



Business Loan Application

Please contact us if you have any questions while completing this form. You may apply for a credit extension or financial accommodation individually or jointly with a co-applicant.

Business Information					
Legal Business Name					
DBA Name					
Fed Tax ID #			Website		
Address					
Mailing Address (if different)					
State of Organization					
Type of Organization	Corporation			Partnership	
	<input type="checkbox"/> S	<input type="checkbox"/> C	<input type="checkbox"/> LLC	<input type="checkbox"/> General	<input type="checkbox"/> Limited
	Other				
	<input type="checkbox"/> Sole	<input type="checkbox"/> Non-Profit	<input type="checkbox"/> NGO	<input type="checkbox"/> Professional Association	
Referred By	Individual			Company	
Accountant	Firm			Phone	

Business Primary Contact	
Name	Title
Business Phone	Cell Phone

Business Details	
Nature of Business	
Products / Services Offered	
Primary Activities (check all that apply)	<input type="checkbox"/> State-wide <input type="checkbox"/> Domestic <input type="checkbox"/> International
Date Business Established (MM/YYYY)	
Date Current Ownership Bought / Established Business (MM/YYYY)	
Have Principals Changed in the Past Year?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Are any Business Owners or Principals Related to Drake Bank?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, describe:		
Number of Employees		
Does the Business have Multiple Locations?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If Yes, How Many Locations?		
List Each Location's Address		

Competition			
List your major competitors and the business lines in which they compete.			
Company Name	Business Line	Company Name	Business Line

Loan Request	
Total Project Cost / Need	Amount Requested
Loan Type	<input type="checkbox"/> Installment <input type="checkbox"/> Line of Credit <input type="checkbox"/> Real Estate <input type="checkbox"/> Short Term/Single Pay
Loan Purpose	<input type="checkbox"/> Purchase Fixed Assets <input type="checkbox"/> Inventory/Receivables <input type="checkbox"/> Purchase Real Estate
	<input type="checkbox"/> Leasehold Improvements <input type="checkbox"/> Real Estate Construction <input type="checkbox"/> Debt Restructure
	<input type="checkbox"/> Other
Maximum Monthly Payment	Desired Term
Proposed Collateral	
Proposed Collateral Location	
Appraised Value (if known)	Date Appraised
Cash Contribution	

Business Accounts			
Financial Institution	Checking Avg. Balance	Savings Avg. Balance	Loan Balances

Ownership Information

Complete the following for each individual, if any, who directly or indirectly, through any contract, arrangement, understanding, relationship, or otherwise, owns 20% or more of the equity interests of the Legal Entity. The Beneficial Owner box will automatically check for any individuals owning 25% or more.

Owner Name	Email	% Owned	Beneficial Owner	PFS Required
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

Beneficial Owner Detail: As applicable, explain any layer of Beneficial Ownership. (i.e., ABC Co. is 50% owner of 123 Corp. 123 Corp is 50% owned by John Doe; therefore, John Doe is a 25% Beneficial Owner of ABC Co.)

Also, please complete the following information for one individual with significant responsibility for managing the Legal Entity, such as an executive officer or senior manager. If appropriate, a beneficial owner may also be listed in this section. (i.e., Chief Executive Officer, Chief Financial Officer, Chief Financial Officer, Managing Member, General Partner, President, Vice President, Treasurer, or any other individual who regularly performs similar functions). Provide a driver's license copy and SSN for identity verification, if not yet provided.

Name	
Title	SSN
Address	

Authorized Signers

For data security we have provided an individual page for each signer to complete

Signer 1 Name

Signer 2 Name

Signer 3 Name

Authorized Signers

Signer #1

Name

Title

Email

Address

Work Phone

Home/Cell Phone

SSN/ITIN

Date of Birth

Status

American Citizen

Resident Alien

Non-Resident Alien

Are you or have you been a Senior Foreign Political Figure?

Yes

No

Have any family members or close associates ever been Senior Foreign Political Figures?

Yes

No

Authorized Signers

Signer #2

Name

Title

Email

Address

Work Phone

Home/Cell Phone

SSN/ITIN

Date of Birth

Status

American Citizen

Resident Alien

Non-Resident Alien

Are you or have you been a Senior Foreign Political Figure?

Yes

No

Have any family members or close associates ever been Senior Foreign Political Figures?

Yes

No

Authorized Signers

Signer #3

Name

Title

Email

Address

Work Phone

Home/Cell Phone

SSN/ITIN

Date of Birth

Status

American Citizen

Resident Alien

Non-Resident Alien

Are you or have you been a Senior Foreign Political Figure?

Yes

No

Have any family members or close associates ever been Senior Foreign Political Figures?

Yes

No

Miscellaneous		
Is the Business Party to Any Claim, Lawsuit, or Criminal Investigation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the Business ever Declared Bankruptcy or Defaulted on any Debts?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, explain		
Is the Business Endorser, Guarantor, or Co-Maker for Obligations not Listed on its Financial Statements?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, indicate total contingent liability		
Details		
Are there any Delinquent FICA or Sales Taxes?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are Accounts Receivable or Inventory Currently Pledged as Collateral?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are there any State or Federal Tax Liens filed against the Business?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, explain		
Is the Business a Money Service Business?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the Business Own or Operate an ATM?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the Business sell Lottery Tickets?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the Business sell Money Orders or Prepaid Cards?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the Business Cash Checks?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the Business Engage in the Sale of Hemp/CBD Products?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the Business Engage in the Sale of Cannabis Products?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

In signing below, I certify that I am authorized to provide this information on behalf of the applicant business. I certify that I made no misrepresentations in this application or in any related documents, that all information is true and complete, and that I did not omit any important information. Drake Bank is authorized to verify with other parties and to make any investigation of my credit, either directly or through any agency employed by Drake Bank for that purpose. The lender may disclose to any other interested parties information as to Drake Bank's experiences or transactions with applicant accounts. I understand that Drake Bank will retain this application and any other information Drake Bank receives, even if no loan, deposit account, or other form of credit is granted.

This information may be provided to Drake Bank for the purpose of requesting a loan. Drake Bank may be relying on the creditworthiness of an individual other than the Applicant for the business loan. It is understood that any property securing the credit or loan will not be used for any illegal or restricted purpose. Because of my relationship to the Applicant or my role in the accommodation for the loan, my personal creditworthiness is a factor in the evaluation of the application or accommodation for the loan. By signing below, I authorize Drake Bank to obtain a consumer credit report on me for the purpose of evaluating the loan application.

If this request is to secure a loan with a 1st lien on a dwelling, the Bank may order an appraisal to determine the property's value and charge me/us for the appraisal. The Bank will promptly provide a copy of any appraisal, even if the loan does not close. I/we may pay, at my/our cost, for an additional appraisal for my/our own use.

Important Information about Procedures for Opening a New Account

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license and other identifying documents.

Unlawful Internet Gambling Enforcement Act of 2006 and Regulation GG

In accordance with the requirements of the Unlawful Internet Gambling Enforcement Act of 2006 and Regulation GG, this notification is to inform you that restricted transactions are prohibited from being processed through your account or relationship with our institution. Restricted transactions are transactions in which a person accepts credits, funds, instruments, or other proceeds from another person in connection with unlawful Internet gambling.

By signing below, I certify that this Business does not engage in Internet gambling. I will notify Drake Bank in the event of any change in circumstance.

All accounts are subject to verification and approval. Completing and signing this application does not guarantee that Drake Bank will open an account for you until the verification is complete.

Name #1	Title
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Authorized Signature	Date
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Name #2	Title
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Authorized Signature	Date
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Name #3	Title
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Authorized Signature	Date
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Drake Bank NMLS #446696
 Janet Alland NMLS #721546, Annmarie Becker NMLS #860395,
 Gino Monico NMLS #895801

Internal Use Only				
Date Application Received	Received By			
<input type="checkbox"/> Face to Face	<input type="checkbox"/> Mail	<input type="checkbox"/> Fax	<input type="checkbox"/> Email	<input type="checkbox"/> Phone (sign verification box)
HMDA (Check Applicable)	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
GMI Collected	<input type="checkbox"/> Yes	<input type="checkbox"/> No		

Phone Application Verification *By signing, Banker certifies that a signed, full application is on file

Banker Signature*	Date
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Exhibit A: Individual Applicant Attachment

Please contact us if you have any questions while completing this form.
You may apply for a credit extension or financial accommodation individually or jointly with a co-applicant.

Applicable boxes below are REQUIRED to be checked, and initial boxes MUST be filled out.

- | | |
|---|------------------------------------|
| <input type="checkbox"/> Individual Credit – Relying on my income or assets | <input type="checkbox"/> Unsecured |
| <input type="checkbox"/> Individual Credit – Relying on my income or assets and other sources | <input type="checkbox"/> Secured |
| <input type="checkbox"/> Joint Credit | |

Applicant Initials	Co-Applicant Initials
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Exhibit B: HMDA Worksheet

COMPLETE THIS SECTION ONLY IF THE LOAN PURPOSE IS A HOME PURCHASE, HOME IMPROVEMENT, OR REFINANCE

REQUEST FOR INFORMATION FOR GOVERNMENT MONITORING PURPOSES	
<p>The following information is requested by the federal government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to provide this information, but are encouraged to do so. You may select one or more designations for "Race" and/or "Ethnicity." The law provides that a lender may not discriminate on the basis of this information or on whether you choose to furnish it. However, if you choose not to furnish the information and you have made this application in person, under federal regulations, the lender is required to note ethnicity, race, or national origin, and sex on the basis of visual observation or surname. If you do not wish to furnish this information, please mark this indication below.</p>	
ETHNICITY	
Applicant	<input type="checkbox"/> I do not wish to furnish this information <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> Hispanic or Latino
Hispanic or Latino Expanded Origin (optional)	<input type="checkbox"/> Mexican <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban <input type="checkbox"/> Other Hispanic or Latino Enter Origin (i.e., Argentinean, Columbian, Dominican, Nicaraguan, Salvadoran, Spaniard, etc.)
Co-Applicant	<input type="checkbox"/> I do not wish to furnish this information <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> Hispanic or Latino
Hispanic or Latino Expanded Origin (optional)	<input type="checkbox"/> Mexican <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban <input type="checkbox"/> Other Hispanic or Latino Enter Origin (i.e., Argentinean, Columbian, Dominican, Nicaraguan, Salvadoran, Spaniard, etc.)
RACE	
Applicant	<input type="checkbox"/> I do not wish to furnish this information <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White
American Indian or Alaskan Native Expanded (optional)	Enrolled or Principal Tribe Name
Asian Expanded Race (optional)	<input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other Asian Enter Race i.e., Hmong, Laotian, Thai, Pakistani, Cambodian, etc.
Native Hawaiian or Other Pacific Islander Expanded Race (optional)	<input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Guamanian / Chamorro <input type="checkbox"/> Samoan <input type="checkbox"/> Other Pacific Islander Enter Race i.e., Fijian, Tongan, etc.
Co-Applicant	<input type="checkbox"/> I do not wish to furnish this information <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White
American Indian or Alaskan Native Expanded (optional)	Enrolled or Principal Tribe Name
Asian Expanded Race (optional)	<input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other Asian Enter Race i.e., Hmong, Laotian, Thai, Pakistani, Cambodian, etc.
Native Hawaiian or Other Pacific Islander Expanded Race (optional)	<input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Guamanian / Chamorro <input type="checkbox"/> Samoan <input type="checkbox"/> Other Pacific Islander Enter Race i.e., Fijian, Tongan, etc.

SEX			
Applicant	<input type="checkbox"/> I do not wish to furnish this information	<input type="checkbox"/> Male	<input type="checkbox"/> Female
Co-Applicant	<input type="checkbox"/> I do not wish to furnish this information	<input type="checkbox"/> Male	<input type="checkbox"/> Female

BANK USE ONLY			
IN-PERSON APPLICATION			
The Applicant and/or co-applicant do not wish to furnish information for monitoring purposes. Therefore, the lender has provided this information based on visual observation and/or surname as required by the Home Mortgage Disclosure Act for the following sections.			
Applicant	<input type="checkbox"/> Ethnicity	<input type="checkbox"/> Race	<input type="checkbox"/> Sex
Co-Applicant	<input type="checkbox"/> Ethnicity	<input type="checkbox"/> Race	<input type="checkbox"/> Sex
PHONE/VERBAL APPLICATION			
<input type="checkbox"/> The above disclosure was provided to the Applicant(s) orally. Their responses were documented by the Banker.			
Banker Signature		Date	