

I may apply for credit alone or together with someone else ("co-applicant"). If I apply with a co-applicant, and our combined assets and debts can be presented together, the co-applicant and I may complete this required statement and any supporting schedules jointly. Otherwise, separate forms and schedules are required.

APPLICANT PROFILE				
Borrower Name:		DOB:	SSN:	Contact Phone Number:
Street Address:	Apt. No.		City:	State: Zip:
Time at Residence: own	Employer:	Position:		Time at Employer:
CO-APPLICANT PROFILE				
Borrower Name:		DOB:	SSN:	Contact Phone Number:
Street Address:	Apt. No.		City:	State: Zip:
Time at Residence:	Employer:	Position:		Time at Employer:

# FINANCIAL STATEMENT

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FINANCIAL STATEMENT	Date As Of:	:			
Assets	In even dollars Amount	Individual or Joint Ownership?	Liabilities	In even dollars Amount	Individual or Joint Ownership?
Cash in Bank Accounts (Sch.1)*	\$		Total Revolving Credit (Sch.A)	\$	
Stocks/Bonds/Mut.Funds/Broker (Sch.2)*	\$		Total Installment Loans (Sch.B)	\$	
Retirement Accounts (Sch.3)	\$		Mortgage(s) on Residence (Sch.4)	\$	
Residence Market Value (Sch.4)	\$		Mortgage(s) on Other Real Estate (Sch.5)	\$	
Other Real Estate Market Value (Sch.5)	\$		Loans against Life Insurance Policies (Sch.7)	\$	
Vehicles & Other Assets (Sch.6)	\$		Other Liabilities (Sch.C)	\$	
Cash Value Life Insurance (Sch.7)	\$			\$	
Total Assets \$	\$		Total Liabilities \$	\$	
			Net Worth \$	\$	

\*Statements required when an individual party to a transaction has \$100,000 or more listed in cash and/or marketable securities (held at other financial institutions) which

will be used as additional support for this loan request

GENERAL INFORMATION	Appl	icant:	Co-Ap	plicant:
1. Have you ever filed for bankruptcy or had a judgment against you?	No No	Yes	No No	Yes
2. Have you ever been a principal or guarantor of a firm that declared bankruptcy?	No No	Yes	No No	Yes
3. Have you ever been convicted of a felony?	No No	Yes	No No	Yes
4. Are you a party to any claims or lawsuits?	No No	Yes	No No	Yes
5. Are you a co-signor or guarantor on any other debt? (If so, complete Sch.D)	No No	Yes	No No	Yes
6. Are any assets held in trust?	No	Yes	No No	Yes
7. Do you own 25% or more of a company or partnership?	No No	Yes	No No	Yes
8. Are you currently an Executive Officer or Director at any financial institution?	No No	Yes	No	Yes
9. Are you a citizen of the U.S.? If no, what country:	No No	Yes	No	Yes
What is your marital status?	Unmarried	Married	Unmarried	Married
	Separated		Separated	
State number of dependents in box; if no dependents check "none"		None		None

If "Yes" to any of the questions 1-8 above, please discuss below:

# BusinessBank

## SCHEDULE 1: BANKS AND OTHER FINANCIAL INSTITUTION ACCOUNTS

		Acct Type (i.e., checking,	State if individual or joint acct	
Name of Bank	Acct #	savings, money market, cd)	(identify name of account holder if individual)	Current Balance
				\$
				\$
				\$
			Total:	\$

#### SCHEDULE 2: U.S. GOVERNMENTS, STOCKS (Listed and Unlisted), BONDS, BROKERAGE ACCOUNTS & PARTNERSHIP INTERESTS

# Shares, Face Value or % Ownership	Agency or name of company issuing the security; name of partnership; type of investment; or basis for valuation	In Name Of	Market Value	Pledged? (Y/N)	Listed or Unlisted
			\$		
			\$		
			\$		
			\$		
			\$		
-		Total:	\$		

# SCHEDULE 3: RETIREMENT ACCOUNTS

Shares/				
Amount	Description	In Name Of	Cost	Market Value
			\$	\$
			\$	\$
			\$	\$
			\$	\$
		Totals:	\$	\$

### SCHEDULE 4: PERSONAL REAL ESTATE OWNED (and related debt, as applicable)

	 	-)			-		
	Title in	Date	Cost +	Present Mkt	Mortgage Bal.	Monthly Pymt	Mortgage
Description of Property or Address	Name of	Acquired	Improvements	Value	Owing	on Mtg	Holder
			6	6	¢	¢	
			φ	Φ	φ	Φ	
			\$	\$	\$	\$	
			¢	¢	¢	¢	
			φ	φ	φ	φ	
		Totals:	\$	\$	\$	\$	

#### SCHEDULE 5: OTHER REAL ESTATE: Mortgages & Land Contracts Receivable (and related debt, as applicable)

	Title in	Date	Balance		Mortgage Bal.	Monthly Pymt	Mortgage
Description of Property or Address	Name of	Acquired	Receivable	Monthly Pymt	Owing	on Mtg	Holder
			\$	\$	\$	\$	
			\$	\$	\$	\$	
			\$	\$	\$	\$	
		Totals:	\$	\$	\$	\$	

#### SCHEDULE 6: VEHICLES AND OTHER ASSETS

					Amount of
Property Description	Name Registered In	Cost	Year Acquired	Market Value	Insurance
		\$		\$	\$
		\$		\$	\$
		\$		\$	\$
		\$		\$	\$
	Totals:	\$	\$	\$	\$

#### SCHEDULE 7: LIFE INSURANCE CARRIED

Insured Party	Name of Insurance Company	Face Value	Cash Value	Beneficiary	Loans
		\$	\$		\$
		\$	\$		\$
		\$	\$		\$
	Totals:	\$	\$		\$

Tel: (952) 847-1100 Fax: (952) 847-9016 www.businessbankmn.com



Total: \$

Total: \$

Total: \$

#### SCHEDULE A: TOTAL REVOLVING CREDIT

	\$ per	\$	
	\$ per	\$	
	\$ \$ \$ \$	\$ per \$ per \$ per \$ per \$ per	\$ per \$   \$ per \$   \$ per \$   \$ per \$

#### SCHEDULE B: TOTAL INSTALLMENT LOANS

To Whom Payable	Address	Secured by	How Payable		Balance	Maturity Date
			\$	per	\$	
			\$	per	\$	
			\$	per	\$	
			\$	per	\$	

#### SCHEDULE C: OTHER LIABILITIES

To Whom Payable	Address	Secured by	How F	ayable	Balance	Maturity Date
			\$	per	\$	
			\$	per	\$	
			\$	per	\$	
			\$	per	\$	

#### SCHEDULE D: CONTINGENT LIABILITIES

To Whom Payable	Address	Secured by	How P	ayable	Balance	Maturity Date
			\$	per	\$	
			\$	per	\$	
			\$	per	\$	
			\$	per	\$	

#### SOURCES OF INCOME:

APPLICANT	In even dollars	CO-APPLICANT	In even dollars
Salary	\$	Salary	\$
Bonus & Commissions	\$	Bonus & Commissions	\$
Dividends	\$	Dividends	\$
Real Estate Income	\$	Real Estate Income	\$
*Other Income - Itemize	\$	*Other Income - Itemize	\$
	\$		\$
	\$		\$
TOTAL:	\$	TOTAL:	\$

\*Alimony, child support or separate maintenance payments need not be disclosed unless relied upon as a basis for extension of credit. If disclosed, state whether payment was received under \_\_\_\_\_court order, \_\_\_\_written agreement, \_\_\_\_oral understanding.

I/We have carefully read and submitted the foregoing information provided on all three pages of this statement to The Business Bank. The information is presented as a true and accurate statement of my/our financial condition as of the date indicated. This statement is provided for the purpose of obtaining and maintaining credit with The Business Bank. I/We agree that if any material change(s) occur(s) in my/our financial condition that I/we will immediately notify The Business Bank of these change(s) and unless the Bank is so notified it may continue to rely upon this financial statement and the representations made herein as a true and accurate statement of my/our financial condition.

I/We authorize The Business Bank to make whatever credit inquiries it deems necessary in connection with this financial statement. I/We authorize and instruct any person or consumer reporting agency to furnish to the Bank any information that it may have or obtain in response to such credit inquiries.

I/We also hereby certify that no payment requirements listed herein are delinquent or in default except as already noted above.

I/We fully understand that it is a federal crime punishable by fine or imprisonment or both to knowingly make any false statements concerning any of the above facts, pursuant to 18 U.S.C. Section 1014.

Applicant's Signature

Date Signed

Co-Applicant's Signature

Date Signed

THE BUSINESS BANK 11100 Wayzata Blvd., Suite 150, Minnetonka, MN 55305

Tel: (952) 847-1100 Fax: (952) 847-9016 www.businessbankmn.com

Total: \$