

Commercial Real Estate Loan Application

This is an Application for a Conventional Real Estate Loan, SBA, USDA B&I or Bridge Loan. Please complete this Application in as much detail as possible SIGN and DATE and return to your Loan Representative.

OPERATING COMPANY				
Legal Name of Business:				
D/B/A (if applicable):				
Complete Business Address:				
Work Phone:		Cell Phone:		
Business Tax ID:	_ Date Business Started:	State of	Formation:	
Type of Entity:	S-Corporation LLC	Sole Proprietorship	Other:	
Type of Business (example hotel, gas st	tation etc.):			
# of Current Employees at Business: _	# of Em	ployees post loan closing:	#	of Business Locations:
Business Website if applicable:				
Business Contact Person:		Contact Title:	C	Contact Phone:
Contact Email:				
OPERATING COMPANY OWN	ERSHIP – must account	for 100% of ownership, use add	itional sheet if ne	ecessary
<u>Name</u>	<u>Title</u>	Ownership %	<u>SSN</u>	Birthplace
REAL ESTATE HOLDING CON	MPANY – if applicable			
Legal Name of Real Estate Holding Con	mpany:			
D/B/A (if applicable):				
Complete Business Address:				
Business Tax ID:	Date Business Started:	State o	f Formation: _	
Type of Entity: C- Corporation	S – Corporation LI	C Sole Proprietorship	Other:	
# of Current Employees at Business: _	# of Em	ployees post loan closing:	‡	of Business Locations:
REAL ESTATE HOLDING COM	MPANY OWNERSHI	P – must account for 100% o	ownership, use	additional sheet if necesso
<u>Name</u>	<u>Title</u>	Ownership %	<u>SSN</u>	Birthplace
Illiance Business Capital Inc.				
commercial Real Estate Loan Application				Revised 12/21/2021

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LATERAL			Total Pro Less Bor TOTAL	oject Costs:	_ : _		
LATERAL			TOTAL	_			
LATERAL			TOTAL	_			
LATERAL							
nt:			Furniture				
nt:	·			& Fixtures:	_		
nt:		Accounts Receivable:					
	Other Commercial Real Estate:						
	Residential Real Estate:						
			Other:				
			TOTAL	COLLATERAI	.: –		
ER / LOAN	INFORMAT	ΓΙΟΝ – needed	l on all refinan	nces			
refinances.	Only needed o	on subject propert	y. Additionally,	please email us a	copy of No	tes/Liens against	the property.
	•	Current Balance	Original <u>Balance</u>	Current Rate	Current Payment	Status (current, etc.)	Note Expiration Date
							<u>Date</u>
PANIES – a	ll companies	owned, use add	ditional sheet ij	if necessary			
	Own	er Name	Title		()wnershin %	SSN
	Own	<u>er rvanie</u>		THE	<u> </u>	WHEISHIP 70	<u>DDI1</u>
							
							
						 -	
		PANIES – all companies Own	Current Balance PANIES – all companies owned, use add Owner Name	Current Original Balance Balance PANIES – all companies owned, use additional sheet in the companies owned. Owner Name	Current Balance Balance Rate PANIES – all companies owned, use additional sheet if necessary Owner Name Title	Current Original Current Current Balance Balance Rate Payment PANIES – all companies owned, use additional sheet if necessary	PANIES – all companies owned, use additional sheet if necessary Owner Name Title Ownership %

SUBJECT PROPERTY INFORMATION	I				
Subject Property Address:					
Property Type:	Year Built: Date of Last Renovation:				
Original Purchase Price:	Purchase Date: Cost of Renovations:				
Total # of Buildings: Total Bu	nilding(s) Sq. Feet:	Lot Size:		Square Feet	
Total # or Rooms / Rental Units: AV	G Occupancy %: C	urrent Occup	ancy %: Owner	Occupied %:	
Estimated Property Value:	☐ Borrower Estimate ☐ Pur	chase Price	☐ Appraisal – please em	ail Appraisal	сору
Tax Assessed Value:	Yearly Tax Amount:		Taxes Current: Yes	□ No	
Property is/will be held in the name(s) of:					
Exterior Property Condition: Good Fair	Poor – explain:				
Interior Property Condition: Good Fair	Poor – explain:				
PROFESSIONAL CONTACTS					
Type of Firm Firm Name	Contact Person	Phone:	Email:		
<u>CPA:</u>	Contact I cison	<u>r none.</u>	Eman.		
Attorney:					
Insurance			 -		
Agent:					
Title Company:					
SBA / USDA DECLARATIONS – must be	completed on all SBA / USDA	A Loan App	lications		
Does any applicant or their spouse or any member business or their spouses or members of their hou			•	☐ Yes	☐ No
Advisory Council, SCORE or ACE, or any Feder		1		☐ Yes	
Do you buy from, sell to, or use the services of any concern in which your company has a significant financial interest?					∐ No
Is this business a franchise? If yes name of franchise:					□ No
Does your business presently, or will it as a result of this loan, engage in export trade?					□ No
Would you like additional information on exporting?					□ No
Have you received any counseling or training from SBA, SCORE, ACE, SBDC, WBC, etc.?					□ No
Does your company (or any of its owners) have a		nt Ioan?		Yes	☐ No
If Yes, Name of Agency (i.e. SBA):					
Original Loan Amount: Dar	te of Loan: Sta	itus:			
ADDITIONAL DECLARATIONS – must	be completed on all loan requ	ests			
Have you or any officer of your company ever be	en involved in bankruptcy or insol	vency procee	dings?	Yes	☐ No
Are you or your business involved in any pending lawsuits?				Yes	☐ No
Is any applicant, or any director, executive office shareholder of a financial institution?	r or principal shareholder, an execu	itive officer,	director, or principal	☐ Yes	☐ No
Does your business use of store any hazardous/toxic materials or produce hazardous / toxic waste?					☐ No
					<u> </u>
Alliance Business Capital Inc.					

	Additional Declarations continued							
Does your company maintain key	y person life insurance on any	owner, officer, or share	eholder?	Yes	☐ No			
<u>Insured</u>	Beneficiary	<u>Amount</u>	<u>Agent</u>	Phone:				
			_					
ALLIANCE BUSINESS CA	APITAL DISCLOSURE A	AND THIRD-PART	Y FEES					
Alliance Business Capital w	vill act as a Correspondent Le	ender on this transaction	n.					
As part of the Loan Process.	, you may be responsible for t	he payment of Third-P	arty Fees which includ	e but are not limited to App	aisal			
Fees, Survey Fees, Environr	nental Reports, or other Third	l-Party Reports that are	required by Alliance l	Business Capital, or its assig	ns or			
	nay appear, in order to under s that our may be required as							
fees, nor do we participate of	or receive any money from Tl							
you to pay any Third-Party	y Fees.							
BORROWER CERTIFICA	TION AND AUTHORIZ	ATION						
information contained in th Business Capital, are accur information gathered in this Business Capital, with our E below authorizes Alliance E	ates you have the authority to is Commercial Real Estate Lorate to the best of your knows. Commercial Real Estate Lo. Business / Lending Partners as Business Capital, and or our a Cormation contained in subsequence.	coan Application, as we by by by by by by by an Application, as well as deemed necessary by assigns, to verify any a	ell as all subsequent of give Alliance Busines I as all subsequent doo Alliance Business Cap and all information con	documents submitted to Allis Capital authorization to sumentation supplied to Allioital. Additionally, your signification in this Commercial	iance share iance ature			
								
Signature		Date						
Printed Name		Title						
<u> </u>								
Signature		Date						
Printed Name		Title						
								
Signature		Date						
Printed Name		Title						



Commercial Real Estate Loan Application Guarantors Information

GUARANTOR / OWNER 1						
First Name:	Middle Name:	Last Name:				
Date of Birth:	Birthplace:	SSN:				
Current Address:			Years:	Months:		
Previous Residence Address:			Years:	Months:		
Home Phone:	Cell Phone: Email: _					
U.S. Citizen: Yes No	Resident Alien: Yes No – if yes Resid	ent Alien #:				
Married: Yes No	Spouse Name if applicable:					
I certify the above information is correct:	Signature:	e:				
GUARANTOR / OWNER 2						
First Name:	Middle Name:	Last Name:	ame:			
Date of Birth:	Birthplace:	SSN:				
Current Address:			Years:	_ Months:		
Previous Residence Address:			Years:	_ Months:		
Home Phone:	Cell Phone: Email: _					
U.S. Citizen: Yes No	Resident Alien: Yes No – if yes Resid	ent Alien #:				
Married: Yes No	Spouse Name if applicable:					
I certify the above information is correct: Signature:			e:			
CHARANTOR / OWNER A						
GUARANTOR / OWNER 3						
First Name:						
Date of Birth:	Birthplace:	SSN:				
				_ Months:		
Previous Residence Address:			Years:	_ Months:		
Home Phone:						
U.S. Citizen: Yes No	Resident Alien: Yes No – if yes Resid	ent Alien #:				
Married: Yes No	Spouse Name if applicable:					
I certify the above information is correct:	Signature:	Dat	e:			
I certify the above information is correct:	Signature:	Dat	e:			