

BUSINESS LOAN APPLICATION



**FOR SBA 7(A) AND
504 LOANS**

Please retain this notice

Equal Credit Opportunity Act — Regulation B Notice

We may ask for additional information as we process your request for credit. If required information is missing and we do not receive it within 15 days from the date of receipt of this application, we may not be able to give further consideration to your request for credit.

NOTICE: The federal Equal Credit Opportunity Act prohibits Bridge Funding 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 agencies that administer compliance with this law concerning these creditors are as follows:

Loan Broker
Bridge Business & Property Funding
270 East Main Street
Patchogue, NY 11772

Pursuant to Regulation B of the Federal Reserve Board, if Bridge Funding denies this application for credit or any subsequent renewal thereof, the Applicant has the right to a written statement of the specific reasons for the denial. To obtain this statement, all Applicants may write to Bridge Funding, 270 East Main Street, Patchogue, NY 11772 or call 888.614.6592 within 60 days from the date you are notified of Bridge Funding's decision. Bridge Funding will send the Applicant a written statement of the reasons for denial within 30 days of receiving this request.

Credit Scoring, based on personal and credit data of business owners/guarantors, may be used in the evaluation of a credit request.

Applicant, Owner and Guarantor Credit Information

By applying to Bridge Funding for credit: (i) each Applicant, Owner and any Guarantor affirms that the application and any supporting documents are accurate and complete; (ii) each Applicant, Owner and any Guarantor authorizes Bridge Funding to exchange information with others about Applicant, Owner and the Guarantors; and (iii) each of the undersigned consents to disclosure to the others of information about themselves used in connection with this application and any subsequent loan.

Each Applicant, Owner and Guarantor authorizes Bridge Funding to obtain his or her individual consumer credit report in connection with Applicant's application(s) and any subsequent updates, renewals and extensions of credit. Upon request, Bridge Funding will inform the requesting Applicant, Owner or Guarantor if a credit report has been obtained against the requesting individual, Applicant or any Owner, Guarantor, and will give the requesting individual the name and address of the reporting agency.

Each Applicant, Owner and Guarantor acknowledges that it is a federal crime to provide false or misleading information to a federally-insured financial institution punishable by fine, imprisonment, or both, pursuant to 18 U.S.C. Section 1014. If any part of this information should be false or misleading, the signer(s) will, if Bridge Funding demands, immediately repay any or all debts, both the applicants' and those debts guaranteed for others. Bridge Funding does not have to give notice to demand payment.

Individual applicants, if married, may apply for a separate account.

Important Information About Opening a New Account at Bridge Funding

To help the United States Government fight terrorism and money laundering, Federal law requires us to obtain, verify, and record information that identifies each person or business that opens an account or establishes a relationship with us. For this reason, when you open an account or establish a relationship, we will ask for your name, street address, date of birth, and identification number, such as a social security number or taxpayer identification number. For businesses, we will ask for the business name, street address and tax identification number. We may also ask to see your driver's license or other identifying documents that will allow us to identify you. We appreciate your cooperation.

SBA Loan Application -- All Sections Must be Completed



Thank you for requesting a loan from Bridge Funding.

This checklist has been provided to assist you in gathering the information necessary to evaluate your request for a Small Business Administration (SBA) loan. In order to speed processing of your request, please complete all sections of this package. Please submit all forms in ink or typewritten.

The following forms are included in this application package:

- 1 **SBA Loan Request Form.**
- 2 **SBA Personal Financial Statement(s).** Complete for owners, partners, officers, directors, key employees, guarantors and stockholders with 20% or more of total stock issued. All dated the same date, not over 45 days old. (Additional forms available upon request.)
- 3 **Management Resume Form(s).** Provide complete resumes for individuals referred to in #2 above. (Additional forms available upon request.)
- 4 **History of Business Form.**
- 5 **Business Debt Schedule.** This schedule must have the same date as Interim Business Financial Statement requested in #9 below and reflect all outstanding debts and capitalized leases as shown on the interim financial statement.
- 6 **Certificate of Secretary Form.**
- 7 **Authorization to Release Information Form.**

In addition, please provide the following for applicant business and all affiliates:

- 8 **Business Financial Statements and Complete Tax Returns with all Schedules.** Income statements, balance sheets and complete tax returns for three prior year-end time periods. Please note that all financial statements and complete tax returns must have original signatures and dates. After photocopying financial statements and complete tax returns, please sign and affix current date to statements and returns.
- 9 **Interim Business Financial Statement.** Income statement & balance sheet dated no older than 45 days.
- 10 **Accounts Receivable and Accounts Payable Agings.** Same dates as interim financial statement.
- 11 **Personal Tax Returns.** Complete tax returns for the past three years for each individual referred to in #2 above. (Personal Financial Statement).
- 12 **IRS Verification Authorizations (IRS Form 4506 – Request for Copy or Transcript of Tax Form).** For all persons and entities submitting Tax Returns.

Other:

- 13 **Projections.** Monthly income & expense projection for a one year period. (If applicable)
- 14 **Copy of Purchase Agreement or Notes Being Refinanced.** (If applicable)
- 15 **Accounts Receivable and Accounts Payable Agings.** Same dates as interim financial statement.
- 16 **Environmental Questionnaire.** (If applicable)
- 17 **Detailed Cost Breakdown of Project.** (If applicable)
- 18 **Copies of the Business' Last Three (3) Months Checking Account Bank Statements.** If more than one (1) account, include copies for all accounts.

For LLCs:

- 19 **Articles of Organization and Operating Agreement.**

The following information may also be required as applicable.

- 1 **Partnership Agreement.**
- 2 **Articles of Incorporation and Bylaws.**
- 3 **Lease and sublease on land and building.**
- 4 **Fictitious business name statement.**
- 5 **Construction bid and Builder's Control Agreement.**
- 6 **Bid/Purchase orders for inventory, furniture, fixtures and equipment.**
- 7 **Fire/hazard/liability insurance on all collateral securing loan.**
- 8 **Life Insurance.**
- 9 **Business license.**
- 10 **Other information as required by the SBA and/or Bridge Funding.**

SBA Loan Request Form



APPLICANT COMPANY

SOURCE CODE _____

Company Name	Telephone Number	Date of Application
Address	City, State and Zip Code	
Type of Business	Date Established	
Type of Entity: <input type="checkbox"/> Corporation <input type="checkbox"/> "S" Corporation <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Not-for-Profit		
Number of Employees Currently	Number of Employees After this Loan	
Business Bank Name	Contact	
Bank Address	Phone	
Account Numbers		
\$	\$	\$
Average Account Balances		
1.	2.	3.
Accountant Name	Phone	
Attorney Name	Phone	
Trade Reference	Phone	

MANAGEMENT/OWNERSHIP OF APPLICANT COMPANY List all officers, directors, owners & co-owners and all stockholders with 20% or more of total stock issued.

Name	Partners	Title	% of Ownership	Annual Compensation

AFFILIATES List all business entities in which the applicant company or any of the individuals listed in the management/ownership section above has a controlling ownership. Please also see 8-12 on page 3.

Company Name	Owner (applicant company or individual)	% of Ownership

ESTIMATED COSTS

Land acquisition	\$	Working capital (including accounts payable)	\$
New building construction	\$	Acquisition of all or part of existing business	\$
Land and building acquisition	\$	Payoff SBA Loan	\$
Building improvements or repairs	\$	Payoff bank loan (non-SBA associated)	\$
Acquisition of machinery/equipment	\$	Other debt payment (non-SBA associated)	\$
Inventory purchase	\$	TOTAL ESTIMATED PROJECT AMOUNT	\$
		MINUS OWN FUNDS TO BE USED IN PROJECT*	-\$
		EQUALS TOTAL ESTIMATED LOAN AMOUNT REQUESTED	\$

*Source of cash injection: Business Personal Borrowed Non-Borrowed If borrowed, or not visible on current financial statements, provide explanation:

Signature _____ Date _____ Social Security Number _____

SBA Personal Financial Statement



Statement as of _____
 Month Day Year

IF MARRIED AND THERE ARE ANY JOINT ASSETS AND LIABILITIES, PLEASE PROVIDE A JOINT FINANCIAL STATEMENT. COMPLETE THIS FORM FOR: (1) EACH PROPRIETOR, OR (2) EACH LIMITED PARTNER WHO OWNS 20% OR MORE INTEREST AND EACH GENERAL PARTNER, OR (3) EACH STOCKHOLDER OWNING 20% OR MORE OF VOTING STOCK AND EACH CORPORATE OFFICER AND DIRECTOR, OR (4) ANY OTHER PERSON OR ENTITY PROVIDING A GUARANTY ON THE LOAN.

Name	Business Phone
Residence Address	Residence Phone
City, State and Zip Code	
Company Name of Applicant/Borrower	

ASSETS	(omit cents)	Please check this box if any of the assets and liabilities can be attributed to a trust
Cash on Hand and in Banks	\$	<input type="checkbox"/>
Savings Accounts		<input type="checkbox"/>
IRA or Other Retirement Account		<input type="checkbox"/>
Accounts and Notes Receivable		<input type="checkbox"/>
Life Insurance—Cash Surrender Value Only (Complete in Section B)		<input type="checkbox"/>
Stocks and Bonds (Describe in Section 3)		<input type="checkbox"/>
Real Estate (Describe in Section 4)		<input type="checkbox"/>
Automobile—Present Value		<input type="checkbox"/>
Other Personal Property (Describe in Section 5)		<input type="checkbox"/>
Other Assets (Describe in Section 5)		<input type="checkbox"/>
TOTAL		

LIABILITIES	(omit cents)	Please check this box if any of the assets and liabilities can be attributed to a trust
Accounts Payable	\$	<input type="checkbox"/>
Notes Payable to Banks and Others (Describe in Section 2)		<input type="checkbox"/>
Installment Account (Auto)		<input type="checkbox"/>
Mo. Payments \$		<input type="checkbox"/>
Installment Account (other)		<input type="checkbox"/>
Mo. Payments \$		<input type="checkbox"/>
Loan on Life Insurance		<input type="checkbox"/>
Mortgages on Real Estate (Describe in Section 4)		<input type="checkbox"/>
Unpaid Taxes (Describe in Section 6)		<input type="checkbox"/>
Other Liabilities (Describe in Section 7)		<input type="checkbox"/>
Net Worth		<input type="checkbox"/>
TOTAL		

SECTION 1A SOURCE OF INCOME	
Salary	\$
Net Investment Income	
Real Estate Income	
Other Income (Describe below)*	

*Alimony or child support income need not be disclosed in "Other Income" unless you desire to have such payments counted toward total income.

SECTION 1B CONTINGENT LIABILITIES	
As Endorser or Co-Maker	\$
Legal Claims and Judgments	
Provision for Federal Income Tax	
Other Special Debt	
If you rent your home, please provide your monthly rent expense.	

SECTION 2 NOTES PAYABLE TO BANK AND OTHERS Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.					
Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (Monthly, etc.)	How Secured or Endorsed/Type of Collateral

SBA Personal Financial Statement - CONT.



SECTION 3 STOCKS AND BONDS Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.

Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value

SECTION 4 REAL ESTATE OWNED List each parcel separately. Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.

	Property A	Property B	Property C
Type of Property			
Title Holder			
Address of Property			
Date Purchased			
Original Cost			
Present Market Value			
Name and Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Payment Amount per Month/Year			
Status of Mortgage			
Current Gross Monthly Rental Income (if applicable)			

SECTION 5 OTHER PERSONAL PROPERTY AND OTHER ASSETS Describe, and if any is pledged as security, state name and payment and if delinquent, describe delinquency.

SECTION 6 UNPAID TAXES Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.

SECTION 7 OTHER LIABILITIES Describe in detail.

SECTION 8 LIFE INSURANCE HELD Give face amount and cash surrender value of policies and name of insurance company and beneficiaries.

SECTION 9 MISCELLANEOUS

Check here if any applicant/guarantor is an "insider" (an executive officer, director, or principal shareholder of Bridge Funding or its affiliates). "Insider" includes an insider's immediate family.

Check here if any applicant/guarantor is an executive officer, director or principal shareholder of an insured depository institution.

Please provide name of institution _____.

I authorize SBA/Lender to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. I understand FALSE statements may result in forfeiture of benefits and possible prosecution by the U.S. Attorney General (Reference 18 U.S.C. 1001).

Signature _____ Date _____ Social Security Number _____

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SBA Personal Financial Statement



Statement as of _____ Month _____ Day _____ Year

IF MARRIED AND THERE ARE ANY JOINT ASSETS AND LIABILITIES, PLEASE PROVIDE A JOINT FINANCIAL STATEMENT. COMPLETE THIS FORM FOR: (1) EACH PROPRIETOR, OR (2) EACH LIMITED PARTNER WHO OWNS 20% OR MORE INTEREST AND EACH GENERAL PARTNER, OR (3) EACH STOCKHOLDER OWNING 20% OR MORE OF VOTING STOCK AND EACH CORPORATE OFFICER AND DIRECTOR, OR (4) ANY OTHER PERSON OR ENTITY PROVIDING A GUARANTY ON THE LOAN.

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Residence Address	Residence Phone
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Savings Accounts		<input type="checkbox"/>
IRA or Other Retirement Account		
Accounts and Notes Receivable		
Life Insurance—Cash Surrender Value Only (Complete in Section B)		<input type="checkbox"/>
Stocks and Bonds (Describe in Section 3)		<input type="checkbox"/>
Real Estate (Describe in Section 4)		<input type="checkbox"/>
Automobile—Present Value		<input type="checkbox"/>
Other Personal Property (Describe in Section 5)		<input type="checkbox"/>
Other Assets (Describe in Section 5)		<input type="checkbox"/>
TOTAL		

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Notes Payable to Banks and Others (Describe in Section 2)		<input type="checkbox"/>
Installment Account (Auto)		<input type="checkbox"/>
Mo. Payments \$		<input type="checkbox"/>
Installment Account (other)		<input type="checkbox"/>
Mo. Payments \$		<input type="checkbox"/>
Loan on Life Insurance		<input type="checkbox"/>
Mortgages on Real Estate (Describe in Section 4)		<input type="checkbox"/>
Unpaid Taxes (Describe in Section 6)		<input type="checkbox"/>
Other Liabilities (Describe in Section 7)		<input type="checkbox"/>
Net Worth		
TOTAL		

SECTION 1A SOURCE OF INCOME	
Salary	\$
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Title Holder			
Address of Property			
Date Purchased			
Original Cost			
Present Market Value			
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Mortgage Account Number			
Mortgage Balance			
Payment Amount per Month/Year			
Status of Mortgage			
Current Gross Monthly Rental Income (if applicable)			

SECTION 5 OTHER PERSONAL PROPERTY AND OTHER ASSETS Describe, and if any is pledged as security, state name and payment and if delinquent, describe delinquency.

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Check here if any applicant/guarantor is an executive officer, director or principal shareholder of an insured depository institution.

Please provide name of institution _____.

I authorize SBA/Lender to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. I understand FALSE statements may result in forfeiture of benefits and possible prosecution by the U.S. Attorney General (Reference 18 U.S.C. 1001).

Signature _____ Date _____ Social Security Number _____

Signature _____ Date _____ Social Security Number _____

Management Resume



(ADDITIONAL FORM AFTER THIS ONE) PLEASE FILL IN ALL SPACES, USE FULL FIRST, MIDDLE AND MAIDEN NAMES, NO INITIALS. IF AN ITEM IS NOT APPLICABLE, PLEASE INDICATE SO. YOU MAY INCLUDE ADDITIONAL RELEVANT INFORMATION ON A SEPARATE EXHIBIT. SIGN AND DATE WHERE INDICATED.

First Name	Middle Name	Maiden Name	Last Name	Social Security Number
Date of Birth		Place of Birth		
Residence Telephone		Business Telephone		
Residence Address		City, State and Zip Code		
Previous Address		City, State and Zip Code		
Lived There From		To		
Spouse's First Name	Middle Name	Maiden Name	Last Name	Social Security Number
Are you employed by the U.S. Government?		<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, give agency/position _____	
Are you a U.S. Citizen?		<input type="checkbox"/> Yes <input type="checkbox"/> No	If no, give Alien Registration number _____	
Are you presently under indictment, on parole, or probation?		<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, indicate date parole or probation is to expire _____	
Have you ever been charged with and or arrested for any criminal offense other than a minor motor vehicle violation? <input type="checkbox"/> Yes <input type="checkbox"/> No Include offenses which have been dismissed, discharged, or not prosecuted. (All arrests and charges must be disclosed and explained on an attached sheet)				
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? <input type="checkbox"/> Yes <input type="checkbox"/> No				
I authorize the Small Business Administration Office of Inspector General to request criminal record information about me from criminal justice agencies for the purpose of determining my eligibility for programs authorized by the Small Business Act, and the Small Business Investment Act. CAUTION: Knowingly making a false statement on this form is a violation of Federal law and could result in criminal prosecution, significant civil penalties, and a denial of your loan, safety bond, or other program participation. A false statement is punishable under 18 USC 1001 by imprisonment of not more than five years and/or a fine of not more than \$10,000; under 15 USC 645 by imprisonment of not more than two years and/or a fine of not more than \$5,000; and, if submitted to a Federally Insured Institution, under 18 USC 1014 by imprisonment of not more than thirty years and/or a fine of not more than \$1,000,000				
Are you involved in any lawsuit at this time or have you ever filed for personal or business bankruptcy protection?		<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, furnish details in a separate exhibit.	
Have you ever obtained credit under any other name(s)?		<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, furnish details in a separate exhibit.	

EDUCATION

College or Technical Training Institution	Location	Dates Attended (From/To)	Major	Degree or Certificate

MILITARY SERVICE BACKGROUND

Branch	From	To	Honorable Discharge?
Rank at Discharge		Major Assignment/Accomplishment	

WORK EXPERIENCE (List chronologically, beginning with present employment.)

Company Name		Location		
From	To	Title	Duties	
Company Name		Location	Company Name	Location
From	To	From	To	
Company Name		Location	Company Name	Location
From	To	From	To	

Signature (S)

Date

Social Security Number

Management Resume



PLEASE FILL IN ALL SPACES, USE FULL FIRST, MIDDLE AND MAIDEN NAMES, NO INITIALS. IF AN ITEM IS NOT APPLICABLE, PLEASE INDICATE SO. YOU MAY INCLUDE ADDITIONAL RELEVANT INFORMATION ON A SEPARATE EXHIBIT. SIGN AND DATE WHERE INDICATED.

First Name	Middle Name	Maiden Name	Last Name	Social Security Number
Date of Birth		Place of Birth		
Residence Telephone		Business Telephone		
Residence Address		City, State and Zip Code		
Previous Address		City, State and Zip Code		
Lived There From		To		
Spouse's First Name	Middle Name	Maiden Name	Last Name	Social Security Number
Are you employed by the U.S. Government?		<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, give agency/position _____	
Are you a U.S. Citizen?		<input type="checkbox"/> Yes <input type="checkbox"/> No	If no, give Alien Registration number _____	
Are you presently under indictment, on parole, or probation?		<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, indicate date parole or probation is to expire _____	
Have you ever been charged with and or arrested for any criminal offense other than a minor motor vehicle violation? <input type="checkbox"/> Yes <input type="checkbox"/> No Include offenses which have been dismissed, discharged, or not prosecuted. (All arrests and charges must be disclosed and explained on an attached sheet)				
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? <input type="checkbox"/> Yes <input type="checkbox"/> No				
I authorize the Small Business Administration Office of Inspector General to request criminal record information about me from criminal justice agencies for the purpose of determining my eligibility for programs authorized by the Small Business Act, and the Small Business Investment Act.				
CAUTION: Knowingly making a false statement on this form is a violation of Federal law and could result in criminal prosecution, significant civil penalties, and a denial of your loan, safety bond, or other program participation. A false statement is punishable under 18 USC 1001 by imprisonment of not more than five years and/or a fine of not more than \$10,000; under 15 USC 645 by imprisonment of not more than two years and/or a fine of not more than \$5,000; and, if submitted to a Federally Insured Institution, under 18 USC 1014 by imprisonment of not more than thirty years and/or a fine of not more than \$1,000,000				
Are you involved in any lawsuit at this time or have you ever filed for personal or business bankruptcy protection?		<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, furnish details in a separate exhibit.	
Have you ever obtained credit under any other name(s)?		<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, furnish details in a separate exhibit.	

EDUCATION

College or Technical Training Institution	Location	Dates Attended (From/To)	Major	Degree or Certificate

MILITARY SERVICE BACKGROUND

Branch	From	To	Honorable Discharge?
Rank at Discharge		Major Assignment/Accomplishment	

WORK EXPERIENCE (List chronologically, beginning with present employment.)

Company Name	Location
From	To
Title	Duties
Company Name	Location
Company Name	Location
From	To
From	To
Company Name	Location
Company Name	Location
From	To
From	To

Signature (S)

Date

Social Security Number

(Use separate attachments to answer questions if necessary)

NATURE OF BUSINESS <hr/> <hr/>
TYPES OF PRODUCTS/SERVICES <hr/> <hr/>
CUSTOMER PROFILE <hr/> <hr/>
LIST KEY CUSTOMERS Are there any customers that represent more than 10% of your annual revenue? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please list: <hr/> <hr/>
LIST MAJOR COMPETITORS <hr/> <hr/>
MAJOR PAST ACCOMPLISHMENTS <hr/> <hr/>
FUTURE PLANS FOR GROWTH/EXPANSION <hr/> <hr/>
HOW WILL THIS LOAN BENEFIT YOUR COMPANY? <hr/> <hr/>
WILL THE FUNDING OF THIS LOAN CREATE NEW EMPLOYMENT OPPORTUNITIES? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, state how below. <hr/> <hr/> <hr/> <hr/>

Business Debt Schedule



THIS SCHEDULE SHOULD INCLUDE LOANS FOR CAPITALIZED LEASES, NOTES PAYABLE INCLUDING THOSE TO STOCKHOLDERS OR AFFILIATES AND LINES OF CREDIT (NOT ACCOUNTS PAYABLE, ACCRUED LIABILITIES OR OPERATING LEASES).

Company Name		Date (same as Interim Balance Sheet)									
CREDITORS	Name/Address	Original Date	Original Amount	Term/Maturity Date	Present Balance	Interest Rate	Monthly Payment	Collateral/Security	What was loan for?		
TOTAL PRESENT BALANCE (Total must agree with balance shown on Interim Balance Sheet)											

*Line of credit, equipment, etc.

Signature _____ Date _____ Social Security Number _____

Print Name and Title _____

Certificate of Secretary



I CERTIFY THAT I AM THE SECRETARY OF _____, AND THAT THE FOLLOWING PERSONS HOLD POSITIONS IN THIS CORPORATION AND/OR OWN SHARES IN THIS CORPORATION IN THE AMOUNT AND FORM DESIGNATED.

1. DIRECTORS

Name
Name
Name

2. OFFICERS

President
Vice President
Secretary
Treasurer

3. SHAREHOLDERS

Name	Number of Shares	% of Shares Outstanding*	Form of Ownership (i.e. Trust, Individual, Joint with Spouse, etc.)

* Please account for 100% of applicant company's ownership.

Signature(s) _____ Date _____ Social Security Number _____

Secretary _____

Authorization to Release Information For SBA Loan Application



BORROWER'S NAME _____

If the answer is "yes" provide details; attach a separate sheet if necessary.

1. Have you or your business ever filed bankruptcy or defaulted on any debts? Yes No
2. Are you or the business an endorser, guarantor or co-maker for obligations not listed in its financial statements? Yes No
3. Are any assets pledged or mortgaged other than as stated on business and personal financial statements submitted? Yes No
4. Are you or the business a party to any claim or lawsuit? Yes No
5. Do you or the business owe any taxes for years prior to the current year? Yes No
6. Are you personally liable for any contingent liability? (e.g., endorser or guarantor on a note) Yes No
7. Are any assets held in trust? Yes No
8. Does the applicant/guarantor or any of the principals/owners have an existing relationship with Citibank (either as individuals, corporately or with partial ownership interest)? Yes No
9. Are you affiliated with or are you a beneficiary of any company, partnership or other borrowing entity that has been granted credit by Bridge Funding? If yes, name of entity _____ Yes No

By signing below, I/we:

Attest that in order to obtain or maintain the credit facility now or hereafter furnished by the Bank, I/we have furnished complete and accurate information to the best of my/our knowledge and belief and that the Bank may rely on such information.

Agree that the Bank in connection with this credit facility or any other credit facility hereafter furnished by the Bank may verify the accuracy of the information provided in this application or as part of the application process and certify that all information supplied to the Bank shall be deemed to be a continuing statement of the condition of the undersigned, and a new and original statement of all assets and liabilities upon each and every transaction in and by which the undersigned hereinafter becomes indebted to the Bank, until the undersigned advises in writing to the contrary.

Represent that the requested loan is for business purposes only and not for any family, personal or household purpose. Further, I/we attest that the Bank may rely on this statement.

Agree that the Bank may require additional information from any third party and does not consider this application complete until I/we have provided all required information.

Authorize the bank to obtain my personal and the business entity's credit bureau reports at any time so long as I/we have a credit relationship with Bank.

Authorize the Bank to investigate, receive, verify, provide and exchange credit information on the business entity and me/us with credit reporting agencies and others in connection with this application and the administration of any credit extended hereunder so long as I/we have this credit facility with the Bank. Acknowledge that no employee or agent of Bridge Funding has the authority to commit to any loan terms, or to process or close my/our loan within any specified period of time. I/we realize that I/we am/are not entitled to rely on any promise or representation regarding my/our loan unless it is in writing given to me/us by the Bank and that all loan approvals will be in writing and subject to the terms and conditions set forth in a commitment letter signed by an officer of Bridge Funding. In addition, I/we further acknowledge that the Bank has not made any representation to me/us regarding the value of my/our property or Business and I/we am/are relying solely on my/our own opinion(s) of value for any collateral securing my/our loan.

Authorized Signature	Date
Name/Title (print)	
Tax ID (EIN or SSN)	

Authorized Signature	Date
Name/Title (print)	
Tax ID (EIN or SSN)	

Sole Proprietors Only: By signing below, you understand that each Bridge Funding affiliate shares information about its transactions and experiences with you. To better serve you, you agree that each Bridge Funding affiliate may share with each other at any time all information you provide to us or we obtain about you from third parties (for example, credit bureaus), unless you check the following box:

Check the following boxes if you want Bridge Funding to remove the name of your business from marketing lists used when solicitations are made: by phone by mail

BANK USE ONLY

Bank Office	Date Received	Application Received By	Date Forwarded
Designated BDO			
Financial Center Number		Referrer Information	
Site Visit Performed by		Date of Site Visit (Attach relevant comments concerning site visit to application upon submission to the Credit Center.)	