



COMMERCIAL LOAN APPLICATION

CORPORATE INFORMATION

Legal Business Name:
Mailing Address:
Business Start Date:
Years Operated Under Current Management:
Type of Business (please check one):
Contact Person:
Phone:
Email address:

OWNER / PARTNER INFORMATION

Owner / Principal Name (1):
Home Address:
Home Phone:
Residence:
Checking Account With:
Percent Ownership in Business:
Total Assets \$:
Monthly Gross Salary \$:
Monthly Revolving Credit Payment \$:

Owner / Principal Name (2):
Home Address:
Home Phone:
Residence:
Checking Account With:
Percent Ownership in Business:
Total Assets \$:
Monthly Gross Salary \$:
Monthly Revolving Credit Payment \$:

*You are not required to disclose alimony, child support, separate maintenance or its source, unless you want it considered in connection with this application.

EQUIPMENT INFORMATION (Please provide all quotes)

Financing Term Requesting:
Equipment Description:
Is Equipment New or Used?
Vendor Name:
Vendor Address:
Contact Person:
Phone:
Email address:

(If you have more than one vendor, please list as separate attachment including all quotes)

Will the equipment be maintained at the address listed above? Yes No If no, Where

BUSINESS BANKING INFORMATION

(1) Bank Name: _____ Address: _____
 Contact Person: _____ Phone #: _____
 Account Type: _____ Account#: _____

(2) Bank Name: _____ Address: _____
 Contact Person: _____ Phone #: _____
 Account Type: _____ Account#: _____

(3) Bank Name: _____ Address: _____
 Contact Person: _____ Phone #: _____
 Account Type: _____ Account#: _____

BUSINESS CREDIT REFERENCES *(Suppliers/Companies you have established credit with)*

(1) Vendor Name: _____ Address: _____
 Contact Person: _____ Phone #: _____
 Account#: _____

(2) Vendor Name: _____ Address: _____
 Contact Person: _____ Phone #: _____
 Account#: _____

(3) Vendor Name: _____ Address: _____
 Contact Person: _____ Phone #: _____
 Account#: _____

PLEASE PROVIDE US WITH THE FOLLOWING INFORMATION

Has the business ever declared bankruptcy?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Chapter	Date of Filing
Has any principal/owner ever declared bankruptcy?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Name And Chapter	Date of Filing
Are there any delinquent taxes owed by the business or any principal/owner?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Explain	
Is there any pending litigation or unsatisfied judgments for the business or any principal/owner?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Explain	
Is the business or any principal/owner contingently liable for any debts?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Explain	
Does any one customer represent more than 10% of Annual sales/revenue?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Customer Name and Percentage	
Is the business for sale or under agreement that would change the ownership?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Explain	
Has the business incurred a loss in the last 3 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Explain	

Applicant's Statement. I authorize Meridian Capital Corporation, its agents, assigns and/or its nominees, to request, verify and review all data you require about the Company an the principals and guarantors, including credit reports from agencies, now and for any future review of this application or for collection of payments. I authorize you to give credit information about me and the Company to others. I agree that your application and documentation fees are non-refundable. All the information I have delivered is correct and complete, except that alimony, child support and separate information on the applicant and/or proposed guarantors as may be required.

 Company Name

 Authorized Signature

 Date