


|                            |   |  |                                   |     |
|----------------------------|---|--|-----------------------------------|-----|
| SBA Loan Number            |  | <b>U.S. SMALL BUSINESS ADMINISTRATION<br/>LENDER'S APPLICATION FOR GUARANTY<br/>OR PARTICIPATION</b> | Loan Submitted As:                |     |
|                            |   |  | <input type="checkbox"/> Reg 7(a) |     |
|                            |   |  | <input type="checkbox"/> CLP      |     |
| Business Name of Applicant |   | Applicant NAICS Code:  | <input type="checkbox"/> PLP      |     |
| Name of Lender             |   | Telephone (Inc. A/C)   | FIRS No. (SBA's Use)              |     |
| Street Address             |   | City   | State                             | ZIP |

**WE PROPOSE TO THE FOLLOWING LOAN TERMS:**

|                        |                  |                                    |                  |
|------------------------|------------------|------------------------------------|------------------|
| Guaranteed Loan        | Lender's Share % | SBA's Share %                      | Term of Loan     |
| Amount of Loan         |                  | Payment Beginning                  | Monthly Payment  |
| \$ _____               |                  | _____ Months from Date of Note     | \$ _____         |
| Lender's Interest Rate |                  | If Interest Rate is to be Variable | Base Rate Source |
| % Per Annum            |                  | Adjustment Period                  |                  |
|                        |                  | Base Rate                          | Spread           |

CONDITIONS OF LENDER (e.g. Insurance requirements, standbys, other conditions. Use additional sheet(s))

I approve this application to SBA subject to the terms and conditions outlined above. Without the participation of SBA to the extent applied for we would not be willing to make this loan, and in our opinion the financial assistance applied for is not otherwise available on reasonable terms. I certify that none of the Lender's employees, officers, directors, or substantial stockholders (more than 10%) have a financial interest in the applicant.

|   |       |      |
|---|-------|------|
| Lender Official (Please Type or Print Name under Signature) | Title | Date |
|---|-------|------|

**ON PLP SUBMISSIONS ONLY: I approve and certify that the applicant is a small business according to the standards in 13 CFR 121, the loans proceeds will be used for an eligible purpose, and the owners and managers of the applicant business are of good character.**

|  |       |      |
|--|-------|------|
| Approving/Certifying Lender Official (Please Type or Print Name under Signature) | Title | Date |
|--|-------|------|

**FOR SBA USE ONLY**

|                                |                                  |                                  |                 |
|--------------------------------|----------------------------------|----------------------------------|-----------------|
| Loan Officer's Recommendations | <input type="checkbox"/> Approve | <input type="checkbox"/> Decline | State Reason(s) |
|--------------------------------|----------------------------------|----------------------------------|-----------------|

|           |       |      |
|-----------|-------|------|
| Signature | Title | Date |
|-----------|-------|------|

|                                  |                                  |                                  |                 |
|----------------------------------|----------------------------------|----------------------------------|-----------------|
| Other Recommendation if Required | <input type="checkbox"/> Approve | <input type="checkbox"/> Decline | State Reason(s) |
|----------------------------------|----------------------------------|----------------------------------|-----------------|

|           |       |      |
|-----------|-------|------|
| Signature | Title | Date |
|-----------|-------|------|

**THIS BLOCK TO BE COMPLETED BY SBA OFFICIAL TAKING FINAL ACTION**

|                                  |                                  |                 |
|----------------------------------|----------------------------------|-----------------|
| <input type="checkbox"/> Approve | <input type="checkbox"/> Decline | State Reason(s) |
|----------------------------------|----------------------------------|-----------------|

|           |       |      |
|-----------|-------|------|
| Signature | Title | Date |
|-----------|-------|------|

**INSTRUCTIONS:** Lender will complete and enclose as part of this application package, all working papers, support material, and agreements requested herein, specifically including:

1. Balance sheet and ratio analysis - comments on trends, debt to worth, and current ratio.
2. Lender's analysis of repayment ability.
3. Management skill of the applicant.
4. Collateral offered and lien position, and analysis of collateral adequacy.
5. Lender's credit experience with the applicant. Identify weaknesses.

### FINANCIAL SPREAD

In Column 1 please show the most recent balance sheet figures of an existing business or the initial equity investment of a start-up business or the purchase of a business. Columns 2 and 3 are to reflect adjusting entries, the use of loan proceeds, and loan repayment. Column 4 is to reflect the balance sheet of the business immediately following loan disbursement. Base the financial analysis on Column 4 figures.

| BALANCE SHEET             | As of | Fiscal Year Ends | AUDITED <input type="checkbox"/> | UNAUDITED <input type="checkbox"/> |
|---------------------------|-------|------------------|----------------------------------|------------------------------------|
|                           |       | DEBIT            | CREDIT                           | PRO FORMA                          |
| Assets                    |       |                  |                                  |                                    |
| Cash                      | \$    | \$               | \$                               | \$                                 |
| Accounts Rec.             |       |                  |                                  |                                    |
| Inventory                 |       |                  |                                  |                                    |
| Other                     |       |                  |                                  |                                    |
| Total Current Assets      |       |                  |                                  |                                    |
| Fixed Assets              |       |                  |                                  |                                    |
| Other Assets              |       |                  |                                  |                                    |
| Total Assets              | \$    | \$               | \$                               | \$                                 |
| Liabilities & Net Worth   |       |                  |                                  |                                    |
| Accounts Payable          | \$    | \$               | \$                               | \$                                 |
| Notes Payable             |       |                  |                                  |                                    |
| Taxes                     |       |                  |                                  |                                    |
| Other                     |       |                  |                                  |                                    |
| SBA                       |       |                  |                                  |                                    |
| Total Current Liabilities | \$    | \$               | \$                               | \$                                 |
| Notes Payable             | \$    | \$               | \$                               | \$                                 |
| SBA                       |       |                  |                                  |                                    |
| Other                     |       |                  |                                  |                                    |
| Total Liabilities         | \$    | \$               | \$                               | \$                                 |
| Net Worth                 | \$    | \$               | \$                               | \$                                 |
| Total Liab. & Net Worth   | \$    | \$               | \$                               | \$                                 |

| Profit & Loss                | PRIOR THREE YEARS |    |    | INTERIM | PROJECTIONS |    |
|------------------------------|-------------------|----|----|---------|-------------|----|
| Sales                        | \$                | \$ | \$ | \$      | \$          | \$ |
| Depreciation                 |                   |    |    |         |             |    |
| Income Taxes                 |                   |    |    |         |             |    |
| W/D Officer Comp.            |                   |    |    |         |             |    |
| Net Profit after Tax/Deprec. | \$                | \$ | \$ | \$      | \$          | \$ |

### PRO FORMA SCHEDULE OF FIXED OBLIGATIONS

|  | YEAR 1 | YEAR 2 | YEAR 3 | YEAR 4 |
|--|--------|--------|--------|--------|
|  | \$     | \$     | \$     | \$     |

Lender's Analysis:

The estimated burden for completing this form is 2 hours per response. You will not be required to respond to collection of information unless it displays a currently valid OMB approval number. Comments on the burden should be sent to U.S. Small Business Administration, Chief, AIB, 409 3rd St., S.W. Washington, D.C. 20416 and Desk Office for Small Business Administration, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, D.C. 30503. **OMB Approval (3245-0016)** PLEASE DO NOT SEND FORMS TO OMB.