

COMMERCIAL LOAN APPLICATION - SUMMARY

IMPORTANT APPLICANT INFORMATION: Federal law requires financial institutions to obtain sufficient information to verify your identity. You may be asked several questions and to provide one or more forms of identification to fulfill this requirement. In some instances we may use outside sources to confirm the information. The information you provide is protected by our privacy policy and federal law.

	National Bank of Middlebury PO Box 189 Middlebury VT 05753-0189	Date Telephone # Email Address Taxpayer ID # Nature of Business Business Year-End Date
Applicant's Name and Address	Creditor's Name and Address	
Legal Relationship: <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole-Proprietorship <input type="checkbox"/> Other		
Authorization Resolution Dated: <input type="checkbox"/> Submitted with Statement <input type="checkbox"/> On File with Creditor <input type="checkbox"/> To be Provided		
Income Tax Return Filed Through What Date: _____ Are any returns being contested or Audited? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Name of Accountant or Accounting Firm: _____		
Names of Persons Authorized to Borrow Money on Behalf of and in the Name of the Applicant: _____		
Amount Requested \$ _____ <input type="checkbox"/> Secured <input type="checkbox"/> Unsecured <input type="checkbox"/> Initial Request <input type="checkbox"/> Additional Advance		
Purpose of Loan _____ Terms _____		
<input type="checkbox"/> Financial Statement Submitted with this Summary. <input type="checkbox"/> Current Financial Statement on File with Creditor.		
Assets		Liabilities
Current Assets		Current Liabilities
Account/Trade Receivables		Long Term Liabilities
Inventory - Gross		Other Liabilities
Fixed Assets		Total Liabilities
Other		Net Worth (Total Assets minus Total Liabilities)
Total Assets		Total Liabilities and Net Worth
From	To	Date of Birth – (for individuals only)
Net Sales		
Gross Profit		
Net Operating Profit		
Net Profit/Loss		
Were your gross revenues \$1,000,000 or less in your previous fiscal year? <input type="checkbox"/> Yes <input type="checkbox"/> No		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 (providing the applicant has the capacity to enter into a binding contract), because all or a part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act, the federal agency that administers compliance with this law concerning this creditor is:
If you answered "yes" and the Creditor denies your application for credit, you have the right to a written statement of the specific reasons for the denial. To obtain the statement please contact: Attn: Credit Department National Bank of Middlebury PO Box 189 Middlebury VT 05753-0189 within 60 days from the date you are notified of Creditor's decision. The Creditor will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement. The notice at right describes additional protections extended to you.		
OFFICE OF THE COMPTROLLER OF THE CURRENCY Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, Texas 77010-9050		

NOTICE - JOINT CREDIT: Please print this form and initial on the line below if you intend to apply for joint credit.

We intend to apply for joint credit. (initials) _____

This information and the information provided on all accompanying financial statements and schedules is provided for the purpose of obtaining credit for the Applicant(s) or for the purpose of Applicant(s) guaranteeing credit for others. Applicant(s) acknowledge that representations made in this statement will be relied on by Creditor in its decision to grant such credit. This Statement is true and correct in every detail and accurately represents the financial condition of the Applicant(s) on the date given below. Creditor is authorized to make all inquiries it deems necessary to verify the accuracy of the information contained herein and to determine the creditworthiness of the Applicant(s). Applicant(s) will promptly notify Creditor of any subsequent changes which would affect the accuracy of this Statement. Creditor is further authorized to answer any questions about Creditors credit experience with Applicant(s). Applicant(s) are aware that any knowing or willful false statements regarding the value of the above property for purposes of influencing the actions of Creditor can be a violation of federal law, 18 U.S.C. & 1014, and may result in a fine or imprisonment or both.

In addition, each individual signing below authorizes the Creditor to check their individual credit account and employment history and have a credit reporting agency prepare a consumer credit report on them.

By signing below, the undersigned agree(s) to all the terms and conditions beginning on page 1 through the bottom of page 2 of this Application.

By _____
 Signature _____ Date _____

By _____
 Signature _____ Date _____

By _____
 Signature _____ Date _____

By _____
 Signature _____ Date _____

Please print, sign, and return original form to National Bank of Middlebury, PO Box 189, Middlebury VT 05753-0189