## **BUSINESS CREDIT APPLICATION AND AGREEMENT**

## IMPORTANT NOTICE ABOUT PROCEDURES FOR OPENING AN ACCOUNT

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. What this means for you: When you open an account, we will ask for 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.



|                                 | Credit requests up to \$5,000 require:  | Credit requests from \$5,001 - \$50,000 require:                         |  |   |  |  |  |  |  |  |
|---------------------------------|---|--|--|---|--|--|--|--|--|--|
| SLI                             | A business checking account as your business'   | • A busir  | ness checking account as   | your business' primary checking account.  |  |  |  |  |  |  |
| ME                              | primary checking account.   | • This co  | mpleted, signed Business   | pleted, signed Business Credit Application and Agreement.   |  |  |  |  |  |  |
| <b>APPLICATION REQUIREMENTS</b> | <ul> <li>This completed, signed Business Credit<br/>Application and Agreement.</li> </ul>   |  | e applicable).   | nental Schedule of Real Estate Owned for each owner   |  |  |  |  |  |  |
| RE                              |   | ,  | * *  | nree years' complete personal tax returns (including K1s)   |  |  |  |  |  |  |
| <u>N</u>                        |   | for all  | +-% owners/guarantors/general partners.  |   |  |  |  |  |  |  |
| CAT                             |   | • The last   | t three years' financial sta   | tements and/or business tax returns.  |  |  |  |  |  |  |
| Ę                               | Complete financial packages are required for l  |  |  |   |  |  |  |  |  |  |
| AP                              |   | Please contact a Greater Nevada Credit Union representative for details. |  |   |  |  |  |  |  |  |
|                                 | All documents submitted bec   | coperty of Greater Nevad   | a Credit Union.  |   |  |  |  |  |  |  |
|                                 |   |  |  | D. IV   |  |  |  |  |  |  |
|                                 | Check one box only  |  | Amount Requested   | Proposed Use  |  |  |  |  |  |  |
| EST                             | UNSECURED BUSINESS LINE OF CREDIT (total combined unsecured credit cannot exceed \$50,000)  |  | \$   |   |  |  |  |  |  |  |
| EQU                             | SECURED BUSINESS LINE OF CREDIT   |  | \$   |   |  |  |  |  |  |  |
| <b>CREDIT RIEQUIEST</b>         | SECURED BUSINESS TERM LOAN 1 2 3 (select desired term in years)   | 4 5  | \$   |   |  |  |  |  |  |  |
| CR                              | A business checking account to be used for  |  | -  |   |  |  |  |  |  |  |
|                                 | overdraft protection and automatic payment deductions.  |  |  |   |  |  |  |  |  |  |
|                                 |   | Business cl  | necking account number   | Applicant's Authorization (initials)  |  |  |  |  |  |  |
|                                 |   |  |  |   |  |  |  |  |  |  |
|                                 | Tell us about your business.  |  |  |   |  |  |  |  |  |  |
|                                 | Tell us about your business.  |  |  |   |  |  |  |  |  |  |
|                                 | Type of Organization  | nnany  | General Partnershin  | ☐ Other   |  |  |  |  |  |  |
|                                 | Type of Organization  Corporation  Limited Liability Com  |  | General Partnership Sole Proprietorship  | Other   |  |  |  |  |  |  |
|                                 | Type of Organization  Corporation Limited Liability Com Limited Partnership Limited Liability Partnership   |  | Sole Proprietorship  |   |  |  |  |  |  |  |
|                                 | Type of Organization  Corporation  Limited Liability Com  |  |  |   |  |  |  |  |  |  |
|                                 | Type of Organization  Corporation Limited Liability Com Limited Partnership Limited Liability Partr  Legal Name of Business (Applicant)   |  | Sole Proprietorship  | r Gross Revenue – Last Fiscal Year  |  |  |  |  |  |  |
| NOL                             | Type of Organization  Corporation Limited Liability Com Limited Partnership Limited Liability Partnership   |  | Sole Proprietorship  Business Phone Number ( )   | r Gross Revenue – Last Fiscal Year  |  |  |  |  |  |  |
| MA TION                         | Type of Organization  Corporation Limited Liability Com Limited Partnership Limited Liability Partr  Legal Name of Business (Applicant)   |  | Sole Proprietorship  Business Phone Number ( )   | r Gross Revenue – Last Fiscal Year<br>\$ Net Profit – Last Fiscal Year  |  |  |  |  |  |  |
| ORMA TION                       | Type of Organization  Corporation Limited Liability Com Limited Partnership Limited Liability Partr Legal Name of Business (Applicant)  DBA (If applicable)  Key Contact Name   |  | Business Phone Number  Business Website URL  Tax ID Number   | r Gross Revenue – Last Fiscal Year \$ Net Profit – Last Fiscal Year \$ Date Business Established  |  |  |  |  |  |  |
|                                 | Type of Organization  Corporation Limited Liability Com Limited Partnership Limited Liability Partr  Legal Name of Business (Applicant)  DBA (If applicable)  |  | Sole Proprietorship  Business Phone Number  ( )  Business Website URL  | r Gross Revenue – Last Fiscal Year \$ Net Profit – Last Fiscal Year \$  |  |  |  |  |  |  |
| _                               | Type of Organization  Corporation Limited Liability Com Limited Partnership Limited Liability Partr Legal Name of Business (Applicant)  DBA (If applicable)  Key Contact Name  Business Address   |  | Business Phone Number  Business Website URL  Tax ID Number  Number of Employees  | r Gross Revenue – Last Fiscal Year \$ Net Profit – Last Fiscal Year \$ Date Business Established  |  |  |  |  |  |  |
|                                 | Type of Organization  Corporation Limited Liability Com Limited Partnership Limited Liability Partr Legal Name of Business (Applicant)  DBA (If applicable)  Key Contact Name   |  | Business Phone Number  ( )  Business Website URL  Tax ID Number  Number of Employees  Business Loans   | r Gross Revenue – Last Fiscal Year \$ Net Profit – Last Fiscal Year \$ Date Business Established  Present Management Since  |  |  |  |  |  |  |
| BUSINESS INFORMA TION           | Type of Organization  Corporation Limited Liability Com Limited Partnership Limited Liability Partr Legal Name of Business (Applicant)  DBA (If applicable)  Key Contact Name  Business Address  Number of years business has been profitable   |  | Business Phone Number  ( )  Business Website URL  Tax ID Number  Number of Employees  Business Loans Institution curren  | r Gross Revenue – Last Fiscal Year \$ Net Profit – Last Fiscal Year \$ Date Business Established  Present Management Since  |  |  |  |  |  |  |
| _                               | Type of Organization  Corporation Limited Liability Com Limited Partnership Limited Liability Partr Legal Name of Business (Applicant)  DBA (If applicable)  Key Contact Name  Business Address  Number of years business has been profitable  Type of Business   | nership  | Business Phone Number  Tax ID Number  Number of Employees  Business Loans Institution curren Total business del  | r Gross Revenue – Last Fiscal Year \$ Net Profit – Last Fiscal Year \$ Date Business Established  Present Management Since  attly with: bt:                                   |  |  |  |  |  |  |
| _                               | Type of Organization  Corporation Limited Liability Com Limited Partnership Limited Liability Partr Legal Name of Business (Applicant)  DBA (If applicable)  Key Contact Name  Business Address  Number of years business has been profitable  Type of Business Manufacturer Wholesaler Service   | nership Retail   | Business Phone Number  ( )  Business Phone Number  ( )  Business Website URL  Tax ID Number  Number of Employees  Business Loans Institution curren Total business del Lim | r Gross Revenue – Last Fiscal Year \$ Net Profit – Last Fiscal Year \$ Date Business Established  Present Management Since  attly with: bt: it \$                             |  |  |  |  |  |  |
| _                               | Type of Organization  Corporation Limited Liability Com Limited Partnership Limited Liability Partr Legal Name of Business (Applicant)  DBA (If applicable)  Key Contact Name  Business Address  Number of years business has been profitable  Type of Business   | nership Retail   | Business Phone Number  Tax ID Number  Number of Employees  Business Loans Institution curren Total business del Lim Bala   | r Gross Revenue – Last Fiscal Year \$ Net Profit – Last Fiscal Year \$ Date Business Established  Present Management Since  attly with: bt: it \$ ance Due \$                 |  |  |  |  |  |  |
| _                               | Type of Organization  Corporation Limited Liability Com Limited Partnership Limited Liability Partr Legal Name of Business (Applicant)  DBA (If applicable)  Key Contact Name  Business Address  Number of years business has been profitable  Type of Business Manufacturer Wholesaler Service  Describe your product or service (SIC or NAICS Code if a | nership Retail   | Business Phone Number  Tax ID Number  Number of Employees  Business Loans Institution curren Total business del Lim Bala   | r Gross Revenue – Last Fiscal Year \$ Net Profit – Last Fiscal Year \$ Date Business Established  Present Management Since  attly with: bt: it \$                             |  |  |  |  |  |  |
| _                               | Type of Organization  Corporation Limited Liability Com Limited Partnership Limited Liability Partr Legal Name of Business (Applicant)  DBA (If applicable)  Key Contact Name  Business Address  Number of years business has been profitable  Type of Business Manufacturer Wholesaler Service   | nership Retail   | Business Phone Number  Tax ID Number  Number of Employees  Business Loans Institution curren Total business del Lim Bala   | T Gross Revenue – Last Fiscal Year  Net Profit – Last Fiscal Year  Date Business Established  Present Management Since  Atly with:  bt:  it \$  ance Due \$  nthly Payment \$ |  |  |  |  |  |  |

## Required for all credit requests.

**AUTHORIZED SIGNATURE** 

X

The business named above ("Applicant") certifies that all information is complete, true and correct and authorizes Greater Nevada Credit Union (the "Credit Union") to obtain credit reports to check the individual and/or business credit rating of both the Applicant and the individual owners. On Unsecured Business Lines of Credit, the Applicant agrees to comply with the terms and conditions of the Business Line of Credit Agreement, as amended from time to time, receipt of which is acknowledged. If this is an application for a SECURED Business Term Loan or a SECURED Business Line of Credit, additional documentation will be sent to Applicant and guarantors for execution and submittal to Credit Union for approval; the Note, Security Agreement and related loan closing documents will be provided separately.

Applicant's acceptance of any proceeds of or initial use of Credit Union's Business Line of Credit, Unsecured Business Line of Credit, Term Loan, or Secured Business Line of Credit indicates and shall further evidence Applicant's acceptance of the applicable Terms and Conditions. Applicant represents that the primary purpose of the credit applied for is business related.

Each person signing below certifies that s/he is signing on behalf of the Applicant in the capacity indicated next to the signer's name, and that such signer is authorized to execute this Business Credit Application and Agreement on behalf of the Applicant. Applicant further certifies that it has no present intention to file for bankruptcy protection and that the information regarding its financial condition is complete and correct.

The terms and conditions on all Business Term Loans and Lines of Credit will be disclosed in separate loan documents presented for Applicant's review and signature after such loan is approved.

The persons authorized to give instructions regarding this Business Loan/Line of Credit (the Guarantors) are listed on the second and any subsequent pages of this document.

## **REQUIRED SIGNERS:**

- SOLE PROPRIETOR The owner
- PARTNERSHIP, LIMITED PARTNERSHIP or GENERAL PARTNERSHIP All general partners
- CORPORATION The person(s) named in the Corporate Resolution below
- LIMITED LIABILITY COMPANY or LIMITED LIABILITY PARTNERSHIP – All managing members

ALL TITLES HELD

DATE

• TRUST - All Trustees

| AUTHORIZED SIGNATURE  | PRINTED NAME                            |  | ALL TITLES HELD  | DATE  |  |  |  |  |  |  |
|---|---|--|--|---|--|--|--|--|--|--|
| X   |   |  |  |   |  |  |  |  |  |  |
| Corporate Applicants only: Complete this section also.  |   |  |  |   |  |  |  |  |  |  |
| Resolved: That the President, Vice President) and/or the (title) is/are authorized to apply for credit and loan agreements on behalf of this corporation  Resolved Further: That each officer named all to enter loan renewal, modification, extens agreements on behalf of this corporation. | enter into binding . bove is authorized | Secretary of the co<br>adopted by the co<br>in effect, and has<br>signatures and title | certify that I am the Secretar rporation, the foregoing resolution or poration's board of directors not been revoked or americal est forth above and on the resures and titles of the persons in | ution was duly<br>s, is currently<br>nded; and the<br>everse side are |  |  |  |  |  |  |
| SIGNATUDE OF SECRETARY OF ASSISTANT   | T CECDETADV                             |  | TITLE  | DATE  |  |  |  |  |  |  |

PRINTED NAME

X

|                              | At least 50% of the company of (Please make additional copie  |                    | gua      | araı     | nte                  | e thi         | s loa  | n a                                   | nd p          | provide a personal fi  | nancial s           | statemen | t.    |          |
|------------------------------|---|--------------------|----------|----------|----------------------|---------------|--|---------------------------------------|---------------|------------------------|---------------------|----------|-------|----------|
|                              | Owner / Guarantor Name  |                    |          |          |                      | Г             | Title  |                                       |               | Ownership %            |                     |          |       |          |
|                              | Home Address  |                    |          |          |                      |               |  | (                                     | ity           |                        |                     | State    | Zip   | )        |
|                              | Social Security Number Home Telephone   |                    |          |          |                      | Email Address |  |                                       |               |                        |                     |          |       |          |
| TEMENT                       | Gross Household Income  Alimony, child support, or separate maintenance need not be revealed if you do not wish to have it considered as a basis for repaying the obligation. |                    |          |          |                      | eit           |  |                                       |               |                        |                     |          |       |          |
| PERSONAL FINANCIAL STATEMENT | PERSONAL ASSETS  Cash in Checking/Savings Accounts  C C C C   |                    |          | P        | PERSONAL LIABILITIES |               |  |                                       | Total<br>Owed | ı                      | Monthly<br>Payments |          |       |          |
| Ž                            |   | nts                | <u> </u> | <u> </u> |                      | · _           | -   <del>-</del>   | axe                                   | s Pay         | vable                  |                     | \$       | \$    | <u>-</u> |
| Ē                            | Acct. No.: Institution:   | \$                 | С        | С        | С                    | С             | - 1 -  |                                       | <u>-</u>      | g Credit / Credit Card | S                   | \$       |       |          |
| A                            | Acct. No.:  |                    |          |          |                      |               |  | Installment Contracts and Notes Payal |               |                        |                     | <u> </u> | \$    |          |
| NO                           | Acct. No.: Institution:   | \$                 | С        | С        | С                    | С             |  |                                       |               | Credit                 |                     | \$       |       |          |
| SE                           | Acct. No.:  |                    |          |          |                      |               | $\bar{N}$  | Nortgage – Primary Residence          |               |                        |                     | \$       | -  \$ | 6        |
| Δ                            | Institution:  | \$                 | С        | С        | С                    | С             |  |                                       |               | - Other Improved R     |                     | \$       | 5     | 3        |
|                              | Publicly Traded Securities Owned  | 1 \$               | С        | С        | С                    | С             | I —  |                                       |               | imary Residence        |                     | \$       | - \$  |          |
|                              | IRA / Keogh / Pension Assets  |                    | C        | С        | С                    | - <u>-</u>    | $\bar{c}$  | the                                   | r Lia         | bilities (detail)      |                     | \$       | \$    | <u>)</u> |
|                              | Real Estate – Primary Residence   |                    |          |          | C                    |               | -  |                                       |               |                        |                     |          |       |          |
|                              | Real Estate – Other Improved  |                    |          |          |                      |               | ·   <sub>Т</sub>   | n<br>To                               | 'AT           | PERSONAL LIABII        | TTIES               | <b> </b> | 9     | 2        |
|                              | Value of Business   |                    |          |          |                      | - <u>-</u>    | -   -  |                                       |               |                        | 41113               | Ψ        | 1     | ,        |
|                              | Other Assets (detail)   | ····               |          |          |                      |               | -   '  | ET                                    | W(            | ORTH                   |                     |          |       |          |
|                              | TOTAL PERSONAL ASSETS   |                    |          |          |                      |               |  | sse                                   | ts M          | inus Liabilities       | \$                  |          |       |          |
| AGREEMENTS / SIGNATURES      |   |                    |          |          |                      |               |  |                                       |               |                        |                     |          |       |          |
|                              | All groups to se must one group (   | he following area  | 4:0      |          |                      | loog          |  |                                       |               |                        | lod )               |          |       |          |
|                              | All guarantors must answer the following questions. (Please make additional copies if needed.)  |                    |          |          |                      |               |  |                                       |               |                        |                     |          |       |          |
| QUESTIONS                    | Besides the Real Estate described or Applicant's assets pledged? Ex   | plain              |          |          | nd/<br>              |               | Yes  |                                       |               | contingent liabilitie  | s as an en          |          | C `   | Yes C No |
| JES                          | Have you and/or Applicant eve   | -                  | -        |          |                      |               | Yes  |                                       |               | Amount ©               |                     |          |       |          |
| 9                            | Have you and/or Applicant ever  |                    |          |          |                      | С             | Yes  |                                       |               |                        |                     |          |       |          |
|                              | Do you and/or Applicant owe a   | •                  |          |          | ıe?                  |               | Yes  |                                       |               | Do you and/or Ap       |                     |          | C     | Yes ⊂ No |
|                              | Are you and/or Applicant party  | to a claim or laws | suit     | ?        |                      | С             | Yes  | С                                     | No            | other credit applic    | ations pe           | ending?  |       |          |
|                              | FOR CREDIT UNION USE ONLY BRANCH CONTACT DATE   |                    |          |          |                      | Whe           | • Bring it to any Greater<br>• Fax it to (775) 884-530<br>• Mail it to: Business I<br>Greater No | Nevada Bra<br>19<br>Lending           | nch           | one o                  | of the following    |          |       |          |

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Carson City, NV 89702
For more information, please call: 775-882-2060