



P.O. Box 40333 Houston, Texas 77240-0333

SBA Business Loan Application

***For additional information please call:
713-507-SBA7 (7227)
1-888-425-SBA7 (7227)
Or visit us at www.banksterling.com***

LOAN REQUEST FORM

APPLICANT COMPANY

Company Name _____

DBA (if applicable) _____

Name of Franchise (if applicable) _____

Telephone Number _____

Address _____

City _____

State _____

Zip _____

Date Established _____

Tax ID# _____

State of Incorporation or Organization _____

State Organization number _____

Type of Applicant Organization: Corporation Sole Proprietorship General Partnership
 Limited Partnership or Limited Liability Partnership Limited Liability Corporation

Number of Employees Existing _____ After this Financing _____ Affiliates _____

Have you or any business controlled by you, ever had a loan with **Sterling Bank** Yes No

If yes, please describe type of transaction, amount, and term

OWNERSHIP OF APPLICANT COMPANY

List below all owners, partners, L.L.C. members, and stockholders totaling 100% of ownership.

Name _____

Name _____

Title _____

Title _____

Address _____

Address _____

City _____

State _____

Zip _____

City _____

State _____

Zip _____

Telephone _____

Telephone _____

Percent of Ownership _____

Percent of Ownership _____

Social Security Number _____

Social Security Number _____

Name _____

Name _____

Title _____

Title _____

Address _____

Address _____

City _____

State _____

Zip _____

City _____

State _____

Zip _____

Telephone _____

Telephone _____

Percent of Ownership _____

Percent of Ownership _____

Social Security Number _____

Social Security Number _____

AFFILIATES

List below all business concerns in which the applicant company or any of the individuals listed in the ownership Section above have 20% or greater ownership or controlling interest.

Name _____

Name _____

Individual Name _____

Individual Name _____

Address _____

Address _____

City _____

State _____

Zip _____

City _____

State _____

Zip _____

Telephone _____

Telephone _____

Percent of Ownership _____

Percent of Ownership _____

Number of Employees _____

Number of Employees _____

ESTIMATED PROJECT COSTS

Land Acquisition	\$	
* New Building Construction	\$	
Construction Contingency/Overruns Business Acquisition	\$	
Land and Building Acquisition	\$	
"Building or Leasehold Improvements/Repairs	\$	
Acquisition of Machinery/Equipment	\$	
Acquisition of Furniture / Fixtures	\$	
Inventory Purchase	\$	
Working Capital (including Accounts Payable)	\$	
Payoff Bank Loan	\$	
Other Debt Payment	\$	
Estimated Closing Costs	\$	
Construction Loan Fee (estimated)	\$	
Construction Loan Interest (estimated)	\$	
Survey Fee (estimated)	\$	
Title Insurance (estimated)	\$	
Appraisal Fee (estimated)	\$	
Legal Fees (estimated)	\$	
Environmental Fee (estimated)	\$	
Other (_____)	\$	
Deposits (_____)	\$	
Franchise Fee (if applicable)	\$	
SBA Guarantee Fee	\$	
Lender Fee	\$	
Other Fees/Cost (_____)	\$	
TOTAL ESTIMATED PROJECT AMOUNT	\$	
LESS OWNER'S CASH / EQUITY TO BE INJECTED	\$	
LESS SELLER CARRY BACK (IF APPLICABLE)	\$	
TOTAL LOAN REQUESTED FOR PROJECT	\$	

HISTORY OF BUSINESS

BACKGROUND AND HISTORY OF COMPANY / BUSINESS (including business to be acquired)

NATURE OF BUSINESS, TYPES OF PRODUCTS / SERVICES

CUSTOMER PROFILE

LIST OF KEY CUSTOMERS

LIST OF MAJOR COMPETITORS

MAJOR PAST ACCOMPLISHMENTS

FUTURE EXPANSION PLANS

HOW WILL THIS LOAN BENEFIT YOUR COMPANY?

WILL THIS LOAN CREATE NEW EMPLOYMENT OPPORTUNITIES?

BUSINESS STRUCTURE

- CORPORATION
- LIMITED LIABILITY COMPANY
- PARTNERSHIP(General, Limited or Limited Liability)
- SOLE PROPRIETORSHIP

OFFICERS

President

Vice President

Secretary

Treasurer

MEMBERS/PARTNERS-List all

SHAREHOLDERS

Name	Number of shares	% of shares
------	------------------	-------------

PROFIT & LOSS PROJECTIONS

MONTH	1	2	3	4	5	6	7	8	9	10	11	12	Total
Total Sales													
Cost of Sales													
Gross Profit													
Officer Salary (ies)													
Wages													
Rent-Property													
Rent-Equipment													
Auto/Truck Expenses													
Office Supplies													
Advertising													
Telephone & Utilities													
Bad Debts													
Taxes/Licenses													
Depreciation													
Repairs/ Maintenance													
Accounting/ Legal													
Interest													
Insurance all													
Office Expenses													
Other													
Total Expenses													
Net Profit													

MANAGEMENT RESUME

EDUCATION

Type of Degree

Name & Location of Institution

Dates From/To

Major

Did You Graduate?

Type of Degree

Name & Location of Institution

Dates From/To

Major

Did You Graduate?

Type of Degree

Name & Location of Institution

Dates From/To

Major

Did You Graduate?

MILITARY SERVICE BACKGROUND

Branch

From TO

Honorable Discharge?

Rank at Discharge

Grade

WORK EXPERIENCE

Are you employed by the U.S. Government?

Yes No

Agency/Position:

Grade

From

Title

Duties

OTHER WORK EXPERIENCE

From

TO

Title

Duties

Company Name/Location

From

TO

Title

Duties

Company Name/Location

PREVIOUS SBA OR OTHER FEDERAL GOV. DEBT

Complete the following if you or any principals or affiliates have ever requested Government Financing (including an SBA loan) or are delinquent on the repayment of any Federal Debt

Name of Agency	Original Amount of Loan	Date of Request	Approved or declined	Balance	Current or Past Due

- Have you or any officer or manager of your company ever been involved in bankruptcy or insolvency proceedings? If yes, please furnish details in a separate exhibit Yes No
- Are you or your business involved in any pending lawsuits? If yes, furnish details in a separate exhibit. Yes No
- Do you or your spouse or any member of your household, or anyone who owns, manages or directs your business, or their spouses or members of their households, work for the Small Business Administration, Small Business Advisory Council, SCORE, ACE, a Federal Agency, or the participating lender? If yes, please provide the name and address of the person and the office where employed in a separate exhibit. Yes No
- Have you ever been disbarred or suspended from doing business with the U.S. Government? Yes No
- Are all your business and personal taxes current? Yes No
- Does your business currently engage in Export Trade? Yes No
- Do you plan to begin exporting as a result of this loan? Yes No

PERSONAL FINANCIAL STATEMENT



Complete this form for: (1) each proprietor, or (2) each limited partner who owns 20% or more interest and each general partner, or (3) each stockholder owning 20% or more of voting stock, or (4) any person or entity providing a guaranty on the loan.

Name Business Phone

Residence Address Residence Phone

City, State, & Zip Code

Business Name of Applicant/Borrower

ASSETS	(Omit Cents)	LIABILITIES	(Omit Cents)
Cash on hand & in Banks	\$ _____	Accounts Payable	\$ _____
Savings Accounts	\$ _____	Notes Payable to Banks and Others (Describe in Section 2)	\$ _____
IRA or Other Retirement Account	\$ _____	Installment Account (Auto)	\$ _____
Accounts & Notes Receivable	\$ _____	Installment Account (Other)	\$ _____
Life Insurance-Cash Surrender Value Only (Complete Section 8)	\$ _____	Loan on Life Insurance	\$ _____
Stocks and Bonds (Describe in Section 3)	\$ _____	Mortgages on Real Estate (Describe in Section 4)	\$ _____
Real Estate (Describe in Section 4)	\$ _____	Unpaid Taxes (Describe in Section 6)	\$ _____
Automobile-Present Value	\$ _____	Other Liabilities	\$ _____
Other Personal Property (Describe in Section 5)	\$ _____	Total Liabilities	\$ _____
Other Assets (Describe in Section 5)	\$ _____	Net Worth	\$ _____
Total	\$ _____	Total	\$ _____

Section 1 Source of Income

Salary	\$ _____
Net Investment Income	\$ _____
Real Estate Income	\$ _____
Other Income (Describe below)*	\$ _____

Contingent Liabilities

As Endorser or Co-Maker	\$ _____
Legal Claims & Judgments	\$ _____
Provision for Federal Income Tax	\$ _____
Other Special Debt	\$ _____

Description of Other Income in Section 1.

*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Section 2. Notes Payable to Banks and Others

Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Collateral	Type of

Section 3. Stocks and Bonds. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed)

Number of Shares	Name of Securities	Cost	Market Value Quotation/ Exchange	Date of Quotation/ Exchange	Total Value

Section 4. Real Estate Owned. List each parcel separately. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed.)

	Property A	Property B	Property C
Type of Property			
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Month/Year			
Status of Mortgage			

Section 5. Other Personal Property and Other Assets. (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and if delinquent, describe delinquency)

Section 6. Unpaid Taxes. (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

Section 7. Other Liabilities. (Describe in detail.)

Section 8. Life Insurance Held. (Give face amount and cash surrender value of policies - name of insurance company and beneficiaries)

I authorize Sterling Bank to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan.

Signature: _____ Date: _____ Social Security Number: _____

Signature: _____ Date: _____ Social Security Number: _____

PERSONAL INCOME AND EXPENSE ANALYSIS

Name _____		MONTHLY	ANNUAL
INCOME-			
AVAILABLE DRAW	(NP +DEPRECIATION)	_____	_____
GROSS SALARY	(PRINCIPAL)	_____	_____
GROSS SALARY	(SPOUSE)	_____	_____
RENTAL INCOME	(GROSS)	_____	_____
INTEREST INCOME	(RECURRING)	_____	_____
ALIMONY*		_____	_____
OTHER INCOME	(RECURRING)	_____	_____
TOTAL INCOME		_____	_____

*Alimony or child support payments need not be disclosed unless it is desired to have such payments counted toward total income.

EXPENSES:

MORTGAGE EXPENSE	(P&I)	_____	_____
RENTAL EXPENSE		_____	_____
RESIDENCE EXPENSES	(CASH EXP. Less P&I)	_____	_____
AUTO LOANS	(ALL)	_____	_____
INSTALLMENT LOANS	(ALL)	_____	_____
REVOLVING CREDIT	(5'70 OF ALL BALANCES)	_____	_____
UTILITIES/PHONE	(ESTIMATE)	_____	_____
INSURANCE	(ALL PERSONAL)	_____	_____
FOOD	(ESTIMATE)	_____	_____
CLOTHING	(ESTIMATE)	_____	_____
MEDICAL EXPENSES	(3 YR. AVERAGE)	_____	_____
INCOME TAXES	(HISTORICAL RATE)	_____	_____
PROPERTY TAXES	(HISTORICAL RATE)	_____	_____
ALIMONY	(IF APPLICABLE)	_____	_____
CHILD CARE	(IF APPLICABLE)	_____	_____
OTHER EXPENSES		_____	_____
MISCELLANEOUS	(Typical range is 5% -10% of total income)	_____	_____
TOTAL EXPENSES		_____	_____
NET DISCRETIONARY INCOME		_____	_____
COVERAGE RATIO (INCOME-EXPENSE)		_____	_____

Signature _____

Date _____

STERLING BANK AUTHORIZATION TO OBTAIN AND RELEASE INFORMATION

In connection with this application for financing (and any update, extension, modification, renewal or review of such financing, if it is granted), each of the undersigned hereby: **authorizes Sterling Bank**, the "Lender") to make all inquiries it deems necessary to verify the accuracy of the information provided herein and to determine my creditworthiness including, without limitation, obtaining consumer and/or business credit reports regarding me or any entity I am affiliated with. Each of the undersigned individuals hereby acknowledges that Lender will obtain a consumer credit report concerning them.

The Lender may, at any time in its sole discretion, disclose the status of the proposed financing transaction and the credit data and other information concerning or relating to the undersigned or the proposed financing transaction to the SBA, referral sources, franchisors, vendors, loan participants, other lenders, agents and affiliates of any undersigned or the Lender.

The undersigned hereby certify that the enclosed application information, including all attachments, exhibits, schedules, etc., are valid, accurate and complete.

All owners including stockholders with 20% or more ownership interest, partners, directors and guarantors must sign this form (spouses should sign when applicable).

NAME	SIGNATURE	TITLE	DATE
NAME	SIGNATURE	TITLE	DATE
NAME	SIGNATURE	TITLE	DATE
NAME	SIGNATURE	TITLE	DATE
NAME	SIGNATURE	TITLE	DATE
NAME	SIGNATURE	TITLE	DATE