



Hillsboro, Texas

200 East Elm St  
(254) 582-2531

1300 Corsicana Hwy  
(254) 582-2533

# Commercial Loan Application

**Important Applicant Information:** Federal law requires financial institutions to obtain sufficient information to verify your identity. You may be asked several questions and to provide one or more forms of identification to fulfill this requirement. In some instances we may use outside sources to confirm the information. The information you provide is protected by our privacy policy and federal law.

1. TYPE OF CREDIT REQUESTED.

☐ **Joint Credit Requested:** We intend to apply for joint credit. (initials) \_\_\_\_\_

☐ New Credit  
☐ Refinance or Consolidation  
☐ Renewal/Extension (No New Advances)  
☐ Renewal with New Advance  
☐ Modification  
Notes

For refinance/consolidation, renewal, extension or modification only

Loan Number	Balance	Lender Name and Address
1.	\$	1.
2.	\$	2.
3.	\$	3.

☐ See Addendum for additional credits

2. APPLICANT. Applicant General Information.

Legal Name

Organizational Form, Where and When Organized (ex., Corporation, Delaware, 1984)

☐ Franchise, in full force and without defaults, with (Name of Franchiser)

Name(s) of Affiliated Entities

Current Tradename(s)

Other Tradenames Used in Last 10 Years

Local Address

Phone No:  
Fax No:

Principal Executive Office Address

Phone No:  
Fax No:

Tax Identification Number

Nature of Business

NAICS Code

Principals' Names, Addresses, Position Title and Social Security Numbers

Accountant Name, Address, and Phone Number

Financial Statements. (Check all that apply and attach statements to this application.)

Fiscal Year \_\_\_\_\_ Calendar Year \_\_\_\_\_

☐ Financial Statements covering \_\_\_\_\_ to \_\_\_\_\_

☐ Accounts Receivable Schedule covering \_\_\_\_\_ to \_\_\_\_\_

☐ Inventory Schedule covering \_\_\_\_\_ to \_\_\_\_\_

☐ Income Tax/Informational Returns for tax years \_\_\_\_\_

☐ Other (Specify) \_\_\_\_\_

Other Statements. (Check all that apply and attach statements to this application.)

☐ Business Plan dated \_\_\_\_\_

☐ Project Plans & Specifications ☐ Project Budget dated \_\_\_\_\_

☐ Franchise Agreement, FTC Franchiser Disclosure Statement

☐ List of outstanding judgments or threatened lawsuits, arbitration, or other proceeding against loan applicant.

☐ Other (Articles of Incorporation, Resolutions, etc.) \_\_\_\_\_

3. LOAN REQUEST AND SOURCES OF REPAYMENT.		
Amount Requested \$ _____ <input type="checkbox"/> Commercial Purpose Credit <input type="checkbox"/> Agricultural Purpose Credit Use of Proceeds (Brief Description of Intended Use): _____	Loan Advances (Choose One) <input type="checkbox"/> Single Advance/Closed End <input type="checkbox"/> Revolving Draw Line of Credit <input type="checkbox"/> Draw Loan <input type="checkbox"/> Construction/Permanent Loan <input type="checkbox"/> Revolving Draw Construction Line of Credit <input type="checkbox"/> Draw Construction Loan	Loan Payment (Choose One) <input type="checkbox"/> Principal and Interest <input type="checkbox"/> Principal, plus Interest <input type="checkbox"/> Interest Only <input type="checkbox"/> Single Payment <input type="checkbox"/> Other (describe) _____
Requested Payment Amount \$ _____ <input type="checkbox"/> with Balloon \$ _____ Requested First Payment Date _____ Requested Loan Term _____ Payment Frequency (if Installment) <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annually <input type="checkbox"/> Other (describe) _____ Requested Interest Rate <input type="checkbox"/> Fixed <input type="checkbox"/> Variable Index (If Variable) _____ _____ _____ List of primary and secondary sources of repayment for this Credit: _____ _____ _____		

**4. ■ LOAN SECURITY. The requested loan will be secured. (Complete this section if checked)**

☐ All loan proceeds will be for purchase of collateral.      ☐ \$ \_\_\_\_\_ of the proceeds will be for purchase of collateral.

Description of purchase money collateral:      Appraised value of purchase money collateral \$ \_\_\_\_\_

---

Brief description of non-purchase money collateral:      Description of current property insurance on non-purchase money collateral

Appraised value \$ \_\_\_\_\_      Type: \_\_\_\_\_ Deductible: \_\_\_\_\_

Liens on collateral (List any collateral with liens on it, the amount of underlying debt, the names and addresses of collateral's lienholders)      Coverage: \_\_\_\_\_ Term: \_\_\_\_\_

☐ Non-Applicant owners of collateral. Attach a separate list with name(s), address(es), and phone number(s) of any other owner(s) of the collateral.

<b>5. <input type="checkbox"/> LOAN GUARANTY.</b> The requested loan will be guaranteed. (Complete this section if checked)	
Legal name	
Address	<input type="checkbox"/> Guarantor or affiliate were declared bankrupt within the last 10 years. <input type="checkbox"/> There are outstanding judgments against Guarantor. (Attach Summary) <input type="checkbox"/> On a separate sheet, list each threatened or pending lawsuit, arbitration, or other proceeding and its amount claimed.
Phone No:	
<input type="checkbox"/> Guarantor Financial Statements. If checked, Guarantor is an entity and will provide financial statements upon request by Lender.	
<input type="checkbox"/> Security. Brief description of collateral to secure this guaranty	Description of current property insurance on existing collateral Type: _____ Deductible: _____ Coverage: _____ Term: _____
Appraised value of guaranty collateral \$ _____	
Liens on collateral (List any collateral with liens on it, the amount of underlying debt, and the names and addresses of collateral's lienholders):	
<input type="checkbox"/> Non-Guarantor owners of collateral. If checked, attach a separate list with the name(s), address(es), and phone number(s) of any other owner(s) of the collateral.	

Equal Credit Opportunity Notice	
<p><b>CREDIT DENIAL NOTICE.</b> 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 (Name, address, and telephone number of the person or office from which the statement of reasons can be obtained):</p> <p>Andrew L. Smith  The Citizens National Bank of Hillsboro  200 East Elm St, Hillsboro, TX 76645 / PO Box 404  (254) 582-2531</p> <p>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 notice that follows describes additional protections extended to you.</p>	<p><b>NOTICE:</b> 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:</p> <p>OCC - Consumer Assistance Group  1301 McKinney Street, Suite 3450  Houston, TX 77010-9050</p>

Notices, Consent and Signatures

**Important Applicant Information:** Federal law requires financial institutions to obtain sufficient information to verify your identity. You may be asked several questions and to provide one or more forms of identification to fulfill this requirement. In some instances we may use outside sources to confirm the information. The information you provide is protected by our privacy policy and federal law.

**Ohio Residents:** The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law. Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

**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.

Applicant Name(s)

By X for Applicant Date Title

By X for Applicant Date Title

For Creditor's Use Only					
Date Application Received	Received By	Decision <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Decision By	Date of Notification	Notification Given <input type="checkbox"/> Email or Text <input type="checkbox"/> Face-To-Face <input type="checkbox"/> Mail or Fax <input type="checkbox"/> Telephone
HMDA Reportable <input type="checkbox"/> Yes <input type="checkbox"/> No	Census Tract	Account No. or HMDA ULI		Instruction: If this application for credit is HMDA reportable and one or more applicants are a natural person, have the separate HMDA Demographic Information form completed. Even if HMDA-reportable, do not complete the HMDA Demographic Information form for any guarantor.	
The HMDA Demographic information was provided through: <div><input type="checkbox"/> Mail or Fax <input type="checkbox"/> Telephone Interview <input type="checkbox"/> Email or Internet <input type="checkbox"/> Face-To-Face Interview (includes Electronic Media with Video Component)</div>					