

# SBA LOAN APPLICATION

BUSINESS PROFILE/INFORMATION										
Legal Name DBA If Applicable										
Business Address			City	State		Zip				
Project Address			City	Sta	e	Zip				
State of Organization		Federal Tax ID	/EIN		Phone Number					
Organization Structure/Type				Date Organized						
Nature of Business										
Describe your Products/Services ar	Describe your Products/Services and Number of Locations & Where									
Primary Contact Name										
Web Address			Email Addre	ss						
Business Year End Date			NAICS Code							
USE OF PROCEEDS										
Enter Gross Dollar Amounts Rounded to the Nearest Hundreds	Loan Ro	equest			Loa	an Request				
Purpose of the loan (i.e., Purchase Rea	al Estate; Construct	ion; Equipment;	Inventory; Elig	ible Debt Refinancing	; Working Capital; etc	:.)				
Acquisition/installation of equipment	\$			Construction of al Real Estate	\$					
Working Capital	\$		Acquisitio	n of inventory	\$					
Business acquisition (Change of Ownership)	\$		Debt refin	ancing	\$					
Other	\$		Other		\$					
	\$		Term of L	oan	YRS					
PLEASE PROVIDE A BRIEF DESCRI	PTION OF YOUR C	OMPANY'S FIN	IANCIAL NEED							
BUSINESS INFORMATION										
Is the Business an Endorser, Guarar	itor, or Co-maker f	or obligations r	not listed on it	s financial stateme	ts (i.e. Contingent L	iabilities)?				
Yes No If yes	, how much?	\$								
Is the Business a party to any claim	or lawsuit?									
Yes No If yes	, describe?									
Does the Business have any delinqu	ent taxes (i.e., FIC	A/Payroll Taxe	s, Sales Taxes,	Property Taxes, or	Other)?					
Yes No If yes	Yes No If yes, how much? \$									
Has the Business ever declared ban	kruptcy?									
Yes No If yes	, when?									
Have any of the Business Guaranton	s ever declared ba	nkruptcy?								
Yes No If yes	, explain?									

Has your company ever settled debt for less than the amount owed?								
Yes No If yes, explain?								
Income Tax Return filed through	what date:							
Are any Returns being contested	or audited?							
Yes No								
Name of Accountant or Accounti	ng Firm							
Business Primary Bank					Pho	one Nu	mber	
Total Balance of Business Checki	ng Accounts	Not Including Seacoast Ba	ank \$					
Annual Revenue or Sales \$					Yea	ır Endii	ng	
Complete the chart below if you, your business, any principal of your business, any affiliate of your business, any other business currently owned by a principal, or any business previously owned by you or a principal of your business has received or applied for any direct or guaranteed financial assistance from the Federal Government, including student loans and disaster loans. All current, previous, and pending Government debt must be listed, including loans that have been paid in full or those that resulted in a loss to the Government. (Note: Loans that resulted in a loss to the Government include loans that were charged off, compromised, or discharged as a result of bankruptcy. The amount of the loss is the outstanding principal balance of the loan that the Government had to write off after all collection activities (including compromise) were finalized.)								
CURRENT AND PREVIOUS SBA A	ND OTHER O	GOVERNMENT DEBT						
Name of Agency #1			В	orrower's l	Name			
Agency Loan #		Original Amount of Loan \$				Dat	Date of Application	
Loan Status	Outstanding I	Balance \$		Amount of Loss to Government \$			ernment \$	
Name of Agency #2			В	Borrower's Name				
Agency Loan #		Original Amount of Loan \$	·	Date of Application				
Loan Status	Outstanding I	Balance \$		Amount of Loss to Governmen			ernment \$	
Name of Agency #3			В	orrower's l	Name			
Agency Loan #		Original Amount of Loan \$	•	•		Dat	Date of Application	
Loan Status	Outstanding I	Balance \$		Amount of Loss to Governm		ernment \$		
Name of Agency #4			В	orrower's l	Name			
Agency Loan #		Original Amount of Loan \$				Dat	te of Application	
Loan Status	Outstanding I	Balance \$			Amount of Loss	to Gove	ernment \$	
SCHEDULE OF COLLATERAL - LI	ST ALL ASS	ETS OF THE BUSINESS OF	F THE A	PPLICAN	IT IN SECTION	I & SE	ECTION II	
Section I - Real Estate Existing  Attach a copy of the deed(s) containing a full legal description of the land and show the location (street address) and city where the deed(s) is recorded. Following the address below, give a brief description of the improvements, such as size, type of construction, use, number of stories, and present condition (use additional sheet if more space is required). If purchasing Real Estate, please attach a copy of the Real Estate Listing Agreement or Purchase Contract for lender's review.								
Parcel Address #1	Parcel Address #1 City State Zip							
Lienholder Name								
Year Acquired	Original Co	st \$	Market	Value \$			Amount of Lien \$	
Description			•					



Parcel Address #2			Cit	ty			State			Zip	
Lienholder Name											
Year Acquired		Original Cost	\$		Market Value \$				Amount of Lien \$		
Description											
Parcel Address #3			Cit	ty	State					Zip	
Lienholder Name											
Year Acquired		Original Cost	:\$		Market Val	ue \$			Amount of	Lien \$	
Description								·			
SCHEDULE OF COLLATERA	L (CONT	INUED)									
Section II - Business Assets Ex All items with an original value be clearly identified (use addition	greater th	nan \$5,000 lis t if more space	ted herein must show e is required).	manuf	acturer or m	ake, i	model, year,	and serial nur	mber. Items v	with no serial nu	mber must
Asset Manufacturer #1	Model					Seri	ial #				
Lienholder Name						Yea	r Acquired				
Original Cost \$			Market Value \$					Amount of Li	en \$		
Description											
Asset Manufacturer #2	Model					Seri	ial #				
Lienholder Name						Yea	r Acquired				
Original Cost \$			Market Value \$	Amount of			Amount of Li	Lien \$			
Description											
Asset Manufacturer #3	Model					Seri	ial #				
Lienholder Name						Yea	r Acquired				
Original Cost \$			Market Value \$					Amount of Li	en \$		
Description											
OWNERSHIP											
List below all owners, partners, Lin regardless of ownership. For a Pari					-						S
OWNERSHIP PROFILE #1 PLEASE COMPLETE THE FOLLOWING SE	ECTION FOR	EACH INDIVIDUA	L WHO HAS 25% OR MOR	RE OWNER	RSHIP OF THE (	СОМРА	ANY.	GUARANTOR	YES NO	CONTROLLING PARTY?	YES NO
Owner #1				Date o	of Birth				% Owner		
Home Address Ci				City			St	ate	Zip		
Social Security # Passport # (only applicable for Non-US Residents.)											
Driver's License #	Driver's License # License Issue Date License Expiration Date										
Email Address						1	Annual Inco	me \$			
Do you have any delinquent taxes (Property Taxes, Income Taxes, or Other)?  Are you obligated to make Alimony, Support, or Maintenance Payments?											
Yes No If yes, how much? \$ Yes No If yes, how much? \$											

OWNERSHIP PROFILE #2 PLEASE COMPLETE THE FOLLOWING SECTION FOR EACH INDIVIDUAL WHO HAS 25% OR MOP	RE OWNER	RSHIP OF THE COM	PANY.	GU	ARANTOR	YES NO	CONTROLLING PARTY?	YES NO
Owner #2	Date of Birth					% Owner		
Home Address	City	City State Zip						
Social Security #	Passp	ort # (only applic	cable for No	on-US Re	sidents.)			
Driver's License # Licen	nse Issu	e Date			Licer	nse Expirati	on Date	
Email Address			Annual	Income	\$			
Do you have any delinquent taxes (Property Taxes, Income Taxes, or Other	)?	Are you obliga	ated to m	ake Alir	nony, Supp	ort, or Mair	ntenance Paymen	ts?
Yes No If yes, how much? \$		Yes		No	If yes, how	w much? \$		
OWNERSHIP PROFILE #3 PLEASE COMPLETE THE FOLLOWING SECTION FOR EACH INDIVIDUAL WHO HAS 25% OR MOP	RE OWNER	RSHIP OF THE COM	PANY.	GU	ARANTOR	YES NO	CONTROLLING PARTY?	YES NO
Owner #3	Date	of Birth				% Owner		
Home Address	City			State			Zip	
Social Security #	Passp	ort # (only applic	cable for No	on-US Re	sidents.)			
Driver's License # Licen	nse Issu	e Date			Licer	nse Expirati	on Date	
Email Address			Annual	al Income \$				
Do you have any delinquent taxes (Property Taxes, Income Taxes, or Other	)?	? Are you obligated to make Alimony, Sup			mony, Supp	oport, or Maintenance Payments?		
Yes No If yes, how much? \$		Yes		No	If yes, hov	v much? \$		
OWNERSHIP PROFILE #4 PLEASE COMPLETE THE FOLLOWING SECTION FOR EACH INDIVIDUAL WHO HAS 25% OR MOP	RE OWNER	RSHIP OF THE COM	PANY.	GU	ARANTOR	YES NO	CONTROLLING PARTY?	YES NO
Owner #4	Date (	of Birth				% Owner		
Home Address	City			State			Zip	
Social Security #	Passp	ort # (only applic	cable for No	on-US Re	sidents.)			
Driver's License # Licen	nse Issue Date Lic				Licer	ense Expiration Date		
Email Address		Annual Income \$			\$			
Do you have any delinquent taxes (Property Taxes, Income Taxes, or Other	)?	? Are you obligated to make Alimony, Su			mony, Supp	upport, or Maintenance Payments?		
Yes No If yes, how much? \$		Yes		No	If yes, how	w much? \$		
CONTROLLING PARTY PLEASE COMPLETE THIS SECTION IF CONTROLLING PARTY IS NOT ONE OF THE ABOVE PROF	TILES.							
Name and Title of Natural Person Opening Account								
(Controlling party is one individual with significant responsibility for managing (e.g. Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, M Any other individual who regularly performs similar functions.								г
If appropriate, an individual listed in the section above may also be listed in th	nis secti	on.)						
Name				Date of Birth				
Driver's License # Licen	nse Issue Date			License Expiration Date				
Passport # (only applicable for Non-US Residents.)				Social S	Security #			
Address (Residential or Business)	Cit	у		St	ate		Zip	



#### CREDIT REFERENCE AUTHORIZATION

I hereby authorize any Bank, Savings & Loan Association, Financial Institution, Credit Union, Credit Reporting Agency, or any other organization, institution, or persons, that have any records or knowledge of me and/or the Company listed as "Borrower" of which I am an authorized representative to give Seacoast Bank, any information pertaining to my financial records or credit worthiness. A photographic copy of this authorization shall be as valid as the original and may be attached to the verification forms (if applicable).

#### NOTICE OF RIGHT TO REQUEST SPECIFIC REASON(S) FOR THE CREDIT DENIAL AT TIME OF APPLICATION

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 Seacoast Bank, Post-Closing Department, PO Box 9012, Stuart, FL 34995-9012 (772) 221-2659 within 60 days from the date you are notified of our decision. You may also contact the individual with whom you were working on your credit request. We will send you a written statement of reasons for the denial within 30 days of receiving request for the statement.

#### NOTICE OF REPORTING NEGATIVE INFORMATION

We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.

#### APPRAISAL REQUEST WHEN SECURED BY A 1 TO 4 FAMILY DWELLING

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.

### NOTICE

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 that 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 rights under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is:

Bureau of Consumer Financial Protection 1700 G Street NW Washington, DC 20552

#### **USA PATRIOT ACT**

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.

#### **BANK SECRECY ACT**

The Bank Secrecy Act aids the government in combating terrorism and other national security threats. Each time an account is opened for a covered **Legal Entity**, the Bank Secrecy Act requires us to ask you for identifying information (name, address, date of birth, Tax Identification Number), as well as identification documentation for

- Each individual that has 25 percent or more Beneficial Ownership in the Legal Entity; and,
- One individual that has Significant Managerial Control of the Legal Entity.

To be completed by Seacoast Bank Representative. This application was taken/received:

If you are opening an account on behalf of a Legal Entity, you will be required to provide name, date of birth, Tax Identification Number, and address. For foreign owners, you also will be asked to provide a copy of the owner's passport, and certify that all information is true and accurate to the best of your knowledge.

### BORROWER CONSENT TO THE USE OF TAX RETURN INFORMATION

I understand, acknowledge, and agree that the Bank and Other Loan Participants can obtain, use and share tax return information for purposes of (i) providing an offer; (ii) originating, maintaining, managing, monitoring, servicing, selling, insuring, and securitizing a loan; (iii) marketing; or (iv) as otherwise permitted by applicable laws, including state and federal privacy and data security laws. The Bank includes the Bank's affiliates, agents, service providers and any of aforementioned parties' successors and assigns. The Other Loan Participants includes any actual or potential owners of a loan resulting from your loan application, or acquirers of any beneficial or other interest in the loan, any mortgage insurer, guarantor, any servicers or service providers for these parties and any of aforementioned parties' successors and assigns.

#### **AGREEMENT**

Signer(s) certifies that he/she is authorized to execute this Application on behalf of the business named above, and that all information provided, including federal income tax returns, is complete, true and correct. Signer(s) authorizes Bank to obtain personal, consumer, and/or business reports including inquiries to the Internal Revenue Service and/or consumer reporting agencies, in their names as individuals at any time. If the business is a corporation or partnership, all owners/principals must sign and include their corporate partnership title. I certify that the information contained in this application is true and accurate. This is to notify Applicant that you are not required to obtain or pay for any unwanted services. I acknowledge that I have read the above disclosures and will retain the copy provided for my records.

1. Signature / Borrower	Title	Date
2. Signature / Borrower	Title	Date
3. Signature / Borrower	Title	Date
4. Signature / Borrower	Title	Date



Internet

Telephone

Face-to-Face

Mail/fax



# BUSINESS PLAN FOR SBA APPLICATION

Individual Name
Business Name
# of exisitng employees (including owners, all part-time, full-time and all employees of domestic and foreign Affiliates - do not convert to FTE
# of FTE jobs saved/retained because of the loan (including owners)
# of new FTE jobs created because of the loan (including owners)
Describe the History and Nature of the business:
Management experience of owner, particularly in the industry:
Financial Condition of the business:
Competition for similar products and/or services in the area:
Describe how this SBA loan will be specifically benefit your business:
Include any other pertinent information (including Affiliates):

#	Borrower(s) Questions	Yes	No
1	Is the applicant or if the Applicant is structured as an Eligible Passive Company (EPC) and Operating Company (OC) both the EPC and OC or any Associate of the Applicant presently suspended, debarred, proposed for debarment, declared ineligible, voluntarily excluded from participation in a transaction by any Federal department or agency, or presently involved in any bankruptcy?		
2	Is the Applicant presently involved in bankruptcy or insolvency?		
3	Has the Applicant, any Associate of the Applicant, or any business owned by them or any Affiliates (per 13 CFR 121.301(f), ever obtained a direct or guaranteed loan from SBA or another Federal Agency loan program (including but not limited to USDA, B&I, FSA, EDA) or been a guarantor on such a loan?		
	Is any of the financing currently delinquent?		
	Does the Applicant have a prior SBA Loan?		
4	Does the Applicant or any business owned or controlled by the Applicant have any outstanding business debt?		
5	Is the Applicant or any owner of the Applicant an owner of any other business? If yes, please list all businesses, tax IDs and ownership percentages.		
6	Is the Applicant or any Associate of the Applicant presently incarcerated, on probation, on parole, or presently subject to an indictment for a felony or any crime involving or relating to financial misconduct or a false statement?		
7	Are any of the Applicant's products and/or services exported (directly or indirectly), or is there a plan to begin exporting (directly or indirectly) as a result of this loan? If yes, please answer below		
	Provide the estimated total export sales this loan will support?		
	List of principal countries of Export (list at least 1).		
8	Has the Applicant paid or committed to pay a fee to the Lender or a third party to assist in the preparation of the loan application or application materials, or has the Applicant paid or committed to pay a referral agent or broker a fee? If yes, provide details to your Lender (name of the third party and the amount of the fee). The applicant is not required to obtain or pay for unwanted services.		
9	Are any of the Applicant's revenues derived from gambling, loan packaging, lending activities, lobbying activities, or from the sale of products or services, or the presentation of any depiction, displays or live performances, of a prurient sexual nature? If yes, provide details under a separate attachment.		
10	Is the Applicant, any owner of the Applicant, or any business owned by them (Affiliates), presently involved in ay legal action (including divorce?)		
11	Is the Applicant presently involved in any pending lawsuits? If yes, please provide details.		
12	Is any sole proprietor, partner, officer, director, stockholder with a 10 percent or more interest in the Applicant an SBA employee or a Household Member of an SBA employee?		
13	Is any employee, owner, partner, attorney, agent, owner of stock, officer, director, creditor or debtor of the Applicant a former SBA employee who has been separated from SBA for less than one year prior to the request for financial assistance?		
14	Is any sole proprietor, general partner, officer, director, or stockholder with a 10 percent or more interest in the Applicant, or a household member of such individual, a member of Congress, or an appointed official or employee of the legislative or judicial branch of the Federal Government?		
15	Is any sole proprietor, general partner, officer, director, or stockholder with a 10 percent or more interest in the Applicant, or a household member of such individual, a Federal Government employee or Member of the Military having a grade of at least GS-13 or higher (or Military equivalent)?		
16	Is any sole proprietor, general partner, officer, director, or stockholder with a 10 percent or more interest in the Applicant, or a household member of such individual, a member or employee of a Small Business Advisory Council or a SCORE volunteer?		



#	Guarantor 1 Questions	Yes	No
1	I am a U.S. Citizen		
2	I have Lawful Permanent Resident (LPR) Status		
	USCIs Registration Number		
	Country of Citizenship		
3	I am not a U.S. Citizen or Lawful Permanent Resident		
	Country of Citizenship		
4	Place of Birth (City, State, Country)		
5	Are you presently suspended, debarred, proposed for debarment, declared ineligible, voluntarily excluded from participation in a transaction by any Federal department or agency?		
6	Are you presently involved in bankruptcy or insolvency?		
7	Have you or any business you own ever obtained a direct or guaranteed loan from SBA, or another Federal agency loan program (including, but not limited to USDA, B&I, FSA, FHA, EDA), or been a guarantor on such a loan?		
8	Is any of the financing currently delinquent?		
9	Are you an owner of any other business? If yes, please list all businesses, tax IDs and ownership percentages. (List if yes)		
10	Are you presently incarcerated, on probation, on parole, or presently subject to an indictment for a felony or any crime involving or relating to financial misconduct or a false statement?		
11	Are you or any business owned by you, presently involved in any legal action (including divorce)? If yes, please provide details.		
12	Are you presently involved in any pending lawsuits? If yes, please provide details.		
13	If you are at least a 50% or more owner of the applicant business or operating company, are you more than 60 days delinquent on any obligation to pay child support arising under an administrative order, court order, repayment agreement between the holder and a custodial parent, or repayment agreement between the holder and a state agency providing child support enforcement services?		

#	Guarantor 2 Questions	Yes	No
1	I am a U.S. Citizen		
2	I have Lawful Permanent Resident (LPR) Status		
	USCIs Registration Number		
	Country of Citizenship		
3	I am not a U.S. Citizen or Lawful Permanent Resident		
	Country of Citizenship		
4	Place of Birth (City, State, Country)		
5	Are you presently suspended, debarred, proposed for debarment, declared ineligible, voluntarily excluded from participation in a transaction by any Federal department or agency?		
6	Are you presently involved in bankruptcy or insolvency?		
7	Have you or any business you own ever obtained a direct or guaranteed loan from SBA, or another Federal agency loan program (including, but not limited to USDA, B&I, FSA, FHA, EDA), or been a guarantor on such a loan?		
8	Is any of the financing currently delinquent?		
9	Are you an owner of any other business? If yes, please list all businesses, tax IDs and ownership percentages. (List if yes)		
10	Are you presently incarcerated, on probation, on parole, or presently subject to an indictment for a felony or any crime involving or relating to financial misconduct or a false statement?		
11	Are you or any business owned by you, presently involved in any legal action (including divorce)? If yes, please provide details.		
12	Are you presently involved in any pending lawsuits? If yes, please provide details.		
13	If you are at least a 50% or more owner of the applicant business or operating company, are you more than 60 days delinquent on any obligation to pay child support arising under an administrative order, court order, repayment agreement between the holder and a custodial parent, or repayment agreement between the holder and a state agency providing child support enforcement services?		



#	Guarantor 3 Questions	Yes	No
1	I am a U.S. Citizen		
2	I have Lawful Permanent Resident (LPR) Status		
	USCIs Registration Number		
	Country of Citizenship		
3	I am not a U.S. Citizen or Lawful Permanent Resident		
	Country of Citizenship		
4	Place of Birth (City, State, Country)		
5	Are you presently suspended, debarred, proposed for debarment, declared ineligible, voluntarily excluded from participation in a transaction by any Federal department or agency?		
6	Are you presently involved in bankruptcy or insolvency?		
7	Have you or any business you own ever obtained a direct or guaranteed loan from SBA, or another Federal agency loan program (including, but not limited to USDA, B&I, FSA, FHA, EDA), or been a guarantor on such a loan?		
8	Is any of the financing currently delinquent?		
9	Are you an owner of any other business? If yes, please list all businesses, tax IDs and ownership percentages. (List if yes)		
10	Are you presently incarcerated, on probation, on parole, or presently subject to an indictment for a felony or any crime involving or relating to financial misconduct or a false statement?		
11	Are you or any business owned by you, presently involved in any legal action (including divorce)? If yes, please provide details.		
12	Are you presently involved in any pending lawsuits? If yes, please provide details.		
13	If you are at least a 50% or more owner of the applicant business or operating company, are you more than 60 days delinquent on any obligation to pay child support arising under an administrative order, court order, repayment agreement between the holder and a custodial parent, or repayment agreement between the holder and a state agency providing child support enforcement services?		

#	Guarantor 4 Questions	Yes	No
1	I am a U.S. Citizen		
2	I have Lawful Permanent Resident (LPR) Status		
	USCIs Registration Number		
	Country of Citizenship		
3	I am not a U.S. Citizen or Lawful Permanent Resident		
	Country of Citizenship		
4	Place of Birth (City, State, Country)		
5	Are you presently suspended, debarred, proposed for debarment, declared ineligible, voluntarily excluded from participation in a transaction by any Federal department or agency?		
6	Are you presently involved in bankruptcy or insolvency?		
7	Have you or any business you own ever obtained a direct or guaranteed loan from SBA, or another Federal agency loan program (including, but not limited to USDA, B&I, FSA, FHA, EDA), or been a guarantor on such a loan?		
8	Is any of the financing currently delinquent?		
9	Are you an owner of any other business? If yes, please list all businesses, tax IDs and ownership percentages. (List if yes)		
10	Are you presently incarcerated, on probation, on parole, or presently subject to an indictment for a felony or any crime involving or relating to financial misconduct or a false statement?		
11	Are you or any business owned by you, presently involved in any legal action (including divorce)? If yes, please provide details.		
12	Are you presently involved in any pending lawsuits? If yes, please provide details.		
13	If you are at least a 50% or more owner of the applicant business or operating company, are you more than 60 days delinquent on any obligation to pay child support arising under an administrative order, court order, repayment agreement between the holder and a custodial parent, or repayment agreement between the holder and a state agency providing child support enforcement services?		



# APPLICANT OWNER'S DEMOGRAPHIC INFORMATION (OPTIONAL)

Veteran/gender/race/ethnicity data is collected for program reporting purposes only. Disclosure is voluntary and will have no bearing on the loan application decision. A separate demographic information section should be completed for each individual who holds or control 20 percent or more of the beneficial ownership in the Applicant small business.

Owner's Legal Name (First name Last name)

Owner's Position

Veteran Status		Non-Veteran;	Veteran; Service-Disabled Veteran;		Spouse of Veteran;	Not Disclosed		
Gend	ler Male;	Female;	Not Disclosed	Ethnicity	Hispanic or L	_atino;	Not Hispanic or Latino	Not Disclosed
Race	(more than 1 m	nav he selected)	American Indi	an or Alaska I	Native;	Asian;	Black or Africa	n American;
Race (more than 1 may be selected)			Native Hawaiian or Pacific Islander; White;				Not Disclosed	

## APPLICANT OWNER'S DEMOGRAPHIC INFORMATION (OPTIONAL)

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Owner's Legal Name (First name Last name)

Owner's Position

Veteran Status		Non-Veteran;	Veteran;	Service-Disabled Veteran;		Spouse of Veteran;	Not Disclosed	
Gender	Male;	Female;	Not Disclosed	Ethnicity	Hispanic or	Latino;	Not Hispanic or Latino	Not Disclosed
Race (more than 1 may be selected)			American Indian or Alaska Native; As			Asian;	Black or African American;	
			Native Hawaiian or Pacific Islander;			White;	Not Disclosed	

#### APPLICANT OWNER'S DEMOGRAPHIC INFORMATION (OPTIONAL)

Veteran/gender/race/ethnicity data is collected for program reporting purposes only. Disclosure is voluntary and will have no bearing on the loan application decision. A separate demographic information section should be completed for each individual who holds or control 20 percent or more of the beneficial ownership in the Applicant small business.

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Veteran Status		Non-Veteran;	Veteran;	Service-Disabled Veteran;			Spouse of Veteran;	Not Disclosed
Gender	Male;	Female;	Not Disclosed	Ethnicity	Hispanic or Lati	no;	Not Hispanic or Latino	Not Disclosed
Race (mor	e than 1 m	nay be selected)	American Indian or Alaska Native;			Asian;	Black or Africa	n American;
Race (more than 1 may be selected)			Native Hawaiian or Pacific Islander;			White;	Not Disclosed	

# APPLICANT OWNER'S DEMOGRAPHIC INFORMATION (OPTIONAL)

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Owner's Legal Name (First name Last name)

Owner's Position

Veteran Status		Non-Veteran;	Veteran;	Service-Disabled Veteran;		Spouse of Veteran;	Not Disclosed	
Gender	Male;	Female;	Not Disclosed	Ethnicity	Hispanic or La	tino;	Not Hispanic or Latino	Not Disclosed
Race (more than 1 may be selected)			American Indian or Alaska Native; Native Hawaiian or Pacific Islander;			Asian; White;	Black or Africar Not Disclosed	American;

