

**NEVADA BANK & TRUST
COMMERCIAL LOAN APPLICATION**

INFORMATION REGARDING APPLICANT				
BUSINESS NAME				
STREET ADDRESS (REQUIRED)	CITY	STATE	ZIP CODE	BUSINESS PHONE NUMBER
MAILING ADDRESS (IF DIFFERENT THAN STREET ADDRESS)	CITY	STATE	ZIP CODE	BUSINESS FAX NUMBER
TAX ID NUMBER	YEAR ESTABLISHED	STATE	CONTACT NAME	
TYPE OF ENTITY: <input type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> PROPRIETORSHIP <input type="checkbox"/> LLC <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> TRUST <input type="checkbox"/> ASSOCIATION <input type="checkbox"/> NON-PROFIT				
BUSINESS YEAR END	NATURE OF BUSINESS			
IF INDIVIDUAL, NAME AND PHONE NUMBER OF EMPLOYER				
LOAN REQUEST				
LOAN AMOUNT REQUESTED <input type="checkbox"/> NEW LOAN <input type="checkbox"/> RENEW/INCREASE EXISTING LOAN				
PURPOSE OF LOAN				
TERMS				
COLLATERAL OFFERED				
COLLATERAL OWNER (IF DIFFERENT THAN BORROWER)				
VALUE OF COLLATERAL		SOURCE		
AMOUNT OF OTHER LIENS		LIEN HOLDER NAME		
INSURANCE COMPANY/AGENT		PHONE NUMBER		
POLICY DATES		TYPE OF COVERAGE		
GUARANTOR / CO-MAKER INFORMATION				
NAME		TAX ID NUMBER		EMAIL
STREET ADDRESS (REQUIRED)	CITY	STATE	ZIP CODE	PHONE NUMBER
MAILING ADDRESS (IF DIFFERENT FROM STREET ADDRESS)	CITY	STATE	ZIP CODE	FAX NUMBER
NAME		TAX ID NUMBER		EMAIL
STREET ADDRESS (REQUIRED)	CITY	STATE	ZIP CODE	PHONE NUMBER
MAILING ADDRESS (IF DIFFERENT FROM STREET ADDRESS)	CITY	STATE	ZIP CODE	FAX NUMBER
<input type="checkbox"/> IF CHECKED, ADDITIONAL GUARANTOR / CO-MAKER'S INFORMATION IS ATTACHED TO THIS APPLICATION				
FINANCIAL INFORMATION				
DO YOU HAVE ANY JUDGMENTS OR SUITS FILED AGAINST YOU? <input type="checkbox"/> YES <input type="checkbox"/> NO, IF YES, EXPLAIN (ATTACH SEPARATE PAGE IF NECESSARY):				
TAX RETURN FILED THROUGH WHAT DATE: _____, ARE ANY RETURNS BEING CONTESTED OR AUDITED? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, EXPLAIN:				
ACCOUNTANT OR ACCOUNT FIRM NAME AND CONTACT INFORMATION				
NAMES(S) AND TITLE(S) OF PERSON(S) AUTHORIZED TO BORROW MONEY ON BEHALF OF THE BUSINESS				
<input type="checkbox"/>	CURRENT YTD BUSINESS FINANCIAL STATEMENT SUBMITTED WITH APPLICATION			DATE:
<input type="checkbox"/>	CURRENT PERSONAL FINANCIAL STATEMENT SUBMITTED WITH APPLICATION			DATE:
<input type="checkbox"/>	THREE (3) YEARS BUSINESS FINANCIAL STATEMENTS SUBMITTED WITH APPLICATION			DATE:
<input type="checkbox"/>	THREE (3) YEARS BUSINESS TAX RETURNS SUBMITTED WITH APPLICATION			DATE:
<input type="checkbox"/>	THREE (3) YEARS PERSONAL TAX RETURNS SUBMITTED WITH APPLICATION			DATE:

Additional Guarantors / Comakers for Commercial Loan

Loan Name: _____ Date: _____

Name: _____ Tax ID No.: _____

Physical Address: _____

Mailing Address: _____

Phone Numbers: Home: _____ Work: _____
Cell: _____ E-mail: _____

Name: _____ Tax ID No.: _____

Physical Address: _____

Mailing Address: _____

Phone Numbers: Home: _____ Work: _____
Cell: _____ E-mail: _____

Name: _____ Tax ID No.: _____

Physical Address: _____

Mailing Address: _____

Phone Numbers: Home: _____ Work: _____
Cell: _____ E-mail: _____

Name: _____ Tax ID No.: _____

Physical Address: _____

Mailing Address: _____

Phone Numbers: Home: _____ Work: _____
Cell: _____ E-mail: _____

Name: _____ Tax ID No.: _____

Physical Address: _____

Mailing Address: _____

Phone Numbers: Home: _____ Work: _____
Cell: _____ E-mail: _____

Name: _____ Tax ID No.: _____

Physical Address: _____

Mailing Address: _____

Phone Numbers: Home: _____ Work: _____
Cell: _____ E-mail: _____

By signing below, each Applicant declares that he/she has read and understands the Notice Section of the Commercial Loan Application of even date.

Customer Identification Program
Commercial – Loan Opening or Loan Change
Beneficial Ownership Addendum

Branch #: _____ Loan # assigned: _____

Business/Entity Name: _____

- Type of Business: Corporation, LLC, Partnership, Sole Proprietorship, DBA – complete all
 Unincorporated Association – complete Natural Person and Section II
 Charity, Non-Profit – complete Natural Person and Section II
 Government Entity / Municipality – Natural Person

Natural Person

Name and Title of Natural Person Opening or Changing Loan:

Name: _____ Title: _____

Section I – Beneficial Owners

Please provide the following information for an individual(s), if any, who directly or indirectly, through any contract, arrangement, understanding, relationship, or otherwise owns 25% or more of the equity interests of the legal entity listed above. **Check here if no individual meets this definition and complete Section II.**

- | | | |
|-------------------------|-------------|--------------------|
| 1) Name: _____ | SSN*: _____ | DOB: _____ |
| Physical Address: _____ | | Ownership %: _____ |
| 2) Name: _____ | SSN*: _____ | DOB: _____ |
| Physical Address: _____ | | Ownership %: _____ |
| 3) Name: _____ | SSN*: _____ | DOB: _____ |
| Physical Address: _____ | | Ownership %: _____ |
| 4) Name: _____ | SSN*: _____ | DOB: _____ |
| Physical Address: _____ | | Ownership %: _____ |

Please provide a copy of a Driver's License, State-Issued ID Card, Passport, or Alien ID Card for each owner.

Section II – Managerial Control

Please provide the following information for an individual with significant responsibility for managing or directing the entity, including: an executive officer or senior manager (ex: CEO, CFO, COO, Managing Member, General Partner, President, Vice President, Treasurer) or any other individual who regularly performs similar functions.

- | | | |
|-------------------------|--------------|-------------|
| 1) Name: _____ | Title: _____ | SSN*: _____ |
| Physical Address: _____ | | DOB: _____ |

Please provide a copy of a Driver's License, State-Issued ID Card, Passport, or Alien ID Card for individual.

The information I have provided is correct to the best of my knowledge. NB&T will be notified if there is any change to the beneficial ownership information.

X _____ Date: _____
Natural person opening/changing the loan

*US Persons must provide a Social Security Number. Non-US Persons must provide a SSN, passport number and country of issuance, alien identification card number, or number and country of issuance of any other government-issued document evidencing nationality or residence and bearing a photograph or similar safeguard.