

SBA 504 Loan Application

Operating Company				
Operating Company Name:	Tax ID:			
Street Address:	City:	State:	Zip:	
Mailing Address:	City:	State:	Zip:	
Principal in charge:	Work Phone:	Wo	rk Fax:	
Email:	Cell Phone:			
Nature of Business:				
s the business a franchise: If "yes", name:				
Current number of full time employees:				
Number of employees to be hired within 2	years as a result of this project:			
Real Estate Holding Company				
Please complete the information below O I	NLY if you have/will be creating a PASSIVE rea	l estate holding or so	me other sort	
of entity (other than the active business) th	nat will hold title to the real estate you are pur	chasing, improving o	r constructing	
RE Holding Company Name:		Tax ID:		
Street Address:	City:	State:	Zip:	
A-UAdd-	City	Chaha	71	

Ownership Structure for the Operating Company Please account for 100% of the ownership							
O Wilei Silip Sti		ГСОРСТ	ting compan	, ricase	I	Does this individual control or own 20% of	
Full Name	Title	% Ownership	SSN	Date of Birth	City & State of Birth	any other businesss? (If yes, complete Affiliate Business info.)	Does this individual have any other SBA or Federal Debts:
*Sex		<u> </u>	*Race		<u> </u>	*Ethnicity	*Military Service
Male	Amer. Ind./Alask	a Nativo	Nace	Asian		Hisp./Latino	
Female	Black/AftAmer	a Native		White/C	auc	NOT Hisp./Latino	From: To:
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Female	Black/AftAmer			White/C	auc.	NOT Hisp./Latino	To:
	Native Haw./Pac	ific Islander					Service Disabled:YesNo
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Ownership S	Structure for	the Bor	rowing Entity	Please	account fo	r 100% of the ownersh	
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_ White/Cauc.

NOT Hisp./Latino

To: _

Service Disabled: __Yes__No

Female

_Black/Aft.-Amer

Native Haw./Pacific Islander

^{*}This data is collected for statistical purposes only. It has no bearing on the credit decision. Disclosure is voluntary. One or more boxes may be selected

Project Information					
Address of new project:					
City:	State:	Zip:	Co	ounty:	
Is the project property an existing building or	new construction? Existi	ng N	lew Construction		
Square footage of project building:	Square footage th	at your company	will occupy:		_
Estimated Purchase of Land:	_ Estimated Construction C	osts:			
Estimated Equipment Costs:	Where will the required e	equity injection b	e coming from? _		
Please Note: The SBA requires that your company occup For a <u>new</u> building, you must occupy at least 60% upon		-	•	out permanently	
Tenants					
If there are any tenants that will remain in the	e building, please provide tl	ne following info	rmation. Also, ple	ease have your	
realtor provide copies of all existing leases. <u>Tenant Name</u>	Square Footage	<u>Lea</u>	se Expiration Date		Monthly rent amt.
				 -	
		-			
Affiliated Businesses					
Please list any businesses where any Principal business(affiliate), controls the affiliate or the previous 2 years tax returns and current finar	affiliate is a closely related	entity. The affil	-		
<u>Business Name</u>	<u>Owner</u>	<u>%</u>	<u>Ownership</u>	Nature of	<u>Business</u>

Business Profile	Use separate attachments if necessary or attach business plan
Type of Business	
Type of business	
Outlook: (what is your or	utlook concerning the business activity in which you are engaged)
What primary markets us	se your products?
List key customers	
_	_
List major competitors	
· · · —	
List major suppliers	
List major suppliers	
Future plans (Growth stra	ategy, any impediments that may impact your success)
Major past accomplishme	ents
Marketing Analysis and S	strategy
Hannillakte leen kee	
How will this loan benefit	t your company?