

## Western Bank Commercial Loan Application

### Loan Request

Amount Requested \_\_\_\_\_ For How Long \_\_\_\_\_ Payment Date Desired \_\_\_\_\_

Purpose of Request \_\_\_\_\_

Collateral Offered \_\_\_\_\_

### Business Information

*Applying as (check appropriate box)*

Tax ID No#		Tax ID No#	
Corporation		Trust	
Partnership		Association	
LLC		Non-Profit	
Individual		Other	

Legal Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Street Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Work Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Nature of Business: \_\_\_\_\_

*List Officers/Owners (if applicable)*

	Name
President	
Vice President	
Secretary	
Treasurer	
	% Owned
Owner	
Owner	
Owner	
Owner	

### Individual Information

Legal Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_

Mailing Address \_\_\_\_\_

Street Address \_\_\_\_\_

Email Address \_\_\_\_\_ Cell Phone Number \_\_\_\_\_

Work Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Relationship (Co-borrower/Guarantor) \_\_\_\_\_

## Western Bank Commercial Loan Application

### Individual Information

Legal Name	_____	
Date of Birth	_____ Social Security Number	_____
Mailing Address	_____	
Street Address	_____	
Email Address	_____ Cell Phone Number	_____
Work Number	_____ Fax Number	_____
Relationship (Co-borrower/Guarantor)	_____	
If checked, additional co-borrowers/guarantors are attached	_____	

### Business Associates

Accountant or Accounting Firm	_____	
Address	_____	
Phone Number	_____ Email Address	_____
Attorney or Law Firm	_____	
Address	_____	
Phone Number	_____ Email Address	_____
Insurance Company – Name of Agent	_____	
Address	_____	
Phone Number	_____ Email Address	_____

### Notices

**Notice:** The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applications 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 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 credit is:

#### FEDERAL RESERVE BANK CONSUMER HELP

P.O. Box 1200  
Minneapolis, MN 55480

**Western Bank Commercial Loan Application**

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, either directly or through any agency employed by Lender for that purpose, to verify the accuracy of the information contained herein and to determine the creditworthiness of 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 Creditor's 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.

By signing below, each Applicant declares that he/she has read understands the Notice Section above and, if applicable, has received the Regulation B notification regarding denied credit and appraisal notice.

By signing below, each signor and guarantor is authorizing the release of financial statements and tax returns from accounting firm, Internal Revenue Service, and State Taxation and Revenue Services during the life of the loan.

By signing below, the Applicant(s) acknowledge the information regarding procedures for opening a new account. These procedures 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 you for your name, street 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.

By: \_\_\_\_\_  
(Signature and Title) (Individual/Guarantor)

By: \_\_\_\_\_  
(Signature and Title) (Individual/Guarantor)

By: \_\_\_\_\_  
(Signature and Title) (Individual/Guarantor)

Date of Signature(s) \_\_\_\_\_

Attached: CPA authorization release form and IRS Form 4506

Date \_\_\_\_\_

Name of CPA/Accountant \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

Telephone \_\_\_\_\_

I, hereby give Western Bank authorization to obtain my past and present personal and/or business tax returns and financial statements for the purpose of analyzing my credit worthiness.

\_\_\_\_\_  
(Borrower's Name)

\_\_\_\_\_  
(Borrower's Name)

\_\_\_\_\_  
(Borrower's Name)

\_\_\_\_\_  
(Borrower's Name)

Please e-mail the copies to [westernbank@bootheelbank.com](mailto:westernbank@bootheelbank.com) or mail them to Western Bank, attention loan department, Post Office Box 490, Lordsburg, New Mexico 88045.

Thank you.

[IRS Form 4506](#)