

## I. Member Information:

General:

1. Name of Institution: \_\_\_\_\_ Docket #: \_\_\_\_\_

2. Asset Size: \_\_\_\_\_

3. Information for the primary contact person and person responsible for repayment:

Contact Person

Repayment Person

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

## II. Signed Agreement

Banking On Business Master Agreement Completed and Signed? ☐ Yes ☐ No

## III. Underwriting Documentation:

Please provide a blank copy of your institution's credit write-up, an excerpt of loan policy which lists underwriting standards, including specific LTV, DCR and minimum equity requirements and attach a description of how a typical small business loan is underwritten.

## IV. Program Information:

1. Will the program be marketed to: ☐ Start-up ☐ Expansion ☐ Both

2. Intended uses of funds: ☐ Land acquisition ☐ Inventory purchase, working capital  
☐ New construction/rehabilitation ☐ Acquisition of existing businesses  
☐ Acquisition and/or repair of M&E ☐ Other \_\_\_\_\_

3. Briefly summarize the proposed use including the expected deal flow and marketing efforts (attach additional pages, as necessary): \_\_\_\_\_

4. Briefly highlight the expected community benefit to be achieved by the program (attach additional pages, as necessary): \_\_\_\_\_

## V. Certifications and Stipulations:

I hereby certify to the best of my knowledge that the above information is true and correct.

Signature of an officer authorized by your Board of Directors to execute this form:

Member: \_\_\_\_\_ Date: \_\_\_\_\_