



TEXAS CAPITAL BANK™

SBA LOAN APPLICATION

Please note that this application may not be submitted online.

Please contact:

**Jeff Kocher (972.450.5072)
Texas Capital Bank
14131 Midway Road, Suite 100
Addison, TX 75001**

**or fax it to Jeff at:
972.450.5066**

Thank you for your interest.



LOAN APPLICATION CHECKLIST

FOR EACH BOX CHECKED BELOW, PLEASE PROVIDE THE REQUESTED INFORMATION.
PLEASE ALSO SIGN AND DATE WHERE INDICATED.

I. Business Loan Application

- Texas Capital Bank SBA Loan Questionnaire (Form Enclosed)

II. Business Financial Exhibits (For Both Current Business and Business to be Purchased, as applicable)

- Business Profile (or Business Plan for New Business)
- Fiscal Year-End Business Financial Statements for Prior Three Years
- Business Federal Tax Returns for Three Prior Years, to include all Supporting Schedules and Statements
- Interim Business Financial Statement (Year-to-Date) – Current to Within 60 Days of Application Date
- Business Debt Schedule, as of the Same Date as the Interim Financial Statement (Form Enclosed)
- Aging of Accounts Receivable and Accounts Payable (as of the Same Date as the Interim Financial Statements)
- Month-to-Month Projections covering any Interim Period until Year-End plus Two Full Fiscal Years including the Assumptions that the Projections were Based Upon, and a Pro-Forma Business Balance Sheet (Form Enclosed)

III. Personal Financial Exhibits – (Required of Every Owner with 20% or more Ownership Interest and Every Guarantor)

- Credit Application (Form Enclosed)
- Personal Financial Statement including Personal Cash Flow and Contingent Liability Summary (Form Enclosed)
- Personal Federal Tax Returns for Three Prior Years including all Supporting Schedules and Statements
- Drivers License (For Non-U.S. citizens, please also include a copy (Front and Back) of Alien Registration Card)

IV. Legal Entity Documents (as applicable)

- Please provide the Legal Entity Documents for all obligors, borrowers, and guarantors:
 - Sole Proprietorship – Assumed Name Certificate, as applicable
 - Corporation – Articles of Incorporation and Bylaws, Assumed Name Certificate, as applicable
 - Partnerships (General or Limited) – Partnership Agreement (with all Exhibits)
 - Limited Liability Company – Articles of Organization and Operating Agreement

V. Real Estate (as applicable)

- For all Real Estate transactions, please complete the Real Estate Profile Form (Attached).
- For all Construction Loans:
 1. Copy of Contract/Bid for work to be done by Contractor for all construction on Contractor's Letterhead
 2. Construction Budget/Plans and Specifications
 3. Quotes for Machinery and Equipment (On Vendor's Letterhead or from Catalog)
- Copy of Purchase Agreement for any Real Estate or (Operating Business including Real Estate) to be Acquired

VI. Miscellaneous (as applicable)

- Copy of Current Lease or Proposed Lease on Facility to be Occupied (This is required on all SBA Loans)
- Form 4506 for each, as applicable: the current business, the business to be purchased, each guarantor (Form Enclosed)
- List and Description of Collateral. (Model Numbers and Serial Numbers of Equipment valued at over \$500 is required.)
- Resume (or work history) from each partner, holder of 20% or more of common stock and for key management.
- Copy of All Notes to be Refinanced with Loan Proceeds
- Copy of Business Purchase Agreement of any Operating Business to be Acquired
- Copy of Franchise Agreement and Uniform Franchise Offering Circular for Franchise Businesses.



TEXAS CAPITAL BANK™

SBA LOAN QUESTIONNAIRE

Business Name: _____ Date: _____

Address: _____ Business Phone: _____

City, State, Zip: _____ Business Fax: _____

Federal Tax ID #: _____ Date Business Established: _____

Current Number of Employees: _____ Number of Employees After Loan: _____

USE OF PROCEEDS

Purchase Land/Building: _____ New Construction: _____

Leasehold Improvements: _____ Furniture/Fixtures: _____

Machinery/Equipment: _____ Purchase Existing Business: _____

Working Capital: _____ Refinance Debt: _____

TOTAL PROJECT COST: _____

Less Borrower's Equity Injection: _____ Source of Equity Payment: _____

TOTAL LOAN REQUEST: _____ Requested Term in Years: _____

OWNERSHIP

Please list any person (or entity) having any ownership in the applicant business. Please also list all officers of the applicant business regardless of ownership interest. (Ownership must total 100%)

| <u>NAME</u> | <u>OWNERSHIP PERCENTAGE</u> | <u>TITLE</u> |
|-------------|-----------------------------|--------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

AFFILIATES

Please list all business concerns in which the applicant company or any individuals listed in the ownership section above have any ownership. Please also provide current financial statements for each affiliate.

| <u>COMPANY NAME</u> | <u>OWNER</u> | <u>OWNERSHIP PERCENTAGE</u> |
|---------------------|--------------|-----------------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Please provide the answer to the following and details for all “yes” answers.

YES NO

- | | | |
|--|-------|-------|
| 1) Have you or any other officer of your company ever been involved in a bankruptcy or insolvency proceeding? | _____ | _____ |
| 2) Are you or is your business involved in any pending lawsuits? | _____ | _____ |
| 3) Are there any types of judgments or tax liens against your company? | _____ | _____ |
| 4) Do you or your company owe any taxes for years prior to the current year? | _____ | _____ |
| 5) Does your business, its owners or majority stockholders own or have controlling interest in any other business? If yes, please provide a current balance sheet and income statement for each. | _____ | _____ |
| 6) Do you, your spouse, any member of your household, or anyone who works, manages, or directs your business or their spouses or members of their households work for the SBA, Small Business Advisory Council, SCORE, ACE, any Federal Agency, or the participating lender? | _____ | _____ |
| 7) Does your business currently or do you plan to engage in export trade? Would you like information on exporting? | _____ | _____ |
| 8) Have you or your principals or affiliates or your business ever requested government financing? If yes, please provide name of agency, date of request, details on approval or decline, original amount, status of loan and date of pay-off. | _____ | _____ |
| 9) Do you buy from, sell to, or use the services of any concern in which someone in your company has a significant financial interest? | _____ | _____ |
| 10) Is any loan applicant, or any director, executive officer or principal shareholder of loan applicant, an executive officer, director, or principal shareholder of a financial institution? | _____ | _____ |



TEXAS CAPITAL BANK

PERSONAL PROFILE

(Required of Each Proprietor, Partner, Guarantor, Officer, Director, or 20% or more Owner)

Name: _____ SS#: _____

Date of Birth: _____ Place of Birth: _____

Current Address: _____ Since: _____

Previous Address: _____ From: _____ To: _____

EMPLOYMENT STATUS:

Employed By: _____ For How Long?: _____

City, State: _____ Employer Phone: _____

Gross Salary: _____ Last Position Held: _____

PRESENT STATUS:

Marital Status: Married: _____ Unmarried: _____ Separated: _____

Spouse's Name: _____ Spouse's SS#: _____

Spouse's Date of Birth: _____ Spouse's Employer: _____

Position: _____ Gross Salary: _____

Years on Job: _____ Employer Phone: _____

Please provide the answer to the following and details for all "yes" answers.

YES NO

- 1) Are you presently under indictment, on parole, or probation? _____
- 2) Have you ever been charged with and/or arrested for any criminal offense other than a minor motor vehicle violation. Include offenses which have been dismissed, discharged, or not prosecuted? _____
- 3) 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 motor vehicle violation? _____
- 4) Are you a United States citizen? If no, please provide your Alien Register number? _____
- 5) Are you a Veteran? If yes, when did you serve? _____
- 6) Do you own or have controlling interest in any other business? If yes, please provide a current balance sheet and income statement for each. _____
- 7) Are you now, or have you within the last 12 months been, delinquent more than 60days on any child support payments? _____
- 8) Do you, your spouse, any member of your household, or anyone who works, manages, or directs your business or their spouses or members of their households work for the SBA, Small Business Advisory Council, SCORE, ACE, any Federal Agency, or the participating lender? _____
- 9) Have you or your principals or affiliates or your business ever requested government financing? If yes, please provide name of agency, date of request, details on approval or decline, original amount, status of loan and date of pay-off. _____

I/We represent and certify the foregoing information contained in this application and any attached schedules, if any, are true, correct, and complete and that said information is submitted to induce the lender to advance funds to the applicant. Applicant authorizes Texas Capital Bank to obtain credit investigations that it deems necessary, both direct credit inquiries and agency reports.

Applicant Signature/Guarantor Signature

Date

Spouse

Date



Confidential Financial Statement as of _____

| Name | | Employer | |
|---|--------------------------------|-------------------------------------|----------------|
| Address | | Address | |
| Do you <input type="checkbox"/> Own <input type="checkbox"/> Rent | | How Long At Residence | |
| Home Phone | Business Phone | Position | Years |
| Social Security # | Driver's License # | Home Phone | Business Phone |
| Co-Applicant | Co-Applicant Social Security # | Co-Applicant Driver's License # | |
| Assets | | Liabilities | |
| Cash in Other Institutions (Schedule 1) | | Other Wholly-Owned Real Estate | |
| Marketable Securities (Schedule 2) | | Partially Owned Real Estate | |
| Non-Publicly Traded Securities | | Notes Payable to This Bank | |
| Accounts Receivable | | Other Notes Payable | |
| Notes Receivable (Schedule 3) | | Oil & Gas Related Debt (Schedule 8) | |
| Cash Value Life Insurance & Annuities (Schedule 4) | | Income Tax Owning | |
| Real Estate | Homestead | Other Taxes Owning | |
| (Schedule 7) | Other Wholly-Owned R/E | Accounts Payable | |
| | Partial Ownership in R/E | Estimated Credit Card Balance | |
| Oil & Gas Interests (Schedule 8) | | Other Liabilities | |
| Equipment and Other Business Assets | | | |
| 401K and Other Retirement Plans (Schedule 5) | | | |
| Automobiles | | | |
| Personal Property | | | |
| Other Assets | | | |
| | | | |
| Total Assets | | Total Liabilities | |
| | | Net Worth | |

Are you a co-maker, endorser, or guarantor of any loan or contract? No Yes
 If so, for whom: _____ To whom: _____

Have you ever had a tax lien filed? No Yes Amount: \$ _____
 Have you ever defaulted on a loan? No Yes If yes, to whom owed: _____ Amount: \$ _____
 Are there any unsatisfied judgments against you? No Yes If yes, to whom owed: _____ Amount: \$ _____
 Have you been declared bankrupt in the last 10 years? No Yes If yes, where? _____ Year: _____

| | | |
|-------------------------------------|--|--|
| | Applicant | Co-Applicant |
| Are you a U.S. citizen? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are you a permanent resident alien? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Applicant's signature

Date

Co-Applicant's Signature

Date

| Schedule 1 – Deposit Accounts | | | | | |
|-------------------------------|----------------------------|---------|-----------------------------------|----------------|-------------------------|
| Style of Account | Name & Location where held | Balance | Type of Account | Account Number | Restricted? (Yes or no) |
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| | | Total | Total should be same as on page 1 | | |

| Schedule 2 – Stocks and Bonds | | | | | | | |
|-------------------------------|--------------|------------------|------------------|--------------------|--------------------------------|------------------------|---------------------------|
| Name of issuer | Where Traded | Number of shares | Market per share | Total Market Value | Cost | Pledged or restricted? | Registered in the name of |
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| Schedule 3 – Notes Receivable | | | | | | | |
|-------------------------------|-----------------|-----------------|--------------------------------|----------|---------------|------------------------|------------|
| Due From | Original Amount | Present Balance | Rate | Maturity | Payment Terms | Collectible Yes or No? | Collateral |
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| | | Total | Total should be same as page 1 | | | | |

| Schedule 4 – Life Insurance and Annuities | | | | | | | |
|---|-------------|-------------|------------|--------------------|--------------------------------|-----------------|---------|
| Company | Face Amount | Beneficiary | Cash Value | Less: Policy Loans | Net Cash Value | Name of Insured | Pledged |
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| | | | | Total | Total should be same as page 1 | | |

| Schedule 5 – Deferred Compensation Retirement Plans* | | | | | | | |
|--|-----------------|-------------|---------------|-----------|--------------------------------|------------|-------------|
| Trustee or Plan Administrator | Type of Account | Beneficiary | Balance/Value | Plan Loan | Net Plan Value | In Name Of | Access Date |
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| | | | | Total | Total should be same as page 1 | | |

*Includes IRA's, Keoghs, 401K, etc.

Cash Flow Statement

This cash flow statement is a part of my financial statement dated _____

| | Current Year 20 | Next Year (Est.) |
|---------------------------------------|--------------------|---------------------|
| Sources of Cash | | |
| Salaries, Bonuses, etc. (net) | | |
| Trust | | |
| Rents Received | | |
| Interest Income | | |
| Distributions From Production Income | | |
| Distributions From Partnerships, etc. | | |
| Other Sources of Cash | | |
| | | |
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| Total Cash Received | | |

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| Uses of Cash | | |
| Personal Expenses | | |
| (Utilities, Rent, Household, etc.) | | |
| Bank Loans – Principal & Interest | | |
| Other Loans – Principal & Interest | | |
| Insurance Payments | | |
| Taxes Not Covered by Withholding | | |
| Business Requirements | | |
| (Partnership/Equity Contributions, etc.) | | |
| Other Uses of Cash | | |
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| | | |
| Total Cash Outlays | | |

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| Cash Flow Surplus (Deficit) | | |
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| Comments: |
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Applicant's signature

Date

Co-Applicant's Signature

Date

The above financial statement and supporting schedules, which are submitted to you for the purpose of obtaining credit from you, present a true, correct and complete statement of my financial condition as of the date shown. I understand that misrepresenting information on this is a criminal offense under federal law and punishable by a fine or imprisonment.

I will notify you in writing of any material unfavorable change in financial condition. In the absence of such notice, you may consider this a continuing statement and substantially correct. If I apply for further credit, this statement shall have the same force and effect as if deliverable as an original statement of my financial condition at the time I request such further credit. You are authorized to contact any appropriate third parties for the purpose of verifying any stated information herein or at any time furnished by me to you, and obtaining credit information at any time from any of my creditors and/or credit reporting agencies. The financial statement and any other information furnished to you shall be at your property. You are authorized to answer questions about your credit experience with me.

| | |
|----------------------|-------------------------|
| Date: | Date: |
| Applicant Signature: | Co-Applicant Signature: |
| E-Mail Address: | E-Mail Address: |

The following information is requested and is not required:

Do you have an attorney? No Yes Name: _____

Do you have a CPA? No Yes Name: _____

Do you have a Will? No Yes Name of Executor: _____



BUSINESS PROFILE

Please attach any brochures, mailings, advertisements, etc. which would provide additional insight into your business.

Describe your business and give a brief history of the business (Who started it and when, how has the business grown or changed, describe major accomplishments, list previous owners, etc.):

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What products or services do you provide?

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Who are your key customers?

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Who are your key suppliers?

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Who are your major competitors and what are your competitive advantages over them?

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What are your future plans for growth or expansion, if any?

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How will this SBA Loan benefit your business?

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