



Business Loan Application

Applicant, please note: if you are married or a registered domestic partner (RDP) and live in a community property state such as California, all questions relating to your spouse or RDP must be answered, even if this is an application for credit in your name only.

I understand I may apply for this credit in my name alone, without my spouse, RDP or any other person, regardless of my marital status. I am applying:

Check one box:

- In my name alone
- Jointly with my spouse, RDP or other person
- In the business name only

General Business Information

Business Name/Applicant: _____

Physical Address: _____ City, State, Zip: _____

Mailing Address: _____ City, State, Zip: _____

DBA or Trade Name: _____ Business Phone: _____ Business Website: _____

Primary Contact: _____ Primary Phone: _____

Email*: _____ Title: _____ Ownership %: _____

Primary Industry: _____ Market Area Served: _____

Annual Sales: \$ _____ Last FYE Net Income: \$ _____ Total A/R: \$ _____ Total A/P: \$ _____

Total Inv.: \$ _____ # of Employees: _____ Tax I.D. #: _____

Entity Type: LLC C-Corporation S-Corporation Partnership Sole Proprietorship Other _____

***Please note that this email address may receive important communications, including financial information and/or appraisals.**

Credit Request

Loan Amount: \$ _____ **Purpose of Proceeds:** _____

Collateral Type: Unsecured A/R & Inventory Equipment Other _____
 Real Estate: (collateral address) _____

Other Information (If answer is yes to any question, please attach an explanation)

- Is your company in compliance with applicable federal and state regulations (such as environmental, employment or safety)? Yes No
- Has your company ever been cited for a violation of any environmental regulations? Yes No
- Has the business and/or any principal ever defaulted on a loan? Yes No
- Is the business and/or any principal involved in any litigation? Yes No
- Has the business and/or any principal ever filed for bankruptcy? Yes No
- Are any taxes (income, FICA, sales, etc.) currently past due by the business or any principal? Yes No
- Is the business and/or any principal being audited by the IRS, Franchise Tax Board, etc.? Yes No
- Is the business directly liable for any debts not shown on page 2 of this application? If yes, please itemize on a separate page. Yes No
- Is the firm and/or any principals contingently liable as a guarantor, co-maker or endorser? Yes No
- Does the company have an ownership succession plan (e.g., buy-sell agreement)? Yes No
- Are there any amounts due to the company from owners or other related parties? Yes No
- Is this a Non-Profit Organization/Charitable Foundation? Yes No
- Is offshore/international activity anticipated other than wires? Yes No If yes, explain _____
- Does the business have an ATM on the premises? Yes No
- Does the business own or operate an ATM machine? Yes No

Insurance Company/Agents:

- Sells permanent life insurance other than group
- Sells Annuity contracts other than group
- Sells Insurance product with cash Value or Investment

All applicants, guarantors, or individuals with an ownership percentage of 20% or greater should complete this page. Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying your obligations.

Please Print as Many Copies as Needed

Guarantors or Authorized Signers

Name	Please Also Complete Page 4	Acting as Guarantor?	Yes	No
_____		_____		

General Information - If married, these questions apply to both you and your spouse

Are any assets held in Trust?	Yes	No	Have you filed a declaration of homestead?	Yes	No
Are any assets pledged or debts secured except as shown?	Yes	No	Are you party to any claim or suits?	Yes	No
Have you ever had a bankruptcy or had a judgement against you?	Yes	No	Has there been an IRS audit in the past 3 years?	Yes	No
Have you ever been a principal or guarantor of a firm that declared bankruptcy?	Yes	No	If yes, has the audit been settled?	Yes	No
Are you obligated to pay alimony, child support or separate maintainance?	Yes	No	Have you ever had a repossession?	Yes	No
Is any signer on this account a foreign public official?	Yes	<input type="checkbox"/> No	If yes, Name:	_____	
Are you or an intermediary controlling an account of a foreign-based third party?	Yes	No	If yes, what country?	_____	
Are you or an immediate family member/relative a senior political figure (politically exposed person)?	<input type="checkbox"/> Yes	No	If yes, what country?	_____	

All applicants, guarantors, or individuals with an ownership percentage of 20% or greater should complete this page. Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying your obligations.

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Are you obligated to pay alimony, child support or separate maintainance?	Yes	No	Have you ever had a repossession?	Yes	No
Is any signer on this account a foreign public official?	Yes	No	If yes, Name:	_____	
Are you or an intermediary controlling an account of a foreign-based third party?	Yes	No	If yes, what country?	_____	
Are you or an immediate family member/relative a senior political figure (politically exposed person)?	Yes	No	If yes, what country?	_____	

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Are you or an immediate family member/relative a senior political figure (politically exposed person)?	Yes	No	If yes, what country?	_____	

Applicant/Principal(s) Signature(s)

Applicant or Guarantor will immediately notify Sunwest Bank, its designee or assignee (Bank) in writing if there is a material change in the financial condition of any applicant or guarantor. In the absence of such notice, this shall constitute both a new and continuing statement of the financial condition of each applicant and guarantor each time applicant or guarantor becomes obligated to Bank or Bank relies, to any extent whatsoever, on this statement of financial condition.

The undersigned agree that all present and future obligations to Bank may become immediately due and payable at Bank's sole discretion and without damage or notice if; (a) The undersigned, or any endorser or guarantor, at any time fail in business, become insolvent, commit an act of bankruptcy, or die; (b) a writ of attachment, garnishment, execution or other legal process is issued against a material portion of the applicant or guarantor's property; (c) any act for the collection of delinquent taxes is taken against any applicant or guarantor; (d) any representation to Bank by any applicant, guarantor or endorser of my obligations proves to be misleading or untrue; (e) any applicant or guarantor fails to notify Bank of any material change in financial condition or there is a material adverse change in financial condition; or (f) any applicant or guarantor sells or transfers any interest in the applicant or guarantor's business.

The applicant or guarantors agree that any property in Bank's possession shall be subject to lien and right to offset for applicant or guarantor's obligations to Bank.

By signing below, the undersigned hereby waive the rights under Vehicle Code Section 1808.21, or any similar vehicle code in another state so that, when Bank deems it necessary, Bank may obtain residence address from any State's Department of Motor Vehicles.

Bank may verify the information contained in this statement with any third party, including credit reporting agencies. Bank is authorized to make such inquiries and gather such information as the Bank deems necessary and reasonable concerning any information about this business (including but not limited to obtaining business credit bureau reports and inquiries to the Internal Revenue Service and/or Franchise Tax Board) and its principals (including but not limited to obtaining consumer credit bureau reports and inquiries to the Internal Revenue Service and/or Franchise Tax Board) provided to Bank on this application or any such required documents. Bank will have the continuing right to verify that there has been no change in the information provided. The undersigned further agrees to notify the Bank promptly of any material change in any such information. Bank may also release any information to others regarding financial condition and Bank's credit and deposit experience with any applicant or guarantor in conjunction with all applicable State and Federal laws.

The undersigned represents and declares under penalty of perjury under the laws of the state of California that that all statements in this application and on each document required to be submitted in connection with this application are true, correct and complete to the best of their knowledge. Any existing or threatened litigation, claim or circumstance which might reasonably be expected to affect my condition in the future is fully described herein or in an attached statement.

Authorized Signature(s) for Applicant on behalf of the Business and Individually as Principal or Guarantor

Signature Date

Print/Type Name

Signature Date

Print/Type Name

Signature Date

Print/Type Name

Signature Date

Print/Type Name

Bank Use Only: Print Name, Initial & Date

CIP Verified Date

OFAC Verified Date

Data Input By Date





CLIENT IDENTIFICATION PROFILE

Business

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT: To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens a deposit or loan account. What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

Legal Business Name:	Tax ID Number:
Doing Business As (DBA) or Trade Name (if applicable):	Tax ID Number (DBA):
Business Physical Address: (no P.O. Boxes)	Business Phone:
Business Mailing Address: (if different from business street address - P.O. box okay)	Business Website:

Business Type: General Partnership Corporation Limited Liability Partnership (LLP) Limited Liability Company (LLC)
 Non-profit Organization Foreign (out of state) Business Other: _____

Account Type: <input type="checkbox"/> Analysis Checking <input type="checkbox"/> Analysis Checking + Interest <input type="checkbox"/> Analysis Super Savings	<input type="checkbox"/> Analysis Tiered Super Savings <input type="checkbox"/> Business Checking <input type="checkbox"/> Business Checking + Interest <input type="checkbox"/> Business Low Cost Checking	<input type="checkbox"/> Business Super Savings <input type="checkbox"/> Business Tiered Super Savings <input type="checkbox"/> Business Elite MMA <input type="checkbox"/> Business Savings	<input type="checkbox"/> Business Freedom Time Acct <input type="checkbox"/> Business No Risk CD <input type="checkbox"/> Business CD (Pledged) <input type="checkbox"/> Loan
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Nature of Business (check all that apply):
 Retail Wholesale Manufacturing Service Provider Transportation Utilities
 City/County/Government Real Estate Other: _____

Legal Entity Identifier? Yes No
If Yes, provide identifier _____

COMPLETE ALL	INFORMATION FOR SIGNER 1	INFORMATION FOR SIGNER 2
Full Legal Name:		
You are: (Select all that apply)	<input type="checkbox"/> Beneficial Owner ____% <input type="checkbox"/> Signer <input type="checkbox"/> Guarantor <input type="checkbox"/> Control Person	<input type="checkbox"/> Beneficial Owner ____% <input type="checkbox"/> Signer <input type="checkbox"/> Guarantor <input type="checkbox"/> Control Person
Primary Identification (ID):	<input type="checkbox"/> Driver's License <input type="checkbox"/> State ID <input type="checkbox"/> U.S. Passport <input type="checkbox"/> U.S. Military ID <input type="checkbox"/> Other: _____ ID #: _____ Issued By: _____ Issue Date: _____ Expiration Date: _____	<input type="checkbox"/> Driver's License <input type="checkbox"/> State ID <input type="checkbox"/> U.S. Passport <input type="checkbox"/> U.S. Military ID <input type="checkbox"/> Other: _____ ID #: _____ Issued By: _____ Issue Date: _____ Expiration Date: _____
Physical Address:		
Date of Birth & Place of Birth:	DOB: _____ Place of Birth: _____	DOB: _____ Place of Birth: _____
Mother's Maiden Name:		
Social Security/Tax ID No:		
Day Time Phone:	<input type="checkbox"/> Cell _____ <input type="checkbox"/> Business _____	<input type="checkbox"/> Cell _____ <input type="checkbox"/> Business _____
E-mail Address:		
Occupation/Job Title:		

COMPLETE ALL	INFORMATION FOR SIGNER 3	INFORMATION FOR SIGNER 4
Full Legal Name:		
You are: (Select all that apply)	<input type="checkbox"/> Beneficial Owner ____% <input type="checkbox"/> Signer <input type="checkbox"/> Guarantor <input type="checkbox"/> Control Person	<input type="checkbox"/> Beneficial Owner ____% <input type="checkbox"/> Signer <input type="checkbox"/> Guarantor <input type="checkbox"/> Control Person
Primary Identification (ID):	<input type="checkbox"/> Driver's License <input type="checkbox"/> State ID <input type="checkbox"/> U.S. Passport <input type="checkbox"/> U.S. Military ID <input type="checkbox"/> Other: _____ ID #: _____ Issued By: _____ Issue Date: _____ Expiration Date: _____	<input type="checkbox"/> Driver's License <input type="checkbox"/> State ID <input type="checkbox"/> U.S. Passport <input type="checkbox"/> U.S. Military ID <input type="checkbox"/> Other: _____ ID #: _____ Issued By: _____ Issue Date: _____ Expiration Date: _____
Physical Address:		
Date of Birth & Place of Birth:	DOB: _____ Place of Birth: _____	DOB: _____ Place of Birth: _____
Mother's Maiden Name:		
Social Security/Tax ID No:		
Day Time Phone:	<input type="checkbox"/> Cell _____ <input type="checkbox"/> Business _____	<input type="checkbox"/> Cell _____ <input type="checkbox"/> Business _____
E-mail Address:		
Occupation/Job Title:		



Notice to Applicant

Please retain for your records.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT MANDATED BY THE USA PATRIOT ACT

To help the government fight the funding of terrorism and money laundering activities, the USA Patriot Act, a Federal law, requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

What this means for you: When you open an account, we will ask you for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

ECOA NOTICE

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 (provided the applicant has the capacity to enter into a binding contract); because all or 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 Sunwest Bank is the Federal Deposit Insurance Corporation, Corporation Consumer Response Center, 1100 Walnut St. Box #11, Kansas City, MO 64106 - (877) 275-3342.

RIGHT TO REQUEST SPECIFIC REASONS FOR CREDIT DENIAL

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 send a letter to the Credit Administration Manager at Sunwest Bank, 2050 Main Street, Suite 300, Irvine, CA 92614 or call (714) 730-4418 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.

INTERNET GAMBLING

In accordance with the requirements of the Unlawful Internet Gambling Enforcement Act and Regulation GG, this notification is to inform you that restricted transactions are prohibited from being processed through your account or relationship with our institution. Restricted transactions generally include, but are not limited to, those in which credit, electronic transfers, checks, drafts, instruments or other proceeds are knowingly accepted by gambling businesses in connection with the participation by others in unlawful internet gambling.

RIGHT TO RECEIVE COPY OF THE APPRAISAL

Non-Residential and Multifamily

Applies to commercial/nonresidential secured properties and multifamily dwellings in California.

You have the right under Section 11423 of the California Business and Professions Code to a copy of the appraisal report obtained by this bank in support of your application for credit, provided that you have paid for the appraisal. In order to obtain a copy of your appraisal report, write us at:

Sunwest Bank
Attention: Credit Administration
2050 Main Street, Suite 300
Irvine, CA 92614

We must hear from you no later than 90 days after we notify you about the action taken on your application, including notice of an incomplete application. If you withdraw your application, you must make a request for an appraisal report within 90 days of the withdrawal.

If you request a copy of your appraisal report, and you have paid for the costs of the appraisal, we will send you a copy at the address shown on your loan application. You are only entitled to receive a copy of the appraisal for purposes of evaluating your pending request for an extension of credit with this bank. Your right to receive a copy of the appraisal report is not transferable or assignable.



Notice to Applicant

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RIGHT TO RECEIVE A COPY OF THE APPRAISAL

Residential

Applies to first-lien loans secured by 1 – 4 family residential dwellings.

We may order an appraisal to determine the property's value and charge you for this appraisal. We will promptly give you a copy of any appraisal, even if your loan does not close.

You can pay for an additional appraisal for your own use at your own cost



Notice to Applicant

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CALIFORNIA FAIR LENDING NOTICE: The Housing Financial Discrimination Act of 1977 Fair Lending Notice

It is illegal to discriminate in the provision of or in the availability of financial assistance because of the consideration of:

1. Trends, characteristics or conditions in the neighborhood or geographic area surrounding a housing accommodation, unless the financial institution can demonstrate in the particular case that such consideration is required to avoid an unsafe and unsound business practice; or
2. Race, color, religion, sex, marital status, national origin or ancestry.

It is illegal to consider the racial, ethnic, religious or national origin composition of a neighborhood or geographic area surrounding a housing accommodation or whether or not such composition is undergoing change, or is expected to undergo change, in appraising a housing accommodation or in determining whether or not, or under what terms and conditions, to provide financial assistance.

These provisions govern financial assistance for the purposes of the purchase, construction, rehabilitation or refinancing of one-to-four-unit family residences occupied by the owner and for the purpose of the home improvement of any one-to-four-unit family residence.

If you have questions about your rights, or wish to file a complaint, contact the management of this financial institution or:

**Department of Business Oversight
300 South Spring Street, Suite 15513
Los Angeles, CA 90013-1204**

**Department of Business Oversight
45 Fremont Street, Suite 1700
San Francisco, CA 94105-2219**

This notice applies to applications for purchase, construction, rehabilitation, improvement or refinancing any owner-occupied one-to-four-unit residential property; and owner-occupied or non-owner-occupied home improvement loans that are secured by the one-to-four-unit dwelling if the residential property is located in California.