



SMALL BUSINESS LOAN INFORMATIONAL WORKSHEET

PERSON OF CONTACT NAME

BUSINESS NAME

BUSINESS ADDRESS

PHONE NUMBER

EMAIL ADDRESS

DATE BUSINESS ESTABLISHED

TYPE OF BUSINESS

\$
ANNUAL SALES

OF EMPLOYEES

BANK OF DEPOSIT

\$
ACCOUNT BALANCE

BUSINESS FOR PROFIT?
YES NO

DOES BUSINESS EXPORT?
YES NO

OWN OTHER BUSINESS?
YES NO

FRANCHISE?
YES NO

LOAN AMOUNT REQUESTED

LOAN PROCEEDS FOR

OWNER NAME	PERCENT OWNED	U.S. CITIZEN		VETERAN	
	%	YES	NO	YES	NO
	%	YES	NO	YES	NO
	%	YES	NO	YES	NO
	%	YES	NO	YES	NO
	%	YES	NO	YES	NO

OTHER INDEBTEDNESS

LENDER	ORIGINAL \$	CURRENT \$	INTEREST RATE	MONTHLY PAYMENT	SECURED BY:	PERSONAL OR BUSINESS
	\$	\$	%	\$		
	\$	\$	%	\$		
	\$	\$	%	\$		
	\$	\$	%	\$		
	\$	\$	%	\$		
	\$	\$	%	\$		

PREVIOUS/CURRENT SBA LOANS OR OTHER GOVERNMENT DEBT

AGENCY NAME	BORROWER NAME	ORIGINAL \$	CURRENT \$	DATE OF APPLICATION	CURRENT or PAST DUE
		\$	\$		
		\$	\$		

ARE YOU PRESENTLY UNDER INDICTMENT, ON PAROLE OR PROBATION? YES NO

HAVE YOU EVER BEEN CHARGED WITH, AND/OR ARRESTED FOR, ANY CRIMINAL OFFENSE OTHER THAN A MINOR MOTOR VEHICLE VIOLATION? YES NO

HAVE YOU EVER BEEN CONVICTED, PLACED ON PRETRIAL DIVERSION, OR PLACED ON ANY FORM OF PROBATION; INCLUDING ADJUDICATION WITHHELD PENDING PROBATION, FOR ANY CRIMINAL OFFENSE OTHER THAN A MINOR VEHICLE VIOLATION? YES NO

Please answer all questions as completely as possible. In addition to this form please have each owner or guarantor complete the SBA Personal Financial Statement that can be found by clicking here. For a complete loan application please be prepared to provide the below:

- Business tax returns signed for the last three years.
- Personal tax returns signed for the last three years for all 20% or more owners
- Bank checking/savings account statements from most recent month on both personal and business. (Not necessary if account is held at Bank of Washington)
- Interim Profit & Loss Statement and Balance Sheet from most recent month end.
- Current Aging Report on Receivables and inventory (if applicable to business).
- Business plan & projections (if business is less than 2 years old).
- Operating agreement/articles of organization.

SBA LOAN PACKAGING CHECKLIST

ALL LOANS

- REQUIRED LOAN INFORMATIONAL WORKSHEET
- REQUIRED COMPLETED PERSONAL FINANCIAL STATEMENT (ANY 20% OR MORE OWNER OR LOAN GUARANTOR)
- REQUIRED CURRENT BUSINESS PROFIT AND LOSS AND BALANCE SHEET NO OLDER THAN 90 DAYS
- REQUIRED 3 YEARS MOST RECENT FEDERAL TAX RETURNS FOR BUSINESS
- REQUIRED 3 YEARS MOST RECENT PERSONAL FEDERAL TAX RETURNS FOR ANY LOAN GUARANTOR
- REQUIRED MANAGEMENT RESUME
- REQUIRED ARTICLES OF INCORPORATION/OPERATING AGREEMENT
- REQUIRED COMPLETE USE OF LOAN PROCEEDS BREAKDOWN
- REQUIRED AFFILIATED BUSINESSES FINANCIAL INFORMATION (3 YEARS FEDERAL TR AND YTD P&L, BALANCE SHEET)

IF LOAN IS FOR START UP BUSINESS

- BUSINESS PLAN
- 3 YEAR FINANCIAL PROJECTED PROFIT AND LOSS STATEMENTS, FIRST YEAR ON MONTHLY BASIS
- PROJECTED BUSINESS BALANCE SHEET

IF LOAN IS FOR REAL ESTATE

- ENVIRONMENTAL QUESTIONNAIRE SOURCE OF
 - PROPERTY VALUE
 - SALES CONTRACT
 - CONSTRUCTION COST BREAKDOWN LEASE
 - AGREEMENT OR LETTER OF INTENT
-

IF LOAN IS FOR BUSINESS ACQUISITION

- PURCHASE AGREEMENT
 - BUSINESS APPRAISAL/EVALUATION
 - 3 YEAR FINANCIAL PROJECTED PROFIT AND LOSS STATEMENTS, FIRST YEAR ON MONTHLY BASIS
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IF LOAN IS TO REFINANCE DEBT

- COPY OF NOTES/LOAN STATEMENTS/LOAN DETAIL ON ALL LOANS BEING REFI-NANCED
 - 36 MONTH PAYMENT HISTORY OF ANY SAME INSTITUTION DEBT REFINANCED
 - PROOF CREDIT CARD DEBT WAS INCURRED FOR BUSINESS USE
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*ITEMS MARKED REQUIRED ARE MINIMUM NECESSARY TO START PACKAGING PROCESS.

MANAGEMENT RESUME

Please fill in all spaces. If an item is not applicable, please indicate as such. You may include additional relevant information on a separate exhibit. SIGN & DATE where indicated.

PERSONAL INFORMATION:

Name _____ SS# _____
Date of Birth _____ Place of Birth _____
Residence Telephone # _____ Business Telephone # _____
Residence Address _____ City _____ State _____ Zip Code _____
From _____ To present date.

Previous Address: _____ City _____ State _____ Zip Code _____
From _____ to _____

Spouse's Name _____ SS# _____
Are you employed by the U. S. Government? _____ Yes _____ NO Agency / Position _____
Are you a U.S. Citizen? _____ Yes _____ No, If no, give Alien Registration Number _____

EDUCATION:

High School/College/Technical-Name/Location	Dates Attended	Major	Degree/Certificate
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

MILITARY SERVICE BACKGROUND:

Branch of Service _____ Dates of Service _____ to _____

WORK EXPERIENCE: List chronologically with present employer.

Company Name / Location _____
From _____ to _____ Title _____
Duties _____

Company Name / Location _____
From _____ to _____ Title _____
Duties _____

Company Name / Location _____
From _____ to _____ Title _____
Duties _____

Company Name / Location _____
From _____ to _____ Title _____
Duties _____

Signature _____ Date _____