



INDEPENDENCE BANK

Commercial/Agricultural Loan Application

Application Date: _____

Applying for Credit as: Individual Joint Guarantor Co-Signer

Please indicate by your initials if you intend to apply jointly: _____

Principal Borrower Information		
Business Name:		Taxpayer ID #:
Applicants Name:	Social Security #:	Date of Birth:
Mailing Address:	City & State:	Zip Code:
Physical Address:		
Telephone Number(s):		

Additional Borrower Information		
Business Name:		Taxpayer ID #:
Applicants Name:	Social Security #:	Date of Birth:
Mailing Address:	City & State:	Zip Code:
Physical Address:		
Telephone Number(s):		

Business Entity Information		
Mailing Address:	City & State:	Zip Code:
Physical Address:		
Nature of Business:		
Business Year End Date:		
Legal Relationship:	<input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole-Proprietorship <input type="checkbox"/> Other	If Other Please list:
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 Though What Date:	Are any Returns Being Contested or Audited? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Name of Accountant or Accounting Firm:	Have you ever filed Bankruptcy in the last 10 years? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Names of Persons Authorized to Borrow Money on Behalf of and in the Name of the Applicant:		
Checking Account(s) #:	Institution(s):	
Savings Account(s) # :	Institution(s):	

Loan Request	
Amount Requested:	Term Requested:
Purpose of Loan:	Payment Date:

This information and the information provide 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 Creditor's credit experience with Applicant(s). Applicant(s) are aware that any knowing of willful false statements regarding the value of the property given 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 of this Application.

Signature Date

Signature Date

Signature Date

Signature Date