

FIRST CENTRAL SAVINGS BANK

COMMERCIAL CREDIT APPLICATION

Dear Applicant:

The following checklist includes additional information First Central Savings Bank requires in order to evaluate your application for a commercial loan.

The completion of this application in its entirety, submitted together with the additional information noted below must be completed as soon as possible.

In addition to the attached application, please submit the following items:

1. Fiscal (year-end) financial statements of the applicant for the past two years, prepared by an accountant and signed by the principals. *If the latest such statement is more than six months old at the time of the application, a recent interim statement must also be provided.*
2. Signed current aging of accounts receivable and accounts payable
3. Signed business tax returns for the past two years
4. Personal financial statements dated within ninety days of the application date of each shareholder or partner. These statements may be prepared by the individual shareholder or partner and must be signed accordingly. *Bank forms are available for this requirement.*
5. Signed personal tax returns for the past two years from each principal
6. The most recent fiscal statement of any related entity (e.g. partnership, corporation, etc.) listed on the application form, prepared by an accountant and signed by the principals
7. Photocopies of the most recent twelve months bank statements of the present bank account of the applying entity
8. A non-refundable deposit towards the processing fees of \$500.00

We would like to take this opportunity to thank you for considering First Central Savings Bank to handle your business needs, and we hope that this will be the start of a long and prosperous relationship.

*Commercial Lending Department
70 Glen Street, Glen Cove, NY 11542
Tel: (516) 609-3500 | Fax: (516) 609-3635*



www.firstcentralsavings.com
1-866-400-FCSB

FIRST CENTRAL SAVINGS BANK

COMMERCIAL CREDIT
APPLICATION CONTINUED

Products Requested

 Line of Credit

• Amount Requested: \$ _____

• Purpose: _____

 Overdraft Protection

• Amount Requested: \$ _____

• Account Number: _____

 Term Loan

• Amount Requested: \$ _____

• Purpose: _____

• Type of Equipment: _____ Purchase Price: \$ _____

 • Interest Rate Option: Fixed Variable

• Term: _____ (1 - 3 years)

• Other: _____

Applicant Information

Applicant's Name: _____ DBA: _____

 Entity Type: Corporation S Corporation LLC LLP Partnership Sole Proprietorship

Nature of Business: _____ Time as Owner: _____ months

Street Address: _____ City: _____ State: _____ Zip: _____

Year Business Established: _____ Lease Expires: ____ / ____ / ____

Contact Information

Applicant's Attorney: _____ Telephone Number: (____) _____ - _____

Street Address: _____ City: _____ State: _____ Zip: _____

Bonding Company: _____ Telephone Number: (____) _____ - _____

Street Address: _____ City: _____ State: _____ Zip: _____

Landlord: _____ Telephone Number: (____) _____ - _____

Street Address: _____ City: _____ State: _____ Zip: _____

 Is the owner of the property in which you lease in any way related to the applicant? Yes No If Yes, Explain: _____

Ownership Information

 Enter all *shareholders or partners* of applicant.

FULL NAME	TITLE / POSITION HELD	% OWNER	TELEPHONE #
			() -
			() -
			() -
			() -
			() -

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APPLICATION CONTINUED

Enter all **present banking relationships**.

NAME OF BANK	ACCOUNT NUMBER	CONTACT OFFICER (NAME / TELEPHONE #)	PRESENT BALANCE

Enter all **banks or loan companies** from whom you are borrowing or have borrowed during the past five years.

Banking Information

NAME OF INSTITUTION	AMOUNT BORROWED	PRESENT BALANCE

Enter all **primary trade suppliers** who have extended credit to you over the past two years.

NAME OF INSTITUTION	ADDRESS	TELEPHONE NUMBER
		() -
		() -
		() -

Please complete for each of the principals listed above.

1st Principal's Name: _____ **Date of Birth:** ___/___/___ **Social Security #:** ___-___-___
Street Address: _____ **City:** _____ **State:** ___ **Zip:** _____ Rent Own
Home Telephone Number: (____) _____ - _____ **Name of Spouse:** _____
Yearly Income Derived from Applicant: \$ _____ **Other Income:** \$ _____ **Source:** _____

Personal Checking Account: Name of Bank: _____ Account Number: _____

Personal Savings Account: Name of Bank: _____ Account Number: _____

Have you ever been a borrower or co-maker in this bank? Yes No

Are you presently a co-maker or endorses on the obligations of any third party? Yes No

Have you ever had any suits, judgements, bankruptcies or other legal proceedings against you? Yes No

Have you ever failed in business? Yes No

.....
2nd Principal's Name: _____ **Date of Birth:** ___/___/___ **Social Security #:** ___-___-___

Street Address: _____ **City:** _____ **State:** ___ **Zip:** _____ Rent Own

Home Telephone Number: (____) _____ - _____ **Name of Spouse:** _____

Yearly Income Derived from Applicant: \$ _____ **Other Income:** \$ _____ **Source:** _____

Personal Checking Account: Name of Bank: _____ Account Number: _____

Personal Savings Account: Name of Bank: _____ Account Number: _____

Have you ever been a borrower or co-maker in this bank? Yes No

Are you presently a co-maker or endorses on the obligations of any third party? Yes No

Have you ever had any suits, judgements, bankruptcies or other legal proceedings against you? Yes No

Have you ever failed in business? Yes No

Principal Information

FIRST CENTRAL SAVINGS BANK

COMMERCIAL CREDIT
APPLICATION CONTINUED

Please complete for each of the individuals listed above.

3rd Principal's Name: _____ Date of Birth: ___/___/____ Social Security #: ____-____-____
Street Address: _____ **City:** _____ **State:** ____ **Zip:** _____ **Rent** **Own**
Home Telephone Number: (____) _____ - _____ **Name of Spouse:** _____
Yearly Income Derived from Applicant: \$ _____ **Other Income:** \$ _____ **Source:** _____

Personal Checking Account: Name of Bank: _____ Account Number: _____

Personal Savings Account: Name of Bank: _____ Account Number: _____

Have you ever been a borrower or co-maker in this bank? Yes No
 Are you presently a co-maker or endorses on the obligations of any third party? Yes No
 Have you ever had any suits, judgements, bankruptcies or other legal proceedings against you? Yes No
 Have you ever failed in business? Yes No

Principal Information Continued

4th Principal's Name: _____ Date of Birth: ___/___/____ Social Security #: ____-____-____
Street Address: _____ **City:** _____ **State:** ____ **Zip:** _____ **Rent** **Own**
Home Telephone Number: (____) _____ - _____ **Name of Spouse:** _____
Yearly Income Derived from Applicant: \$ _____ **Other Income:** \$ _____ **Source:** _____

Personal Checking Account: Name of Bank: _____ Account Number: _____

Personal Savings Account: Name of Bank: _____ Account Number: _____

Have you ever been a borrower or co-maker in this bank? Yes No
 Are you presently a co-maker or endorses on the obligations of any third party? Yes No
 Have you ever had any suits, judgements, bankruptcies or other legal proceedings against you? Yes No
 Have you ever failed in business? Yes No

Enter any business or commercial entity in which the applicant or any shareholder or officer thereof possess an ownership interest of 25% or more in or exercise control over the operation of.

NAME OF BUSINESS	TYPE OF BUSINESS	RELATIONSHIP	BANK OF ACCOUNT	INTERCOMPANY TRANSACTIONS? [YES / NO]

Does the applicant or related interest guaranty or endorse the loans or obligations of a third party? Yes No
 Are of the applicant is assets pledged or assigned? Yes No
 Has at any time any tax assessment or tax lien been filed against the applicant or related party? Yes No

FIRST CENTRAL SAVINGS BANK

**COMMERCIAL CREDIT
APPLICATION CONTINUED**

The undersigned represents, warrants, and affirms that the financial statement and other statements made in this application are true and correct and have been made to induce you to grant a loan to the undersigned with knowledge that you will rely thereon. For the same purpose, the undersigned affirms, represents and warrants that no suits, judgment or legal claims whatsoever are pending against the undersigned, except as stated herein. You are authorized to obtain any information you may require regarding statements made to you and the undersigned agrees that if any situation arises before the loan is made which materially changes any of the statements made herein or in any financial statements submitted herewith; the undersigned will promptly notify you thereof.

The undersigned will furnish you with such financial statements and data at such times and with such certifications as you may require, without expense to you. You, and your agents and accountants, may at any time inspect the undersigned books and accounts. You are authorized to deduct from the proceeds of the loan, at your option, any monies which may be owing to you by the undersigned and to remit the balance to the undersigned by ordinary mail by your official check, the responsibility for receipt of which is assumed by the undersigned. Once this application is received by you, it becomes the property of First Central Savings Bank and will not be returned to the undersigned.

In addition you may obtain and while we are indebted to you, update information bearing on our credit worthiness (including that any principal, stockholder, officer or partner) from any source you think may have such information including any consumer reporting agency.

Certification & Authorization

Name of Applicant

1 st Authorized Applicant's Signature	Title / Position	Date
2 nd Authorized Applicant's Signature	Title / Position	Date
3 rd Authorized Applicant's Signature	Title / Position	Date
4 th Authorized Applicant's Signature	Title / Position	Date