# BUSINESS Loan application



MEMBER FDIC



#### **MAIN OFFICE**

500 Fourth Avenue • P.O. Box 73880 • Fairbanks, Alaska 99707 (907) 452-1751 • Fax (907) 451-4689

#### **BRANCH OFFICES**

1380 University Avenue • Fairbanks, Alaska 99709 • (907) 474-1770 • Fax (907) 474-1771 1248 Old Steese Hwy • Fairbanks, Alaska 99701 • (907) 374-7075 • Fax (907) 374-7077 45 St. Nicholas Drive • North Pole, Alaska 99705 • (907) 488-4438 • Fax (907) 488-4742 1248 Old Steese Hwy • Fairbanks, Alaska 99701 • (907) 374-7075 • Fax (907) 374-7077 1380 Richardson Hwy • Delta Junction, Alaska 99737 • (907) 895-4350 • Fax (907) 895-4340

A State Chartered Mutual Bank Serving the Interior of Alaska Since 1965.

www.mtmckinleybank.com

#### **CUSTOMER IDENTIFICATION REQUIREMENTS**

To help the government fight the funding of terrorism and money laundering activities, Federal Law requires all financial institutions to obtain, verify and record all information that identifies each person who opens an account. What this means for you: When you open an account, we will ask 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 or other identifying documents.

General Informat	ion About Your Bus	iness		
Your business' name (exact legal i	name)			
Tax ID / EIN / Social Security #				
Street Address				
Mailing Address (if different)				
Phone #	Mobile Phone #	Fax #_		
E-mail Address		Website _		
Business Type	☐ General Partners ☐ Limited Partners	☐ Sole Proprietorship ☐ Corporation ☐ General Partnership ☐ Subchapter S Corporation ☐ Limited Partnership ☐ Nonprofit ☐ Limited Liability Company		
How long have you been in this bu	usiness?			
Current management has been in	place for how long?	No. of employees	S	
	act(s) or service(s):			
Is your business seasonal?  \[ Ye	s 🗆 No When	is your busy season?		
	When	is your slow season?		
Who are the owners of the busines	ss? Name		Title	% of Ownership
			4 D	

Your Loan Request						
How much do you want to borrow? \$						
How will your business use these funds?						
If purchasing equipment, please complete the following:						
Sales Price \$ Down Payment \$ Seller's Name						
Insurance Agent Phone #						
Collateral and Repayment Information						
The type of collateral that will secure your loan request.						
☐ Deposits/securities ☐ Inventory ☐ Real estate ☐ Other						
☐ Accounts receivable ☐ Vehicle(s)						
Describe the collateral offered (such as year, model, serial number, real estate legal descriptions, etc.)						
Value of collateral \$ Source of valuation						
Term requested to repay your loan Payment due date preferred						
Please deduct my loan payment automatically from my deposit account#						
Related Business issues						
Has your business pledged inventory, accounts receivable or equipment to secure existing debt?						
☐ Yes ☐ No Please explain						
Are you aware of any environmental liabilities, problems or potential problems (including underground storage tanks) associated with your business						
or any owner, or at any property ever owned or used by your business or an owner?						
Yes No Please explain						
Is your business a party to any claim or lawsuit?						
Yes No Please explain						
Yes Chapter Date of filing						
□ No Location						
Do you owe any past due taxes?						
☐ Yes Amount due \$ Owed to Type of taxes						
Are you an endorser, guarantor or co-maker for any obligations (including leases)?						
☐ Yes Please explain:						
Has applicant, co-borrower or guarantor ever been convicted of a felony?						
Yes No Please explain						

Bank References	s For Your Busin	ess	A PARTY	
Bank Name	Type of Account	Account Number	Balance	Account Name
	^		\$	
			\$	
			Φ.	
			\$	
Notices and Stat				
If your application for business c ment please contact us within si denial within thirty (30) days of r	redit is denied, you have the rig xty (60) days from the date you eceiving your request for the sta	are notified of our decisio tement.		
Mt McKir	Ple nley Bank • Attn: Comme	ease send requests to: rcial Loans • P.O. Box	73880 • Fairbanks.	AK 99707
<b>NOTICE:</b> The Federal Equal Crenational origin, sex, marital statuincome derives from any public ation Act. The federal agency that Response Center, 1100 Walnut S	dit Ópportunity Act prohibits cre us, age (provided the applicant l assistance programs; or because t administers compliance with t	ditors from discriminating a nas the capacity to enter int a the applicant has in good this this law concerning this cre	against credit applicants c to a binding contract); be faith exercised any right u	on the basis of race, color, religion cause all or part of the applicant' nder the Consumer Credit Protec
<b>DISCLOSURE OF AP</b> We may order an appraisal to det if your loan does not close. You		charge you for this apprais	al. We will promptly give	
Please include the following info			cation applied for, and the	e action taken on your application
Mt. McKinlev Bank	Ple Attn: Commercial Loar • A	ease send requests to:	Fairbanks, AK 9970	7 • (907) 452-1751
This information, and the information the Applicant(s) or for the purment will be relied on the by Crethe financial condition of the Applithrough an agency employed by ness of the Applicant(s). Applicant Creditor is further authorized to a willful false statements regarding 18 U.S.C. & 1014, and may resupaid on behalf of the Applicant(s). By signing below, each Applicant Any commitments or agreements	rpose of Applicant(s) guarantee ditor in its decision to grant suplicant(s) on the date given belicant(s) on the date given belicant(s) will promptly notify Creanswer any questions about Creather the value of the above propertial in fine or imprisonment or both any Guarantor(s) in connett declares that he/she has read a	ing credit for others. Applich credit. This Statement iow. Creditor is authorized fy the accuracy of the information of any subsequent challenges are unique to the comparison of the influencing the for purpose of influencing the furthermore, Applicant (action with the credit requested and understands the "Notice and understands the "Notice and content to the credit requested the credit requested the content to the credit requested the credit requ	cant(s) acknowledge that is true and correct in ever to make all inquiries it dimation contained herein an anges which would affect Applicant(s). Applicant g the actions of Creditor (s) agree to reimburse Mt to whether or not the loant and Statements Sections.	representation made in this state ry detail and accurately represent eems necessary, either directly cand to determine the creditworthict the accuracy of this Statement (s) are aware that any knowing of can be a violation of Federal law . McKinley Bank for any expense application is approved or denied
They committee or agreements	on the part of the bank made be	on writing to be emerced.	o andor maona law.	
Print Name		7	itle	
Signature			Date	
Print Name		1	itle	
Signature			Date	
Print Name		Ţ	itle	
Signature			Date	
We are applying for joint cred	lit. Please initial: Applicant:			
	FO	R BANK USE ONLY	-	
Officer signature:				
Date of Adverse A	ction: DA reportable loan?	Applicant	notified by: Phone	

## Mt. McKinley Bank

### **Customer Information Sheet**

#### We require the following information on each signer:

•	Name								
•	Date of birth								
•	Social Security Number								
•	Mother's Maiden Name and/or Pass Phrase								
•	Place of Birth								
•	Mailing Address								
•	Physical Address								
•									
•									
•	Work Phone Number								
•	Employer Name								
•	Occupation/Title								
•	Contact email address(s)								
•	Gender								
•									
**For		ate ID, please provide us with <u>ACKNOWLEDGEME</u>	t <u>two</u> different current legible copie <u>NT</u>						
-	g below authorizes Mt. McKinley B tion service, in connection with th	·	y consumer reporting agency, includi	ing a check					
Signature:			Date:						
*****	***********	*********	***********	******					
Bank U	se:								
•	ID information	2 <sup>nd</sup> ID info							
	#	#							
	Issue Date	Issue Date							
	Expiration Date	Expiration Date							