

<input type="checkbox"/> New Relationship	DATE	BRANCH
<input type="checkbox"/> Existing Relationship	OFFICER	BDO

## Loan Type

<input type="checkbox"/> Line of Credit	<input type="checkbox"/> Line-to-Loan	AMOUNT REQUESTED
<input type="checkbox"/> Term Loan	<input type="checkbox"/> Mortgage	TERM REQUESTED (TERM LOAN 12-60 MONTHS, MORTGAGE UP TO 20 YEARS)
<input type="checkbox"/> ACH		PURPOSE OF LOAN

(Copy of most recent tax return may be required for requests up to \$50,000; will be required for requests from \$50,000 to \$100,000; and most recent two years required for requests over \$100,000)

## 1. Business Information

LEGAL BUSINESS NAME	TAX ID #	
DOING BUSINESS AS	NATURE OF BUSINESS	
MAILING ADDRESS		
CITY/STATE/ZIP CODE		
ASSET LOCATION ADDRESS		
CITY/STATE/ZIP CODE	NUMBER OF EMPLOYEES	
TELEPHONE NUMBER	FAX NUMBER	
CELL PHONE NUMBER	E-MAIL ADDRESS	
BUSINESS STRUCTURE		
<input type="checkbox"/> Corporation <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Trust <input type="checkbox"/> Unincorporated Association <input type="checkbox"/> Other(explain)		
DATE ESTABLISHED	STATE OF INCORPORATION	DATE UNDER CURRENT MANAGEMENT SINCE
ANNUAL REVENUE \$	TOTAL ASSETS \$	TOTAL LIABILITIES \$
YEARS AT PRESENT LOCATION	<input type="checkbox"/> Own <input type="checkbox"/> Lease	WEBSITE ADDRESS
CHECKING ACCOUNT HELD AT	AVERAGE BALANCE PAST 3 MONTHS \$	
CHECKING ACCOUNT HELD AT	AVERAGE BALANCE PAST 3 MONTHS \$	
Does the business owe taxes for any year prior to its tax year or fiscal year?	<input type="checkbox"/> Yes <input type="checkbox"/> No	DATE TAXES LAST PAID
When are the business taxes paid?	<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Other (explain):	
Has the business or any owner ever declared bankruptcy?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Provide Details Under Section 2
Has the business incurred a net loss as reported on its federal income tax return or GAAP financial statements in any of the last 3 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Provide Details Under Section 2
Is any owner, guarantor, or family member of such person associated with Middlesex Savings Bank as a trustee or employee?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Provide Details Under Section 2
Is the business a party in any lawsuit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Provide Details Under Section 2
Is the business for sale or under agreement that would change the ownership of the business?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Provide Details Under Section 2
Are any of the assets of the business encumbered by liens or attachments of any type?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Provide Details Under Section 2
COLLATERAL OFFERED	TYPE	MARKET VALUE \$
COLLATERAL OFFERED	TYPE	MARKET VALUE \$
COLLATERAL OFFERED	TYPE	MARKET VALUE \$

## 2. Additional Information- for additional space use back page

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### 3. Miscellaneous Information – Business Service Professionals

ACCOUNTANT	TELEPHONE NUMBER
INSURANCE AGENT	TELEPHONE NUMBER
ATTORNEY	TELEPHONE NUMBER

### 4. Financial Information

Credit Relationships – Please provide details of your business credit relationships below:

NAME OF CREDITOR	TYPE OF DEBT	ORIGINAL LOAN AMOUNT \$	AMOUNT PRESENTLY OWING \$	MONTHLY PAYMENT \$	REPAYMENT TERMS (P&I, Int. only, etc.)	MATURITY DATE	COLLATERAL DESCRIPTION

Will the debt listed above be paid off with the financial proceeds provided in this application?  Yes  No

#### Trade References

COMPANY NAME	CONTACT NAME
ADDRESS	TELEPHONE NUMBER
COMPANY NAME	CONTACT NAME
ADDRESS	TELEPHONE NUMBER
COMPANY NAME	CONTACT NAME
ADDRESS	TELEPHONE NUMBER

### 5. Owner Information

- \* Each owner with at least 20% ownership must complete Sections 5, 6 & 7. If there are more than two owners, complete and attach a separate Owner Information and Acknowledgement and Agreement sheet (Sections 5, 6 & 7).
  - \*\* Refer to Personal Financial Statement Worksheet – Section 6.
  - \*\*\* **Income from alimony, child support or separate maintenance payments need not be revealed if you do not wish to have it considered as a basis for repayment of the requested credit.**
- Refer to Section 6 – Personal Financial Statement Worksheet to assist you with these calculations

#### Business Owner\* 1

NAME	DATE OF BIRTH	
HOME ADDRESS (residence)	HOW LONG AT PRESENT ADDRESS?	
CITY/STATE/ZIP CODE	TITLE OR POSITION	
HOME TELEPHONE NUMBER	LENGTH OF TIME AS BUSINESS OWNER?	
SOCIAL SECURITY NUMBER	PERCENTAGE OF BUSINESS OWNERSHIP?	
TOTAL PERSONAL ASSETS** \$	TOTAL PERSONAL LIABILITIES** \$	EQUITY IN HOME
MONTHLY GROSS SALARY*** \$	OTHER MONTHLY INCOME** \$	DESCRIBE
APPROXIMATE MONTHLY HOME MORTGAGE OR RENTAL PAYMENT		
MONTHLY CONSUMER REVOLVING CREDIT PAYMENT(S) \$	OTHER MONTHLY CONSUMER LOAN/NOTE PAYMENTS \$	
WHERE DO YOU MAINTAIN YOUR PERSONAL CHECKING ACCOUNT?	EQUITY IN BUSINESS (IF INCLUDED IN TOTAL ASSETS) \$	

#### Business Owner\* 2

NAME	DATE OF BIRTH	
HOME ADDRESS (residence)	HOW LONG AT PRESENT ADDRESS?	
CITY/STATE/ZIP CODE	TITLE OR POSITION	
HOME TELEPHONE NUMBER	LENGTH OF TIME AS BUSINESS OWNER?	
SOCIAL SECURITY NUMBER	PERCENTAGE OF BUSINESS OWNERSHIP?	
TOTAL PERSONAL ASSETS** \$	TOTAL PERSONAL LIABILITIES** \$	EQUITY IN HOME
MONTHLY GROSS SALARY*** \$	OTHER MONTHLY INCOME** \$	DESCRIBE
APPROXIMATE MONTHLY HOME MORTGAGE OR RENTAL PAYMENT		
MONTHLY CONSUMER REVOLVING CREDIT PAYMENT(S) \$	OTHER MONTHLY CONSUMER LOAN/NOTE PAYMENTS \$	
WHERE DO YOU MAINTAIN YOUR PERSONAL CHECKING ACCOUNT?	EQUITY IN BUSINESS (IF INCLUDED IN TOTAL ASSETS) \$	

## 6. Personal Financial Statement Worksheet – MUST BE COMPLETED FOR CALCULATING THE FIGURES REQUESTED IN SECTION 5

### Business Owner 1

ASSETS		LIABILITIES	
Cash on hand in Banks		Accounts and Bills Due	
Marketable & Government Securities		Revolving Debt Balances	
Accounts and Notes Receivable		Notes Payable to Banks – Unsecured	
Cash Value of Life Insurance		Notes Payable to Banks – Secured	
Real Estate Owned (Personal)		Unpaid Income Tax (Prior Years)	
Real Estate Owned (Investment)			
Automobiles and other Property		Real Estate Mortgages Due	
Other Assets		Other Debts	
Value of Interest in Business			
		Total Liabilities	
Total Assets		Net Worth (Total Assets – Total Liabilities)	

### Business Owner 2

ASSETS		LIABILITIES	
Cash on hand in Banks		Accounts and Bills Due	
Marketable & Government Securities		Revolving Debt Balances	
Accounts and Notes Receivable		Notes Payable to Banks – Unsecured	
Cash Value of Life Insurance		Notes Payable to Banks – Secured	
Real Estate Owned (Personal)		Unpaid Income Tax (Prior Years)	
Real Estate Owned (Investment)			
Automobiles and other Property		Real Estate Mortgages Due	
Other Assets		Other Debts	
Value of Interest in Business			
		Total Liabilities	
Total Assets		Net Worth (Total Assets – Total Liabilities)	

**IMPORTANT:** For regulatory compliance reasons, please complete the following information, by checking the appropriate box:

- You are applying for consumer credit in your own name and are relying on your own income and/or assets and not the income and/or assets of another person as the basis for repayment of the credit requested.
- You are applying for joint consumer credit with another person or for an account that another person will use.  
We intend to apply for joint credit (please initial): Applicant: \_\_\_\_\_ Co-Applicant: \_\_\_\_\_
- You are applying for individual consumer credit, but are relying on the income and/or assets of another person as the basis of repayment for repayment of the credit requested
- You are applying for business credit in the name of a corporation, trust, or other legal entity and are relying upon the income/or assets of that entity.

## 7. Acknowledgement and Agreement

The undersigned specifically acknowledge(s) and agree(s) that 1) all statements made in this application are made for the purpose of obtaining the loan indicated herein; 2) verification or reverification of any information contained in the application may be made at any time by the Lender, its agents, successors and assigns, either directly or through a credit reporting agency and/or from any source named in this application, and the lender may request a credit report concerning any Signer or Guarantor in connection with this Application or any update, extension or renewal of any credit, and the original copy of this application and all supporting materials will be retained by the Lender, even if the loan is not approved; 3) the Lender, its agents, successors and assigns will rely on the information contained in the application and I/we have a continuing obligation to amend and/or supplement the information provided in this application if any of the material facts which I/we have represented herein should change prior to closing; 4) in the event my/our payments on the loan indicated in this application become delinquent, the Lender, its agents, successors and assigns may, in addition to all their other rights and remedies, report my/our name(s) and account information to a credit reporting agency. If the loan is approved, the Borrower will be required to maintain all corporate deposit accounts at Middlesex Savings Bank. Loan funds will not be disbursed until deposit accounts are established.

**Certification:** I/We certify that the information provided in this application is true and correct as of the date set forth opposite my/our signature(s) on this application and acknowledge my/our understanding that any intentional or negligent misrepresentation(s) of the information contained in this application may result in civil liability and/or criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Section 1001, et seq. and liability for monetary damages to the Lender, its agents, successors and assigns, insurers and any other person who may suffer any loss due to reliance upon any misrepresentation which I/we have made on this application.

Authorized Signature: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Company Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

