

## Loan Request

Amount Requested:	Type of Credit Requested:	<input type="checkbox"/> Line of Credit	<input type="checkbox"/> Commercial Mortgage
Term:	Type of Collateral:	<input type="checkbox"/> Term/Equipment Loan	<input type="checkbox"/> Equipment
Collateral Description:		<input type="checkbox"/> Real Estate	<input type="checkbox"/> Business Assets
		<input type="checkbox"/> Vehicle	<input type="checkbox"/> Other

Purpose of Loan:

Please provide business and personal tax returns for the last three years.

## Applicant(s) Information

Business Name:	Years in Business:
Owner's Name(s):	Tax ID or SSN #:
Mailing Address:	Phone Number:
	Mobile Number:
	Fax Number:

Email Address:

Type of Business:	Date of Organization:
Type of Organization:	

Are there any debts not listed on the financial statements for which your business is obligated?  Yes  No

If yes, what is the total liability? \$

Is your business party to any claim or lawsuit?  Yes  No

Have you ever owned or operated a business which declared bankruptcy?  Yes  No

Does your business owe any taxes for years prior to the current year?  Yes  No

If you answered yes to any of these questions, please provide the details on an attachment.

For Bank Use:		
Branch:	Branch Contact:	Date Received:
_____	_____	_____

**PERSONAL STATEMENT (CONFIDENTIAL)**

Please complete each section. For the purpose of procuring credit with Bath Savings Institution, if any change occurs that materially reduces your ability to pay your debts, you will immediately notify the Bank. Unless the Bank is notified it may continue to rely upon this financial information given as a true and accurate statement of your financial condition.

**Sources of Income (Current Year)**

	Borrower	Co-Borrower	Total
Salary	\$	\$	\$
Bonuses and Commissions			
Dividends/Interest			
Real Estate Income			
Other Income (Itemize)			
Total			

Is any of the income in the above section likely to be reduced before the credit requested would be paid off?  Yes  No

If yes, explain:

NOTICE: Do not include income from alimony, child support or separate maintenance payments unless you desire the bank to rely upon such income.

**Assets**

	Cash or Market Value
Name and address of bank	
Acct. No.	\$
Name and address of bank	
Acct. No.	\$
Name and address of bank	
Acct. No.	\$
Stocks & Bonds (Company Name/number) = (You may attach a recent statement)	\$
Life insurance net cash value (Face Amount \$)	\$
<b>Subtotal Liquid Assets</b>	\$
Real estate owned (enter total amount from Schedule A on page 3)	\$
Vested interest in retirement fund	\$
Automobiles owned (make, model & year)	\$
Other Assets (itemize)	\$
Total Assets a.	\$

**(Schedule A) of Real Estate Owned**

Property Address <i>(Indicate if held jointly)</i>	Date Acquired	Type of Property	Market Value	Mortgage Balance	Mortgage Holder	Mortgage Payment	Gross Rental Income
<b>Total</b>							

**Liabilities/Debts**

	Monthly Payment	Unpaid Balance
Real Estate Mortgage Holder	\$	\$
Credit Cards: Name and address of company	\$	\$
Auto Loans: Name and address of company	\$	\$
Other Debts/Loans: Name and address of company	\$	\$
Name and address of company	\$	\$
Name and address of company	\$	\$
Name and address of company	\$	\$
Total Monthly Payments	\$	
<b>Net Worth (A minus b)</b> \$		<b>Total Liabilities b.</b> \$

If you need to provide additional information to assist Bath Savings Institution in its assessment of your request, please attach a separate sheet to this application.

**Personal / Guarantor Information**

BORROW / GUARANTOR		CO-BORROWER / GUARANTOR	
Name		Name	
Address		Address	
Social Security Number	Home Phone	Social Security Number	Home Phone
Email Address (optional)	Work Phone	Email Address (optional)	Work Phone
Business Occupation		Business Occupation	
Partner / Officer in any other venture		Partner / Officer in any other venture	

Do you personally guarantee someone else's debt?  Yes  No

Do you guarantee any debt not elsewhere mentioned?  Yes  No

**General Information**

Do you pay alimony or child support?  Yes  No If yes, how much monthly? \$

Are you defendant in any suits or legal actions?  Yes  No

Are you now or have you been involved in bankruptcy proceedings within the past 7 years?  Yes  No

Explain:

I/we certify that all of the statements made are true and complete and are made for use by Bath Savings Institution for the purpose of obtaining, reviewing, or renewing credit. Bath Savings may obtain your personal credit report. If you request, you will be informed whether or not your credit report was obtained; and if obtained, you will be informed of the names and addresses of the credit bureaus that furnished the reports.

If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact Bath Savings within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement.

Applicant(s): \_\_\_\_\_ Date: \_\_\_\_\_

<p><b>LOAN APPLICATION CHECKLIST</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Completed this form fully</li> <li><input type="checkbox"/> Signed and dated page four</li> <li><input type="checkbox"/> Include three years of complete personal federal income tax returns</li> <li><input type="checkbox"/> If business is a corporation, S Corp, LLC or Partnership, include three years of complete business federal income tax returns.</li> </ul>
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# DEMOGRAPHIC INFORMATION OF APPLICANT AND CO-APPLICANT

(If more than one co-applicant use additional forms)

**The purpose of collecting this information** is to help ensure that all applicants are treated fairly and that the housing needs of communities and neighborhoods are being fulfilled. For residential mortgage lending, Federal law requires that we ask applicants for their demographic information (ethnicity, race, and sex) in order to monitor our 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. The law provides that we may not discriminate on the basis of this information, or on whether you choose to provide it. However, if you choose not to provide the information and you have made this application in person, Federal regulations require us to note your ethnicity, race, and sex on the basis of visual observation or surname. You may select one or more "Hispanic or Latino" origins, and one or more designations for "Race." If you do not wish to provide some or all of this information, please select the applicable check box.

## Applicant:

### Ethnicity:

Hispanic or Latino - *Check one or more*  
Mexican  
Puerto Rican  
Cuban  
Other Hispanic or Latino - *Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, etc.:*

Not Hispanic or Latino

I do not wish to provide this information

### Race: *Check one or more*

American Indian or Alaska Native - *Enter name of enrolled or principal tribe:*

Asian

Asian Indian Chinese Filipino  
Japanese Korean Vietnamese  
Other Asian - *Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, etc.*

Black or African American

Native Hawaiian or Other Pacific Islander

Native Hawaiian Guamanian or Chamorro Samoan  
Other Pacific Islander - *Print race, for example, Fijian, Tongan, etc.:*

White

I do not wish to provide this information

### Sex:

Female  
Male

I do not wish to provide this information

## Co-Applicant: (if applicable)

### Ethnicity:

Hispanic or Latino - *Check one or more*  
Mexican  
Puerto Rican  
Cuban  
Other Hispanic or Latino - *Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, etc.:*

Not Hispanic or Latino

I do not wish to provide this information

### Race: *Check one or more*

American Indian or Alaska Native - *Enter name of enrolled or principal tribe:*

Asian

Asian Indian Chinese Filipino  
Japanese Korean Vietnamese  
Other Asian - *Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, etc.*

Black or African American

Native Hawaiian or Other Pacific Islander

Native Hawaiian Guamanian or Chamorro Samoan  
Other Pacific Islander - *Print race, for example, Fijian, Tongan, etc.:*

White

I do not wish to provide this information

### Sex:

Female  
Male

I do not wish to provide this information

## To Be Completed by Financial Institution (for an application taken in person):

Was the ethnicity of the applicant collected on the basis of visual observation or surname?	Yes	No
Was the race of the applicant collected on the basis of visual observation or surname?	Yes	No
Was the sex of the applicant collected on the basis of visual observation or surname?	Yes	No
Was the ethnicity of the co-applicant collected on the basis of visual observation or surname?	Yes	No
Was the race of the co-applicant collected on the basis of visual observation or surname?	Yes	No
Was the sex of the co-applicant collected on the basis of visual observation or surname?	Yes	No