

BUSINESS LOAN APPLICATION



GENERAL BUSINESS INFORMATION

Business Tax ID#	Complete Legal Business Name	DBA
Business Street Address (No PO Boxes)	City	State/ZIP
Business Phone	Business Fax	
Business Website	Business Email	

BUSINESS TYPE (PLEASE CHECK ONE)

- | | | | |
|---------------------------------------|------------------------------------|--|---------------------------------------|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Wholesale |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Finance | <input type="checkbox"/> Retail | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Consulting | <input type="checkbox"/> Health | <input type="checkbox"/> Service | |

Description of Business (please be specific, e.g., car dealership) _____

Purpose of the Loan (please be specific, e.g., payroll, supplies) _____

BUSINESS STRUCTURE (PLEASE CHECK ONE)

- | | | |
|--|--|---------------------------------------|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Partnership | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> S Corporation | |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Sole Proprietor | |

BUSINESS OPERATIONS

Years in Business (If in business less than 1 year, month business was established)	Number of Employees (including you)	Amount Expected in Monthly Cash \$
Amount Expected in Monthly Checks \$	Amount Expected in Monthly Credit Cards \$	Expected Average Monthly Income \$

BUSINESS REFERENCES (PLEASE PROVIDE TWO REFERENCES, EITHER VENDORS OR CUSTOMERS)

<input type="checkbox"/> Vendor	<input type="checkbox"/> Customer	If Vendor, Name of Company	Name	Phone Number	Years Affiliated
<input type="checkbox"/> Vendor	<input type="checkbox"/> Customer	If Vendor, Name of Company	Name	Phone Number	Years Affiliated

BUSINESS OWNER(S)

SSN	Name	Home Address			
City	State/Zip	Phone	Email		
Date of Birth	Title	% of Ownership			
SSN	Name	Home Address			
City	State/Zip	Phone	Email		
Date of Birth	Title	% of Ownership			

SIGNATURE

You must be one of these (please check one) Owner or Sole Proprietor General Partner President Vice President Other Officer

NOTICE TO APPLICANT *Please read this statement before signing.*

By signing below, you are applying, on behalf of your business, for credit from Moneytree, Inc. ("us" and "we"). You represent that your business is a valid business entity; that all Business Loans we may make to your business will be used solely for business purposes and are not for personal, family or household use; and that you are an authorized representative of the business with authority to enter into this agreement. On behalf of the business, you certify that all information provided in this Application is complete and accurate. You agree that the terms of this Business Loan Agreement will govern your loan and you authorize us to obtain information about you personally, pursuant to the personal guarantee that you must sign as a condition of this loan, and your business from credit reporting agencies and other sources we deem appropriate in considering this Application and subsequently for purpose of updates, renewals or extensions of credit granted as a result of this Application or in making or collecting any Business Loan made to your business.

Federal law requires us to obtain, verify and record information that identifies your business when you open an Account on its behalf. We will use the name, address, taxpayer ID number, and other information from your business for this purpose.

Signature of Company's Authorized Representative

Signature _____ Printed Name _____ Title _____

Company Name _____ Date _____

Principal Personal Guarantee (You must be an officer of the Company)

Giving us your **personal guarantee** is required to obtain a Business Loan from Moneytree.

Name _____ Home Address _____ City _____

State/ZIP _____ Home Phone _____ Cell _____ Email _____

SSN _____ Date of Birth _____

By signing this section of the Application, you agree to unconditionally personally guarantee the performance of all obligations and the payment upon demand of all amounts due on any Business Loan Account that is made to the business identified in this Application. You also understand and agree that consumer reports and other inquiries regarding your credit may be obtained from time to time. We may report your liability as a personal guarantor and the status of this Account to credit bureaus and others who may lawfully receive such information.

Signature _____ Date _____