



We're The Local Bank That's *Truly* Local.

**COMMUNITY BANK OF BROWARD  
BUSINESS CREDIT APPLICATION**

**1. TELL US ABOUT THE REQUEST**

Amount Requested: \_\_\_\_\_  New  Renewal

Type:  Line of Credit  Term Loan  Term Requested \_\_\_\_\_  Other: \_\_\_\_\_

Purpose: \_\_\_\_\_

Collateral: \_\_\_\_\_

Source of Down Payment: \_\_\_\_\_

**2. TELL US ABOUT YOUR BUSINESS**

Will the business be a:  Borrower or  Co-Borrower on this credit? E-mail address: \_\_\_\_\_

Legal business name: \_\_\_\_\_ Doing Business As: \_\_\_\_\_

Street: \_\_\_\_\_ Suite: \_\_\_\_\_ Tax ID \_\_\_\_\_  Business Applied for

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Owner since: \_\_\_\_\_ Time in Industry: \_\_\_\_\_ Primary Product/Service \_\_\_\_\_

Legal Description:  Sole Proprietorship  Partnership  Sub S-Corporation  Corporation  LLC Corporation  Other (specify)

**3. TELL US ABOUT YOURSELF**

All Principals, Owners, Partners, and Members will be obligated for this credit and must complete the following information. Attach additional sheets as needed.

1. Last Name First Name Middle Initial Social Security Number Date of Birth  
( )

Home Address: Street City State Zip Home Telephone Number E-mail address

Residential status:  Homeowner  Rent  Other

Employment Information:  Self-Employed  Retired  Other Employer Name \_\_\_\_\_ Start Date: \_\_\_\_\_

Gross (Before Tax) Income Sources\* \_\_\_\_\_

Salary: \_\_\_\_\_ Net How Often? \_\_\_\_\_ Other: \$ \_\_\_\_\_ How Often: \_\_\_\_\_ Personal Net Worth: \_\_\_\_\_

Will this individual be a:  Borrower  Co-Borrower or  Guarantor on this credit?

2. Last Name First Name Middle Initial Social Security Number Date of Birth  
( )

Home Address: Street City State Zip Home Telephone Number E-mail address

Residential status:  Homeowner  Rent  Other

Employment Information:  Self-Employed  Retired  Other Employer Name \_\_\_\_\_ Start Date: \_\_\_\_\_

Gross (Before Tax) Income Sources\* \_\_\_\_\_

Salary: \_\_\_\_\_ Net How Often? \_\_\_\_\_ Other: \$ \_\_\_\_\_ How Often: \_\_\_\_\_ Personal Net Worth: \_\_\_\_\_

Will this individual be a:  Borrower  Co-Borrower or  Guarantor on this credit?

**Notice: We intend to apply for Joint Credit and/or Guaranty the Loan (initials) X**

\*Notice: Alimony, child support, separate maintenance need not be revealed if you do not want it considered as a basis for repaying this obligation

**4. TELL US ABOUT YOUR BUSINESS ACCOUNTS**

Please list the financial institutions where the business Depository accounts are maintained (attach schedule, if needed).

Account type	Financial Institution	Current Balance	Average
<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Other	_____	\$ _____	\$ _____
<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Other	_____	\$ _____	\$ _____

**5. LIST ALL BUSINESS INSTALLMENT DEBTS, LINES OF CREDIT, NOTES, MORTGAGES AND CONTRACTS/LEASES PAYABLE. (attach schedule, if needed)**

Financial Institution	Type of Debt	Original Amount	Present Balance	Interest Rate	Maturity Date	Monthly Payment	Collateral Pledged

**6. LIST OF REQUIRED INFORMATION**

I. THE FOLLOWING INFORMATION MUST ACCOMPANY THIS SIGNED CREDIT APPLICATION. IF APPROPRIATE FINANCIAL INFORMATION (AS DEFINED HEREIN) IS NOT PROVIDED, WE WILL BE UNABLE TO PROCESS YOUR REQUEST.

- Business Financial Statements for the past three (3) years (most recent should be within last 13 months) – dated and signed by principal/owner
- Current Interim Period Financial Statement (within the last 6 months) for the business
- Complete Business Income Tax Returns (including all schedules) for the past three (3) years.  
(Proprietors please submit individual income tax return with Schedule C for the past three (3) years)
- Current Personal Financial Statements \* on Community Bank of Broward's form from all principals/owners of the business (within the last 12 months) dated and signed by principal/owner
- Complete Personal Tax Returns for the past (2) years from all principals/owners of the business (including all schedules, W-2's and K-1's)
- Copy of invoice if funds are to be used to purchase fixed assets (Purchase Order for vehicles)
- Accounts Receivable Aging – *if request is for line of credit*

\*These forms may be obtained from your Community Bank of Broward representative.

- Please attach copies of:
- Corporation – Articles of Incorporation
  - Limited Liability Company the equivalent certificate
  - Partnership Certificates of Partnership if the partnership is registered with any state (if applicable)
  - LLC's Operating Agreement (if applicable)
  - Partnership Agreement (if applicable)

**II. IF THIS LOAN IS TO BE SECURED BY REAL ESTATE, PLEASE INCLUDE:**

- For Purchase Transactions: Copy of purchases contract  For Second Mortgages: Copy of most recent mortgage history statement
- For Income Property: Copies of current rent roll and/or projected rental income/expense (if applicable), and if held in separate partnership or corporation, 2 years tax returns

**7. MISCELLANEOUS INFORMATION**

Has the business or any principal/owner ever declared bankruptcy?  Yes  No Are the principals/owners U.S. Citizens or have LPR Status?  Yes  No

Is the business or any principal/owner a party to any lien or lawsuit?  Yes  No

Is the business or any principal/owner currently delinquent on any taxes?  Yes  No

If you answered Yes to any of the above questions, please attach details.

Do you own any other business?  Yes  No If yes, please specify \_\_\_\_\_

Who is the CPA? \_\_\_\_\_ For How Long? \_\_\_\_\_ Phone Number (\_\_\_\_) \_\_\_\_\_

**Are there any investors in the transaction who are not owners, members, partners, officers of the Borrower?**

**If yes, provide & attach details. Yes  No**

**8. REGULATION O: Read and complete if applicable**

Are you (applicant, co-applicant, and/or guarantor) a Director, Executive Officer, or Principal Shareholder of a Financial Institution or are you a Related Interest of one of these Individuals?  Yes  No If yes, please state the Financial Institution \_\_\_\_\_

Financial Institution	City	State

**U.S.A. Patriot Act Notice:** Community Bank of Broward is required, by federal regulations, to obtain, verify, and record identification from any person seeking to open a new account or being added as a signatory to an existing account(s). Community Bank of Broward cannot waive these requirements under provisions of Section 326 of the U.S.A. Patriot Act.

**CREDIT DENIAL NOTICE.** If your gross revenues were \$1,000,000 or less in your previous fiscal year, or you are requesting trade credit, a factoring agreement, or similar types of business credit in this Commercial Loan Application, and if your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement please contact:  
**COMMERCIAL LOAN DEPARTMENT**  
**COMMUNITY BANK OF BROWARD**  
 2400 N. Commerce Parkway, Suite 200  
 Weston, FL 33326  
 Phone #954-659-0000  
 Within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement. The Equal Credit Opportunity Notice that follows describes additional protections extended to you.

**EQUAL CREDIT OPPORTUNITY NOTICE.** The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (providing the applicant has the capacity to enter into a binding contract), because all or a 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 creditor is:  
 Federal Deposit Insurance Corporation  
 Consumer Response Center  
 2345 Grand Boulevard, Suite 100  
 Kansas City, MO 64108

**SIGNATURES.** By signing below, Loan Applicant submits this application and the information provided on all accompanying financial statements and schedules for the purpose of obtaining credit and represents that the information submitted is accurate and complete. Loan Applicant acknowledges that representations made in this application will be relied on by Lender in evaluating this application and, if approved, in extending credit. Loan Applicant represents that none of the parties named in this application have relied on advice from the Lender in applying for or receiving any credit. Loan Applicant acknowledges that Lender has not made any commitment to approve this application and extend credit, unless otherwise agreed to in writing. Lender is authorized to conduct any inquiries it decides are necessary to verify the accuracy of the information contained in this application and to use any reasonable method to determine the creditworthiness of the Loan Applicant. Lender is also authorized to answer any questions from others about Lender's credit experience with the parties in this application. Loan Applicant will promptly notify Lender of any subsequent changes, which would affect the accuracy of this application, and will provide all documents and information that Lender decides are necessary to complete this application. Loan Applicant authorizes Lender to retain this application, whether or not Lender approves any extension of credit. Any intentional misrepresentation of the information contained herein could result in criminal action under federal law. In addition, each individual signing below authorizes the Creditor to check their individual credit account and employment history and have a credit reporting agency prepare a consumer credit report on them.

**COMMERCIAL USE:** THE UNDERSIGNED CERTIFIES THAT ANY PROPERTY AND/OR PROCEEDS FROM THE PROPOSED REQUEST WILL BE USED BY THE APPLICANT FOR COMMERCIAL PURPOSES 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 REQUIRMENTS OF REGULATION Z - TRUTH IN LENDING OF THE BOARD OF GOVERNORS OF THE FEDERAL RESERVE SYSTEM. THE APPLICANT AGREES TO INDEMNIFY AND HOLD COMMUNITY BANK OF BROWARD HARMLESS FROM ANY AND ALL CLAIMS, LOSS OF DAMAGE RESULTING OR CAUSED BY THIS REQUEST, BEING SUBJECT TO ANY OF THE PROVISIONS OF THE FEDERAL CONSUMERS CREDIT PROTECTION ACT (TRUTH-IN LENDING ACT) AND REGULATION "Z" OF THE BOARD OF GOVERNORS OF THE FEDERAL RESERVE SYSTEM.

THE UNDERSIGNED CERTIFIES THAT HE/SHE RECEIVED A COPY OF THIS APPLICATION AND HAS FULL AUTHORITY TO ACT ON BEHALF OF APPLICANT IN CONNECTION WITH THE ABOVE-REFERENCED CREDIT REQUEST.

APPLICANT SIGNATURE (BY) _____	TITLE _____	DATE _____	
CO-APPLICANT SIGNATURE (IF ANY) _____	TITLE _____	DATE _____	
GUARANTOR SIGNATURE _____	TITLE _____	DATE _____	
GUARANTOR SIGNATURE _____	TITLE _____	DATE _____	

**FOR BANK USE ONLY**

**BSA COMPLIANCE:**

Description of the source of equity/down payment for the loan, if applicable:		
Borrower Driver's License #:	State:	Date of Birth:
Address Verified: <input type="checkbox"/> Yes	Issue Date	Expiration Date:
Mother's Maiden Name:	Borrower City of Birth:	
Co-Borrower Driver's License #:	State:	Date of Birth:
Address Verified: <input type="checkbox"/> Yes	Issue Date:	Expiration Date:
Mother's Maiden Name:	Co-Borrower City of Birth:	