

FastTrack Business Loan Application

Type of Credit Request

<input type="checkbox"/> New <input type="checkbox"/> Increase	Amount Requested	Unsecured	Secured	Rate
<input type="checkbox"/> Overdraft Protection (\$2,500-\$5,000)	\$ _____	<input type="checkbox"/>	NA	Variable _____
<input type="checkbox"/> Line of Credit	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	Variable _____
<input type="checkbox"/> Term Loan for _____ years (1-7)	\$ _____	NA	<input type="checkbox"/>	Choose: <input type="checkbox"/> Fixed Rate <input type="checkbox"/> Variable Rate

If Line of Credit or Term Loan, please explain what the funds will be used for:

Purchase Equipment / Vehicle (Include completed P&S Agreement)	Description: _____
	Dealer: _____
Purchase Price: \$ _____ Seller: _____	Private Party: _____ Lienholder: _____
Other Purpose: _____	

If Non-Purchase Term Loan or Secured LOC, collateral offered:	Description: _____
<input type="checkbox"/> Owned by Applicant <input type="checkbox"/> Owned by someone other than the applicant: _____	
Current Value \$ _____ Existing Lien Amount \$ _____	Current Lienholder: _____

I Request Automatic Payment: I understand that my interest rate will be 1/4 percent less than the posted rate if I authorize **Bluestone Bank** to deduct the monthly payment from my **Bluestone Bank Business Checking** account.

My **Bluestone Bank Business Checking** Account number is: _____

Information About My Company (the Applicant)

Legal Name	Doing Business As (Trade Name)	Present Management Since	
Federal Tax ID	Business Structure <input type="checkbox"/> Corporation <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Limited Liability Corporation <input type="checkbox"/> Not for Profit <input type="checkbox"/> Other _____	Date Established	
		Date Incorporated	
Brief Business Description		Business Address (Street, City, State, Zip)	
Main Business Phone	Main Business Fax	Web Site Address	E-mail address
Total Employees	Annual Sales (last year)	Net Business Income (last fiscal year)	Fiscal Year End Date
Has the business incurred a loss in any of the last 3 years?		Yes	No
Are there any delinquent state or federal taxes owed by the business?		<input type="checkbox"/>	<input type="checkbox"/>
Have you or has any business that you owned ever declared bankruptcy?		<input type="checkbox"/>	<input type="checkbox"/>
Is the business for sale or under agreement that would change the ownership of the business?		<input type="checkbox"/>	<input type="checkbox"/>
Have you had property foreclosed upon or given title or deed in lieu thereof in the past 7 years?		<input type="checkbox"/>	<input type="checkbox"/>
Are you in a pending law suit?		<input type="checkbox"/>	<input type="checkbox"/>
Has there been any judgements entered against you or have you plead guilty to any criminal or civil actions within the past 7 years?		<input type="checkbox"/>	<input type="checkbox"/>
Are you presently delinquent or in default on an Federal debt or any other loan, mortgage, financial obligation, bond, or loan guarantee? ..		<input type="checkbox"/>	<input type="checkbox"/>
Is any part of the down payment (if applicable) borrowed?		<input type="checkbox"/>	<input type="checkbox"/>
Are you a U.S. Citizen?		<input type="checkbox"/>	<input type="checkbox"/>
(Please provide an explanation if you answered yes to any of the above questions) _____ _____ _____			

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The Owners (Principals) of My Company

(All Owners must be listed. All individuals with 20% or more ownership must sign as a guarantor.)

Name 1	Ownership %	Years as Owner	Title
Home Address: Street, City, State, Zip		Social Security #	Date of Birth
Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		If no, what kind of visa or alien registration do you have? Exp. Date:	
Name 2	Ownership %	Years as Owner	Title
Home Address: Street, City, State, Zip		Social Security #	Date of Birth
Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		If no, what kind of visa or alien registration do you have? Exp. Date:	

Bank References for My Business

Checking Account Bank	Average Balance \$	Checking Account #	Contact Name	Telephone Number
Bank with other Deposit Accounts	Average Balance \$	Deposit Account (s) #	Contact Name	Telephone Number

Credit References for My Business

(Include all business loans from banks, finance companies and your largest trade references.)

<input type="checkbox"/> Name of Creditor 1		Purpose of Credit	<input type="checkbox"/> Term Loan <input type="checkbox"/> Line of Credit <input type="checkbox"/> Other:	Payment Structure <input type="checkbox"/> Principal & Interest <input type="checkbox"/> Balloon Payment <input type="checkbox"/> Interest Only <input type="checkbox"/> Other:	Maturity Date		
Original Amount \$	Current Balance \$	Monthly Payment \$	Account Number	Account Officer – Phone Number	Collateral		
<input type="checkbox"/> Name of Creditor 2		Purpose of Credit	<input type="checkbox"/> Term Loan <input type="checkbox"/> Line of Credit <input type="checkbox"/> Other:	Payment Structure <input type="checkbox"/> Principal & Interest <input type="checkbox"/> Balloon Payment <input type="checkbox"/> Interest Only <input type="checkbox"/> Other:	Maturity Date		
Original Amount \$	Current Balance \$	Monthly Payment \$	Account Number	Account Officer – Phone Number	Collateral		
<input type="checkbox"/> Name of Creditor 3		Purpose of Credit	<input type="checkbox"/> Term Loan <input type="checkbox"/> Line of Credit <input type="checkbox"/> Other:	Payment Structure <input type="checkbox"/> Principal & Interest <input type="checkbox"/> Balloon Payment <input type="checkbox"/> Interest Only <input type="checkbox"/> Other:	Maturity Date		
Original Amount \$	Current Balance \$	Monthly Payment \$	Account Number	Account Officer – Phone Number	Collateral		
Trade Reference		Contact	Phone Number	Terms	High Credit	Current Balance	Collateral
Trade Reference		Contact	Phone Number	Terms	High Credit	Current Balance	Collateral

Check box if debt is to be paid off with the proceeds of this loan.

Authorizations, Representations and Warranties

I (We) hereby certify that I am (We are) fully authorized to act on behalf of the applicant and that all information contained in this application is true, correct and complete. I (We) understand that **Bluestone Bank** will rely on such information when considering this loan request. I (We) hereby authorize **Bluestone Bank** to contact the persons and credit references named in or submitted with this application, and any other individuals or entities identified as having some connection or familiarity with the business for purposes of verifying such information and obtaining additional information as deemed necessary by **Bluestone Bank**. I (We) hereby authorize **Bluestone Bank** to obtain credit reports on all persons and entities listed on this application. The signatures below evidence the applicants intent to apply jointly for credit.

_____ (Print) Business Name / Applicant

by _____ (signature)	by _____ (signature)
_____ Title	_____ Title
_____ Print Name	_____ Print Name
_____ Date	_____ Date

Personal Financial Statement as of _____
Date

Submitted to Bluestone Bank

APPLICANT NAME (First, Middle, Last, Suffix)		Social Security #	Date of Birth (MM/DD/YY)	
Home Address: Street, City, State, Zip			Years There	Home Phone
Name of Primary Employer	Address: Street, City, State, Zip	Business Phone – ext.	Position	Years
Income:	Monthly Salary \$	* Income from alimony, child support, or separate maintenance income need not be revealed if the applicant or co-applicant does not wish to have it considered as a basis for repaying this obligation. * Other Income: \$ _____ per month * Source _____		

CO-APPLICANT (Name) (First, Middle, Last, Suffix)		Social Security #	Date of Birth (MM/DD/YY)	
Home Address: Street, City, State, Zip			Years There	Home Phone
Name of Primary Employer	Address: Street, City, State, Zip	Business Phone – ext.	Position	Years
Income:	Monthly Salary \$	* Income from alimony, child support, or separate maintenance income need not be revealed if the applicant or co-applicant does not wish to have it considered as a basis for repaying this obligation. * Other Income: \$ _____ per month * Source _____		

Assets	Liabilities / Debt (Indicate if obligation belongs to Applicant, Co-Applicant or both.)																																																																						
Cash in Banks \$ _____	<table border="0" style="width: 100%;"> <tr> <td style="width: 10%;"></td> <td style="width: 10%;">App</td> <td style="width: 10%;">Co-App</td> <td style="width: 10%;">Type</td> <td style="width: 15%;">Balance</td> <td style="width: 15%;">Mo. Pmt.</td> <td style="width: 10%;">Creditor</td> </tr> <tr> <td>Residence \$ _____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Mortgage / Rent on Res.</td> <td>\$ _____</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td>Marketable Securities \$ _____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Second Mtg. on Residence</td> <td>\$ _____</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td>Other Real Estate \$ _____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Other Mortgage</td> <td>\$ _____</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td>Business Ownership \$ _____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Auto Loan</td> <td>\$ _____</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td>Liquid Assets \$ _____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Credit Cards/ Revolving (total)</td> <td>\$ _____</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td>Retirement Accounts \$ _____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Credit Cards / Revolving (total)</td> <td>\$ _____</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td>Personal Property \$ _____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Other _____</td> <td>\$ _____</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td>Other _____ \$ _____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td></td> <td>\$ _____</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td>Total Assets \$ _____</td> <td>Total Liabilities / Debt \$ _____</td> <td></td> <td></td> <td>\$ _____</td> <td>\$ _____</td> <td>_____</td> </tr> </table>		App	Co-App	Type	Balance	Mo. Pmt.	Creditor	Residence \$ _____	<input type="checkbox"/>	<input type="checkbox"/>	Mortgage / Rent on Res.	\$ _____	\$ _____	_____	Marketable Securities \$ _____	<input type="checkbox"/>	<input type="checkbox"/>	Second Mtg. on Residence	\$ _____	\$ _____	_____	Other Real Estate \$ _____	<input type="checkbox"/>	<input type="checkbox"/>	Other Mortgage	\$ _____	\$ _____	_____	Business Ownership \$ _____	<input type="checkbox"/>	<input type="checkbox"/>	Auto Loan	\$ _____	\$ _____	_____	Liquid Assets \$ _____	<input type="checkbox"/>	<input type="checkbox"/>	Credit Cards/ Revolving (total)	\$ _____	\$ _____	_____	Retirement Accounts \$ _____	<input type="checkbox"/>	<input type="checkbox"/>	Credit Cards / Revolving (total)	\$ _____	\$ _____	_____	Personal Property \$ _____	<input type="checkbox"/>	<input type="checkbox"/>	Other _____	\$ _____	\$ _____	_____	Other _____ \$ _____	<input type="checkbox"/>	<input type="checkbox"/>		\$ _____	\$ _____	_____	Total Assets \$ _____	Total Liabilities / Debt \$ _____			\$ _____	\$ _____	_____
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Checking Account Bank:	Have either of you ever declared bankruptcy <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide details: _____																																																																						

Representations and Warranties

The information contained in this statement is provided to induce you to extend or to continue the extension of credit to the undersigned or to other upon the guarantee of the undersigned. The undersigned acknowledge and understand that you are relying on the information provided herein in deciding to grant or continue credit or to accept a guarantee thereof. The undersigned represents, warrants and certifies that the information provided herein is true, correct and complete. Each of the undersigned agrees to notify you immediately and in writing of any change in name, address, or employment and of any material adverse change (1) in any of the information contained in this statement or (2) in the financial condition of the undersigned or (3) in the ability of any of the undersigned to perform its obligations you. I, the absence of such notice or a new and full written statement, this should be considered as a continuing statement and substantially correct. If the undersigned fail to notify you as required above, or if any of the information herein should prove to be inaccurate or incomplete in any material respect, you may declare the indebtedness of the undersigned or the indebtedness guaranteed by the undersigned, as the case may be, immediately due and payable. You are authorized to make all inquiries you deem necessary to verify the accuracy of the information contained herein and to determine the creditworthiness of the undersigned. Each of the undersigned authorizes you to answer questions about your credit experience with the undersigned. This personal financial statement and any other financial information that the undersigned give you shall be your property. The signatures below evidence the applicants intent to apply jointly for credit.

_____ Applicant's Signature _____ Date _____ Co-Applicant's Signature _____ Date _____

**BLUESTONE BANK BUSINESS
INDEBTEDNESS SCHEDULE**

To Whom Payable	Original Amount	Original Date	Maturity Date	Interest Rate	Total # of Payments	Monthly payment	Present Balance	Residual or Buy out option on lease	Collateral	Est Fair Market Value	Status Current or Past Due
TOTAL DEBT											

Signature

Date