

Required Document Checklist for Loan Requests More Than \$100,000

Please complete your application and documents before your appointment. Include this completed checklist with your application. To submit your application electronically, please contact us for a secure link.

For II	ne Business:
	Last 3 years tax returns
	Current financial statements if more than 5 months since last fiscal year-end
	Business plan if the business is a start-up
	Schedule of loans/debts on OUCU form
	Bank account statements for business (last 60 days for non-OUCU accounts)
For Ea	ach Owner:
	Last 3 years of personal tax returns
	W-2s for last 3 years
	3 most recent paystubs showing name, SS #, and YTD information
	Personal Financial statement on OUCU form
	Real estate schedule on OUCU form (if applicable)
	Most recent retirement and investment statements (last 60 days)
	Bank account statements for personal (last 60 days for non-OUCU accounts)
For R	eal Estate:
	OUCU real estate schedule rent roll
	Copy of leases
	Copy of deed
	Purchase agreement (if applicable)
Additi	ional Items (if):
	If construction or improvement loan – plans, specs, AIA Documentation, budget, general contractor information and signed contract
	If franchise, provide copy of UFOC, Franchise Agreement
	If Trust copies of Trust Agreement, Addendums and any changes.

All information must be signed and dated. Your application is not considered complete until we have received all REQUIRED information. Incomplete submission will not be processed. We will contact you

Business Services OUCU Financial | 944 E. State St. Athens, OH 45701 740-597-2879 | Fax 740-597-2874 | business@oucu.org

promptly if more information is needed to process your request.



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			BUSINE	SS LOAN APPLIC	ATION			
***** Each shareholder, partner or member	owning 20 percent or more in	iterest i	in the Business must	sign a personal gua	ranty.			
			BORR	OWER INFORMAT	TION			
Business Applicant's Name (exact legal name	e)			DBA (if applicable)				
Taxpayer ID Number	Year Business Established	Years	Current Ownership	Years Owners have	been in this line of bus	siness		
Business Type:	INDIVIDUAL		CORPORATIO	ON	PARTNER	SHIP		OTHER
	Sole Proprietorshi	ip	Su	b S-Corporation		General Partne	rship	Nonprofit Organization
	Individua	al		C-Corporation		Limited Partne	rship	Professional Association
			Limited Li	ability Company	Lim	ited Liability Partne	rship	Trust
If II-4h-all all and a special addition								Other
f "other", please provide details								
Description of the Business or Service								
Business Contact Name				Business Phone		Email		
Cell Phone		Perso	onal Email					
BUSINESS LOCATION (cannot be a P.C	BUSINESS LOCATION (cannot be a P.O. box):							
Street Address		City			State	Zip Code		
BUSINESS MAILING ADDRESS (if diffe	rent from above):							
Street Address		С	Dity			State	Zip Code	
				LOAN REQUEST				
	Mortgage			Vehicle		Equipment		Line of credit
	SBA 7a/504	0		struction Other				
Type of Loan	If "Other", please provide detail:							
Loan Amount	Loan Purpose							
COLLATERAL OFFERED								
Type of Collateral: (check all that apply) Real estate			\	/ehicle		Equipment		Accounts Receivable
			Inv	ventory Account #		Other		
(Please provide more information if "Other" is indicated:)								
Collateral Description: (Examples: property address and type, year/make/model of vehicles or equipment, etc.)								
						T-		
Collateral Value:		Collate	eral Owner:			Source of Value:		

	OWNERSHIP/GUARANTORS/CO-APPLICANTS INFORMATION							
				OWNERSHIP/GUAR	ANTORS/CO-APPLICANTS II	NFORMATION		
List all Owners, Gua	List all Owners, Guarantors, and/or Co-Applicants for loan request							
	If the Borrower is an entity (corporation, limited liability company, etc.), list each owner, guarantor, and/or co-applicant in the table below, along with their date of birth, social security number, and mailing address. A personal guaranty (greater than 20% ownership), will be required from each owner of the entity.							
1. Name/Title			Social Security #	DOB	% Ownership		Number of Yrs w/ Business	
						%		
Co Applicant?	YES	NO	Guarantor? YES	NO	Mailing Address:			
2. Name/Title			Social Security #	DOB	% Ownership		Number of Yrs w/ Business	
						%		
Co Applicant?	YES	NO	Guarantor? YES	NO	Mailing Address:			
3. Name/Title			Social Security #	DOB	% Ownership	٥,	Number of Yrs w/ Business	
						%		
Co Applicant?	YES	NO	Guarantor? YES	NO	Mailing Address:			
4. Name/Title			Social Security #	DOB	% Ownership		Number of Yrs w/ Business	
						%		
					Mailing Address:			
Co Applicant?	YES	NO	Guarantor? YES	NO				
				BUS	SINESS DEPOSIT ACCOUNTS			
Time of Assemb					Comment Bala			

Financial Institution	Type of Account	Current Balance	Would you like to move the account to OUCU?					
			YES	NO				
			YES	NO				
			YES	NO				

RELATED BUSINESS ISSUES							
Has the Applicant or any Guarantor or Co-applicant ever declared bankruptcy?	YES	NO					
Has any Applicant, Guarantor, or Co-Applicant ever been convicted of a Felony? If yes, date of conviction and outcome: Please provide documentation.	YES	NO					
Is the Business Applicant or any Guarantor or Co-applicant a party to any claim or lawsuit?	YES	NO					
Are there any state or federal tax liens filed against any Business Applicant, Guarantor, or Co-applicant?	YES	NO					

ACKNOWLEDGEMENT & CERTIFICATION

This application is completed for:

Business-purpose credit* in my name or that I personally guaranty. I am relying on my income and assets and, if applicable, the income and assets of the business in which I am the sole owner, as the basis for repayment.

If you are applying for secured credit, what is your marital status?

Married

Unmarried

Separated

Business-purpose credit* in all of our names or that we all personally guaranty. We are relying on our joint incomes and assets and, if applicable, the business in which we are joint-owners, as the basis for repayment.

*"Business-purpose credit" includes credit of any kind extended to an individual or entity for commercial purposes, including, but not limited to, credit extended to purchase, refinance or improve 1-4 unit residential rental property, multi-family rental property, commercial real estate or farm land.

The undersigned acknowledge & understand that the information contained herein, along with all information submitted with this application, is provided to induce OUCU Financial ("OUCU") to extend or to continue to extend business-purpose credit to the undersigned or to others upon the guaranty of the undersigned, & OUCU is relying on said information in deciding to grant or continue credit or to accept a guaranty thereof. The undersigned represent, warrant & certify that the information provided herein & submitted with this application is true, correct & complete. The undersigned agree to notify OUCU immediately & in writing of any change in name, address, or employment & of any material adverse change in the financial condition of any of the undersigned or the ability of any of the undersigned to perform their obligations to OUCU. If the undersigned fail to notify OUCU as required above, or if any of the information herein or if any of the information submitted with this application should prove to be inaccurate or incomplete in any material respect, OUCU may declare the indebtedness of the undersigned or the indebtedness guaranteed by the undersigned, as the case may be, in default & immediately due and payable. The undersigned acknowledge they have read & accepted the terms & disclosures contained herein. All parties agree & acknowledge that a copy or facsimile of this application will be as valid as the original. This application & any other financial or other information that the undersigned gives OUCU shall be the property of OUCU.

IMPORTANT NOTICES & DISCLOSURES

IMPORTANT NOTICE. It is a Federal crime under Section 1014 of Title 18 of the United States Code for any person to knowingly make any false statement or report, or willfully overvalue any land, property or security for the purpose of influencing in any way the action of an insured State-chartered credit union & any institution the accounts of which are insured by the National Credit Union Administration.

EQUAL CREDIT OPPORTUNITY ACT. The federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is: Federal Trade Commission, Chicago Regional Office, 55 E. Monroe St., Suite 1437, Chicago, IL 60603.

The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio civil rights commission administers compliance with this law.

APPRAISAL NOTICE. 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. By signing below, you acknowledge receipt of this Appraisal Notice.

RIGHT TO REQUEST SPECIFIC REASON FOR CREDIT DENIAL. If your application for credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact us within sixty (60) days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within thirty (30) days of receiving your request for the statement. Please send requests to: OUCU Financial, 944 East State Street, Athens, Ohio 45701.

ADDITIONAL NOTICE: OUCU complies with Section 326 of the Patriot Act, which requires OUCU to obtain, verify, and record information that identifies each applicant for financing. OUCU complies with the FACTAct, and other similar laws, which allow each applicant to opt out of information sharing for marketing purposes. The federal agency that administers compliance with this law concerning this creditor is: National Credit Union Administration Regional Director, Region III, Suite 1600, 7000 Central Parkway, Atlanta, Georgia 30328.

DISCLOSURE AND CONSENT TO RECEIVE DOCUMENTS IN ELECTRONIC FORM. This disclosure required by this part that are required to be given in writing may be provided to the applicant in electronic form, subject to compliance with the consumer consent and other applicable provisions of the Electronic Signature in Global and National Commerce Act (E-Sign Act) (15 U.S.C. 7001 et. seq.). Where the disclosure under ss 1002.5(b)(1), 1002.5(b)(1), 1002.5(d)(1), 1002.5(d)(2), 1002.13, and 1002.14(a)(2) accompany an application accessed by the applicant in electronic form, these disclosures may be provided to the applicant in electronic form or with the application form, without regard to the consumer consent of the E-Sign Act.

These Notices are intended for use in connection with applications for business credit under ss 1002.9(a)(3)

SIGNATURES						
**Signature of Applicants and Guarantors: (Each Shareholder, Partner, or Me	ember owning	20 percent or more interest in the Business Applicant, co-a	applicant, an	d guarantor, sign below)		
1 Signature:		Title:		Date:		
2 Signature:		Title:		Date:		
3 Signature:		Title:		Date:		
4 Signature:		Title:		Date:		
FOR USE BY OUCU FINANCIAL BUSINESS LOAN DEPARTMENT ONLY:	Date all inforn	nation received:	Signature:			

To Print:

- Complete form
- · Save as new file

To Email:

Please contact us to receive a secure link to submit your items.

Protecting our members' personal information is very important to us. Please never include non-public and confidential personal information in an email or attachment.



Business Services OUCU Financial 944 East State St. Athens, Ohio 45701 PH: 740-597-2879 FX: 740-597-2874 business@oucu.org

Personal Financial Statement

IMPORTANT NOTICE. The information contained in this statement is provided to OUCU Financial ("OUCU") to extend or to continue to extend business-purpose credit to the undersigned or to others upon the guaranty of the undersigned. OUCU is relying on this information in deciding to grant or continue credit or to accept a guaranty thereof. It is a Federal crime under Section 1014 of Title 18 of the United States Code for any person to knowingly make any false statement or report, or willfully overvalue any land, property or security for the purpose of influencing in any way the action of an insured State chartered credit union and any institution the accounts of which are insured by the National Credit Union Administration.

EQUAL CREDIT OPPORTUNITY ACT. The federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is: Federal Trade Commission, Chicago Regional Office, 55 E. Monroe St., Suite 1437, Chicago, IL 60603.

If you are applying for individual credit or if this statement relates to your guaranty of the indebtness of other person(s), firm(s) or corporations(s) including any income you are relying on, such as alimony, child support, maintenance payments or any other income or assets. Alimony child support, or separate maintenance income, need not be revealed if you do not wish to have it considered as basis for repaying this obligation.

income, need not be revealed if you do not wish to have it considered as basis for repaying this obligation.							
I intend to apply for individual credit: Signature:							
If you are applying for joint credi	t, or if this statement rela	tes to your guaranty of the indebtedness	of other person(s) firm(s) or	r corporation(s), comple	te all sections.		
We intend to apply for joint credit: Signature: Co-Applicant Signature:							
All applicants please sign and	d date the back of this	financial statement.					
		Individual Infor	mation				
Individual Name							
Home Address, City, State, Zip							
Control Connection Management				LL BI			
Social Security Number		Date of Birth		Home Phone			
Cell Phone		Email					
Employer Name		Employer Address, City, State, Zip					
Business Phone		Title/Position			No. of Years		
business Priorie		Title/Position			No. of Teals		
		Note: Attach separate sheet(s) to exp	lain all "Yes" answers.				
1. Are any significant changes in your in	come or expenses expected in	n the next 12 months?			YES	NO	
2. Are you a guarantor, co-signer or oth	YES	NO					
3. Do you or any business in which you are an owner have any past due tax obligations (including, but not limited to, property taxes, income taxes, or payroll/withholding taxes)?							
4. Do you or any business in which you	are an owner have any outstar	nding judgements or collections?			YES	NO	
5. Do you or any business in which you	are an owner have any outstar	nding letters of credit or surety bonds?			YES	NO	
6. Have you or any business in which yo	ou are or were an owner ever d	leclared bankruptcy including minority ownership	of greater than or equal to 20%?	?	YES	NO	
7. Are there any legal actions pending a	against you or any business in v	which you are an owner?			YES	NO	
8. Are you on parole or on probation, o	r have you ever been convicted	d or placed on any form of probation, for any crim	ninal offense other than a minor v	vehicle violation?	YES	NO	
		Joint Information	on				
Individual Name							
Home Address, City, State, Zip							
Social Security Number		Date of Birth		Home Phone			
Social Security Humber		bate of birth		nome rhone			
Cell Phone		Email		1			
Employer Name		Employer Address, City, State, Zip					
Business Phone		Title/Position			No. of Years		
		Note: Attach separate sheet(s) to exp	olain all "Yes" answers.				
1. Are any significant changes in your	income or expenses expected	in the next 12 months?			YES	NO	
2. Are you a guarantor, co-signer or o	therwise liable for any loan, lea	ase or other contract or debt of an individual or b	usiness?		YES	NO	
3. Do you or any business in which yo	3. Do you or any business in which you are an owner have any past due tax obligations (including, but not limited to, property taxes, income taxes, or payroll/withholding taxes)? YES NO						
4. Do you or any business in which yo	u are an owner have any outst	anding judgements or collections?			YES	NO	
5. Do you or any business in which yo	u are an owner have any outst	anding letters of credit or surety bonds?			YES	NO	
6. Have you or any business in which	you are or were an owner ever	declared bankruptcy including minority ownership	ip of greater than or equal to 20%	6?	YES	NO	
7. Are there any legal actions pending	g against you or any business in	which you are an owner?			YES	NO	
8. Are you on parole or on probation, or have you ever been convicted or placed on any form of probation, for any criminal offense other than a minor vehicle violation?							

		•			•	•	,	
Income Description	Individual Informatio	on Joint Information		Expense Description	Individual In	formation	Joint Information	
Wages and salaries			Federal & state	income taxes				
Bonus and commissions			Alimony or chile	d support*				
Interest/Dividends			Other					
IRA distributions/Pensions and annuities			TOTAL EXPENS	ES:				
Unemployment			*/	forms alice and abild according				
Social security				prom alimony, chila support Insidered as a basis for repa			ot be revealed if you do not wish t	
Other*								
TOTAL INCOME:								
A: Cash In Other Financial Institutions (checking, savings, money markets, certificates of deposit, etc.)								
Type of Accou	nt	Financial Institutio	n	Pledged?	Yes/No	Ac	count Balance	
				YES	NO			
				YES	NO			
				YES	NO			
						Total:		
B: Marketable Secur	rities (mutual fu	ınds, stocks, bonds, e	etc.)	(including IRA,	C: Retirem 401k, 403b, K		ts Profit-Sharing, etc.)	
Description		Market Value		Descripti	ion	N	/larket Value	
	Tota	al:				Total:		
		D: \	/ehicles,	Boats, Etc.				
Year, Make, Mo	odel	Creditor Name		Market Va	alue	Мо	nthly Payment	
				Total:		Total:		
		F: Real F		wned - Personal				
Date Acquire	d	Address		Creditor N	lamo		/Jarket Value	
Date Acquire	~	Audi 633		Cieditoi N	- CATTLE	ı "	MAINEL VAIUE	
	+							
							_	
						TOTAL:		

Annual Expenses (omit cents)

Annual Income (omit cents)

F: Business/Partnership Interests - Please attach K-1, if applicable							
Name of Business/Partnership	Owner Since	Total Debt	%Owned				
			%				
			%				
			%				
	Т	OTAL:					
	G: Credit Cards, Department	Store Cards, Charge Cards, Etc.					
Creditor Name	Credit Limit	Current Balance	Monthly Payment				
	TOTAL:	TOTAL:	TOTAL:				
	H: Other Liabilities (stude	nt loans, family loans, etc.)					
Creditor Name	Type of Loan	Current Balance	Monthly Payment				
		TOTAL:	TOTAL:				
IMPORTANT NOTICES & DISCLOSURES							
YOUR REPRESENTATIONS. The undersigned represent, warrant and certify that the information provided herein is true, correct and complete. The undersigned agree to notify OUCU immediately and in writing of any change in name, address, or employment and of any material adverse change in (1) any of the information contained in this statement, (2) the financial condition of any of the undersigned, or (3) the ability of any of the undersigned to perform their obligations to OUCU. In the absence of such notice or a new and full written statement, this should be considered as a continuing statement and substantially correct. If the undersigned fail to notify OUCU as required above, or if any of the							

YOUR REPRESENTATIONS. The undersigned represent, warrant and certify that the information provided herein is true, correct and complete. The undersigned agree to notify OUCU immediately and in writing of any change in name, address, or employment and of any material adverse change in (1) any of the information contained in this statement, (2) the financial condition of any of the undersigned, or (3) the ability of any of the undersigned to perform their obligations to OUCU. In the absence of such notice or a new and full written statement, this should be considered as a continuing statement and substantially correct. If the undersigned fail to notify OUCU as required above, or if any of the information herein should prove to be inaccurate or incomplete in any material respect, OUCU may declare the indebtedness of the undersigned or the indebtedness guaranteed by the undersigned, as the case may be, in default and immediately due and payable. OUCU is authorized to make all inquires it deems necessary to verify the accuracy of the information contained herein and to determine the credit-worthiness of the undersigned. The undersigned authorize any person or consumer reporting agency to give OUCU any information it may have on the undersigned. Each of the undersigned authorizes OUCU to answer questions about its credit experience with the undersigned. As long as any obligation or guaranty of the undersigned to OUCU is outstanding, the undersigned shall supply annually an updated financial statement and any other financial information requested by OUCU. The undersigned acknowledge receiving a copy of the disclosures herein. All parties will consider a copy or facsimile of this statement to be as binding and valid as the original. This statement and any other financial or other information that the undersigned gives OUCU shall be the property of OUCU.

SIGNATURES				
Signature:	Date:			
Signature:	Date:			

To Print:

To Email:

- Complete form
- · Save as new file

Please contact us to receive a secure link to submit your items. Protecting our members' personal information is very important to us. Please never include non-public and confidential personal information in an email or attachment.



Title:

business services
OUCU Financial
944 East State St.
Athens, Ohio 45701
PH: 740-597-2879
FX: 740-597-2874
business@oucu.org

Business Name: _____

Non-Real Estate Business/Debt Schedule

Instructions: List all loans to your business that are not on your Personal Financial Statement. Examples include business equipment loans, business vehicle loans, business credit cards and capital leases.

Creditor Name (To Whom Payable)	Current Balance	Credit Limit (if line of credit)	Monthly Payment	Collateral Securing the Debt			
Greator Name (10 Whom 1 ayable)	Current Balance	Orean Emili (ii iiile of creaty)	monthly rayment	Conditional Occurring the Debt			
TOTAL:							
CERTIFICATION : The undersigned hereby certified that he/she is either the/an owner of the Business identified above or an authorized representative of the/an owner, and the information herein is true and correct.							
Signature:		Name (print): _					

To Print:

- Complete form
- Save as new file
- Set your printer to print in landscape orientation

To Email:

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Date Completed: ____



Business Services

Business Name:	

Business Services OUCU Financial 944 East State Street Athens, Ohio 45701 FX: 740-597-2874 PH: 740-597-2879 business@oucu.org

REAL ESTATE SCHEDULE / RENT ROLL																
Type Key: A = apartments, MF = 2-4 units, SF = single-family investment, C = commercial, O = office, R = retail, M = mixed-use, L = lot																
(copy and attach additional sheets if necessary) Total Current Credit																
		Property Location	Туре	Property Owner	0/ 0	Date	# of Units	Total Monthly	Original	Market	Current Loan	Limit	Monthly	Annual	Annual	
		Property Location	туре	Property Owner	% Owned	Acquired	# OI UIIIIS	Rent(s)	Cost	Value	Balance	(If Line of	Loan	Property	Insurance	
	A ddrooo.							- (-)		74,40		Credit)	Payment	Taxes	Premium	Name of Creditor
1	Address:				%											
					/0											
2	Address:															
-					%											
-	Address:															
3	Address.				%											
					, ,											
4	Address:															
"					%											
-	Address:															
5	riddi coo.				%											
					70											
6	Address:				0/											
					%											
-	Address:															
7					%											
8	Address:				%											
					70											
	Address:															
9					%											
-																
10	Address:				%											
					,,,											
TOTAL:																
CERTIFICATION: The undersigned hereby certifies that he/she is either the/an owner of each the Properties listed herein in the percentage indicated above, or is an authorized representative of the/an owner, the information herein is true and correct, and a copy or																
facsimile of this worksheet is considered as valid and binding as the original.																
Name (print):																
	Authorized Signature:															
	Date:															
	Title (if applicable):															

To Print:

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- Save as new file
- Set your printer to print in landscape orientation

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Business Assets Listing

Business Name:	Date:												
Please list all assets and complete each column, as applicable. *Please use current Fair Market Value for estimated value													
Item	Make	e/Model	Quantity	Date Acquired	Purchase Price	Serial Nui	mber ible)	Estimated Value*					