

Small Business Administration (SBA) Application



SUBMIT THE REQUIRED ITEMS BELOW TO:

| | | |
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| BankVista, Sartell 125 Twin Rivers Court Sartell, MN 56377 | BankVista, Mankato PO Box 4094 Mankato, MN 56002 | BankVista, Chaska 1420 White Oak Drive Chaska, MN 55318 |
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ORIGINAL SIGNATURES AND DATES ARE REQUIRED ON ALL DOCUMENTS SUBMITTED

- **PERSONAL & BUSINESS FEDERAL TAX RETURNS:** Last 3 years with all supporting schedules *(Required on all guarantors and/or all individuals who own 20% or more of the business)*
- **YEAR-TO-DATE BALANCE SHEET AND PROFIT & LOSS STATEMENT:** If an existing business *(Must be dated within 90 days of application).*
- **2 YEAR PROJECTION OF EARNINGS:** Required if less than 3 years of historical statements are available
- **AFFILIATED BUSINESS 3 YEAR FINANCIAL INFORMATION:** If any owner/borrower has a controlling interest in another business, 3 years of financial information must be submitted on each affiliate entity.
- **ACCOUNTS RECEIVABLE AND ACCOUNTS PAYABLE AGING REPORTS:** At banks discretion depending on use of proceeds and collateral offered
- **UNIFORM FRANCHISE OFFERING CIRCULAR (UFOC):** For franchise purchases
- **PURCHASE AGREEMENT:** For real estate purchases and business purchases
- **COMPLETED SBA APPLICATION & FORMS:** *(attached)*

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Qualification Profile

Name of Applicant/ Business: _____ DBA, if applicable: _____
Physical Address: _____ Phone: _____
Mailing Address: _____ Federal Tax ID: _____
Type of Business (Industry & Type) _____
Form of Business Entity: C-Corp S-Corp Partnership LLC LLP Other: _____
Number of Employees: at time of application: _____ if loan is approved: _____ affiliate employees: _____
Do you or any owner of 20% or more of the business have a controlling interest in another business?
No Yes, number of employees: _____

Management and Owners (attach additional sheets if needed)

Name: _____ Percentage of Ownership: _____
Home Address: _____ Social Security Number: _____
Email Address: _____ Phone Number: _____
Name: _____ Percentage of Ownership: _____
Home Address: _____ Social Security Number: _____
Email Address: _____ Phone Number: _____
Have any principal owners had SBA or other Government financing: Yes No
If Yes, original amount _____, current balance _____, bank _____, status _____
Are any of the majority owners: Female Veteran Disabled Minority, specify _____
(This information is used to determine eligibility for special loan and technical assistance)

Length of time in business: Start –up 1-4 yrs 5-9 yrs 10+yrs Date Established _____

Have any managers or owners ever been charged with or convicted of any criminal offense other than a minor motor vehicle violation? No Yes, attach details

Primary Contact: _____ Phone: _____

Applicant's Signature: _____ Date: _____

Co-Applicant's Signature: _____ Date: _____

(if you are requesting the financial accommodation jointly)

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Management Resume (Complete For Each Owner)

Name: _____ Date of Birth: _____
Home Address: _____ SSN: _____
Place of Birth: _____ U.S. Citizen Yes No- Alien Reg# _____
Previous Address: _____ From _____ To _____
Home Phone _____ Mobile Phone _____ Business Phone _____

Education (attach additional sheet if necessary)

College, Technical, or Training Program (List Institution and Address) _____

Date Attended: _____ Major: _____ Degree/Certificate: _____

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Date Attended: _____ Major: _____ Degree/Certificate: _____

Military Service (attach additional sheet if necessary)

Branch of Service: _____ Date of Service _____
Currently employed by the US Government? Yes No

Work History (attach additional sheet if necessary)

Company Name and Location: _____ Title: _____
From _____ To _____ Duties _____

Company Name and Location: _____ Title: _____
From _____ To _____ Duties _____

Applicant's Signature: _____ Date: _____

Have any managers or owners ever been charged with or convicted of any criminal offense other than a minor motor vehicle violation? No Yes, attach details

Primary Contact: _____ Phone: _____

Applicant's Signature: _____ Date: _____

Co-Applicant's Signature: _____ Date: _____

(if you are requesting the financial accommodation jointly)

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CURRENT AND PREVIOUS SBA AND OTHER GOVERNMENT DEBT: Complete the chart below if you, your business, any principal of your business, any affiliate of your business, and other business currently owned by a principal, or any business previously owned by you or a principal of your business has received or applied for any direct or guaranteed financial assistance from the Federal Government, including student loans and disaster loans. All current, previous, and pending Government debt must be listed, including loans that have been paid in full or those that resulted in a loss to the Government. (Note: Loans that resulted in a loss to the Government include loans that were charged off, compromised or discharged as a result of bankruptcy. The amount of loss is the outstanding principal balance of the loan that the Government had to write off after all collection activities (including compromise) were finalized.)

| Name of Agency Agency Loan # | Borrower's Name | Original Amount of Loan | Date of Application | Loan Status | Outstanding Balance | \$ Amount of Loss to the Government |
|---------------------------------|-----------------|-------------------------|---------------------|-------------|---------------------|-------------------------------------|
| 1. # | | \$ | | | | |
| 2. # | | \$ | | | | |
| 3. # | | \$ | | | | |
| 4. # | | \$ | | | | |

BUSINESS INDEBTEDNESS: Furnish the following information on all outstanding installment debts, contracts, notes and mortgages payable. Indicate by an asterisk items to be paid by loan proceeds and reasons for paying them. (Present balance should agree with the latest balance sheet submitted).

| To Whom Payable Acct. # | Original Amount \$ | Original Date | Present Balance \$ | Rate of Interest | Maturity Date | Monthly Payment \$ | Security | Current or Past Due |
|----------------------------|-----------------------|---------------|-----------------------|------------------|---------------|-----------------------|----------|---------------------|
| Acct. # | \$ | | \$ | | | \$ | | |
| Acct. # | \$ | | \$ | | | \$ | | |
| Acct. # | \$ | | \$ | | | \$ | | |
| Acct. # | \$ | | \$ | | | \$ | | |
| Acct. # | \$ | | \$ | | | \$ | | |

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Summary of Money Needed

In the following spaces, please provide the amount of the total project costs, this includes any equity you may have already injected.

Acquisition of Existing Business: _____

Land Cost: _____

Building/ Construction Cost: _____

Equipment Cost: _____

Inventory: _____

Accounts Payable: _____

Credit Cards (indicate if they are in business or personal name): _____

Other Bank Loans: _____

Working Capital: _____

Other: _____

Other: _____

Other: _____

Total \$: _____

Less Down Payment*: _____

Amount of Loan Request: _____

*Please indicate the source of your down payment (i.e. gift, savings, transfer of assets, etc.)

Applicant's Signature: _____ Date: _____

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SBA Forms Guideline

The following SBA Forms need to be completed and returned with your application. They can be found on BankVista's website below the SBA Loan Application.

SBA FORM 413 – PERSONAL FINANCIAL STATEMENT: Both spouses (if applicable) need to sign and date.

SBA FORM 1919 – BORROWER INFORMATION FORM: A separate form needs to be completed by each 20% or more owner, officer, partner, and any key employee of the business.