of obtaining, or
maintaining credit with the Lender, or to support the applicant's joint or individual guarantee on behalf of other persons, firms, or corporations who are obtaining credit accommodations with the Lender. The applicant
understands that the Lender will rely on the information given in making its decision to either grant or
maintain such credit. The undersigned represents and warrants that the information provided is true and complete and that you may consider this statement as continuing to be true and correct until a written notice
of a change is given to you by the undersigned. Lender is authorized to make all inquiries deemed necessary to verify the accuracy of the statements made herein, and to determine your credit worthiness.
Applicant agrees that the lender, along with its employees, agents and Member Business Services, LLC d/b/a
Commercial Alliance, governmental or quasi-governmental agencies such as SBA, USDA and MCDC, service providers and any owners or potential owners of any interest in any loan which is originated from my
application, may obtain, share and use any tax return information for any purpose permitted by law, including
(i) preparing a term sheet or offer to lend, and (ii) considering, approving, monitoring, servicing and participating a loan.
Provide Complete Name of Borrower or Guarantor(s):
Are there any assets pledged other than as described on the schedules of Personal Financial Statements? If
yes, describe below:
yes, describe below.
Are you a member, partner or officer in any other venture which could result in individual liabilities? If yes,
describe below:
Are you obligated to pay alimony, child support or separate maintenance payments? If yes, describe below:

Are you a defendant in any suits or legal action(s)? If yes, describe below:	
Do you have any State or Federal Tax Liens? If yes, describe below:	
Do you have a will? If yes, name the Executor:	
Do you have a Revocable Trust? If yes, provide a copy of the Trust Agreement.	
Are you the grantor or beneficiary of an Irrevocable Trust? If yes, provide a co	py of the Trust Agreement.
Have you been audited or any of your business ventures been audited by the lexplain the reason for the audit below:	RS? If so, provide what year and
Have you ever declared bankruptcy? If yes, provide details below:	
The undersigned certifies that the information contained in this personal information verification form is tru statement as continuing to be true and correct until a written notice of a change is given to you by the under by a fine of not more than \$5,000 or imprisonment for not more than two years or both to knowingly make information, under provisions of Title 18, United States Code, Section 1014. The undersigned certifies that relevant credit inquiries can be engaged or started to make appropriate credit decisions.	rsigned. It may be a federal crime punishable false statements concerning any of the above
Signature	Date
Spouse Signature (if joint)	 Date