

COMMERCIAL LOAN APPLICATION



Application Received Date: _____



If more than one applicant is applying for financing, indicate if you are applying jointly by initialing below

Applicant

Co-Applicant

APPLICANT – BUSINESS ENTITY

Is your business a Corporation LLC LLP Partnership Trust

Legal Business Name: _____

Mailing Address: _____

Please Complete Officers/Partners/Members Section as applicable

Physical Address: _____

City/State/Zip: _____

Tax ID#: _____

Business Phone: _____ Cell Phone: _____ Fax Number: _____

Email Address: _____

OFFICERS / PARTNERS / MEMBERS

Only to be completed if the applicant is a Business Entity

| Name | % of Ownership | Title | Social Security # |
|-------|----------------|-------|-------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

APPLICANT – INDIVIDUAL OR SOLE PROPRIETOR

Is your business a Sole Prop. Business Individual(s)

Applicant Name: _____ Co-Applicant Name: _____

Applicant Birthdate: _____ Co-Applicant Birthdate: _____

DBA Business Name, If applicable: _____

Mailing Address: _____

Physical Address: _____

City/State/Zip: _____

Applicants SSN# _____ Co-Applicant's SSN# _____

Business Phone: _____ Cell Phone: _____ Fax Number: _____

Email Address: _____

INFORMATION ABOUT YOUR BUSINESS

Are you current on all Payroll, Income and Property Taxes? Yes No

Is your business registered with the Secretary of State? Yes No

Is the business or any members a defendant in a suit or legal action? Yes No

Has the business or any members gone through bankruptcy or has a judgment against them? Yes No

Number of Employees (including subsidiaries and affiliates):
At Time of Application _____ If loan is Approved _____ Subsidiaries or Affiliates _____

PROFESSIONALS AND REFERENCES:

I hereby authorize Lender to contact the below listed references

Accountant: _____ Phone #: _____

Attorney: _____ Phone #: _____

Insurance Agent: _____ Phone #: _____

Trade Reference: _____ Phone #: _____

Trade Reference: _____ Phone #: _____

LOAN REQUEST

Amount \$ _____ Term: _____

Purpose of Loan: _____

Source of Repayment: _____

Type of Collateral Offered

If the purpose of this credit is the purchase, refinance, or improve a residential dwelling, manufactured home park or multi family dwelling and the applicant is a natural person, go to the Demographic Information Section.

Collateral Description or Address

Estimated Value

| | |
|-------|----------|
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |

In addition – Please provide the following:

1. Business Financial Statements (Balance Sheet & Income Statements) for the last three fiscal years and year-to-date information.
2. Business Federal Tax Returns for past three years.
3. Current personal financial statement and past three years Federal Tax Returns on each 20% or greater owner. Please provide the complete return with all schedules and attachments, including form K-1's.
4. Projections for the next twelve months.
5. Any additional information you feel is material in providing us information concerning your loan request.

ACKNOWLEDGEMENT AND AGREEMENT

Pursuant to the National Privacy Law that took effect July 1, 2001, I authorize Glacier Bank to obtain verification of any information needed to complete my loan request. This information includes but is not limited to my bank account, other assets, employment earning record and the need to order a consumer credit report. I further authorize anyone to accept a photocopy or facsimile of this document as his or her authorization to release such information, including detailed payoff information, to Glacier Bank.

Right to Receive a copy of Appraisal & Valuations for 1st Lien Dwelling secured transactions (Required under 12 CFR § 1002.14). 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.

Everything that I/we have stated in this application is correct to the best of my/our knowledge. I/We understand that you will retain this application whether or not my/our request is approved.

Applicant Signature

Date

Applicant Signature

Date

