



# WESTERN COMMERCE BANK

## Business Loan Application

### **Eddy County**

127 S. Canyon St.  
Carlsbad, NM 88220  
Phone (575) 887-6686  
Fax (575) 885-0529

### **Lea County**

2224 North Turner  
Hobbs, NM 88240  
Phone (575) 397-3281  
Fax (575) 393-2399

### **Bernalillo County**

1910 Wyoming Blvd. NE  
Albuquerque, NM 87112  
Phone (505) 271-9964  
Fax (505) 271-9879

**Corporate Mailing Address**  
**WESTERN COMMERCE BANK**  
**PO Box 1358**  
**Carlsbad, NM 88221-1358**

Thank you for choosing Western Commerce Bank to meet your financial goals. Our Commercial Lending team specializes in meeting the financial needs of small businesses and their owners. Through a variety of financial solutions, our goal is to help your business grow.

In order for us to consider your loan request and to allow us to analyze and structure a loan according to your needs, we will need the following:

1. **Loan Request Form**
2. **Applicants Information Sheet**
3. **Copy of 2 forms of identification for each individual.** Examples: Picture ID, driver's license, or Passport and social security card.
4. **Personal Financial Statement** – Complete/signed on all owners, corporate officers, Guarantors, and stockholders with 20% or more total stock issued (copy form as needed)
5. **Personal History Statement** – Complete on all individuals referred to in #2 above, management and directors (copy form as needed)
6. **Personal Tax Returns** – previous 3-years signed and dated
7. **Provide Resume** – with detailed job descriptions on all individuals referred to in #'s 2 and 3.
8. **Borrower's Credit Report Authorization** – on all individuals referred to in #'s 2 and 3. (copy form as needed)
9. **History of the business & Reference List**
10. **2 Year's Forecasted Earnings** (form enclosed)
11. **Business Plan, including projections of Income & Finances**
12. **Notes Payable Schedule** – The figures in the Balance Due column of the schedule should coincide with note balances in the Interim Business Financial Statements.
13. **Subsidiaries and Affiliates Listing** - include names, addresses, concerns in which the applicant holds a controlling (but not necessarily a majority) interest and other concerns that may be affiliated by stock ownership, franchise, and proposed merger or otherwise with the applicant, if applicable.
14. **Organizational Documents** – Including Borrowing Authority and Meeting Minutes
  - a. Corporation: Articles of Incorporation and By-Laws
  - b. Limited Liability Company – Articles of Organization and Operating Agreement
  - c. Limited Liability Partnership – Articles of Agreement and Operating Agreement
15. **Interim Business Financial Statement** dated within 60 days.
16. **Business Income Statements** - Balance sheets & Profit & Loss Statements for 3 prior fiscal year-ends and complete tax returns with all appropriate schedules
17. **Business Tax Returns** – previous 3-years, signed and dated

18. **Insurance** (provide copies of insurance policies)
  - a. Flood Insurance Policy (if applicable)
  - b. Property & Casualty
  - c. Commercial General Liability
  - d. Automobile Liability
  - e. Life Insurance Policy
  - f. Or any other that may apply
  
19. **Copy of Business License,**( any that apply to your business)
  
20. **Purchase Agreement** (If Business Acquisition).
  - a. Current Balance Sheet and Profit and Loss Statement of business to be purchased
  - b. Previous 2-years Federal Income Tax Returns of the business to be purchased
  - c. Proposed Bill of Sale, including terms of sale
  - d. Asking price with detailed schedule of value assigned for:
    - aa. Inventory
    - bb. Machinery and Equipment
    - cc. Furniture and Fixtures
    - dd. Other
  
21. **Uniform Franchise Offering Circular** (if applicable).
  
22. **Executed Franchise Agreement or Letter of Approval from Franchisor** (if applicable).
  
23. **Copy of Business Lease or letter from landlord giving terms of proposed lease**
  
24. Are any officers or principals owning 20% or more of the business involved in any pending lawsuits? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes. Please provide details.
  
25. Have any officers of principals owning 20% or more of the company ever been involved in bankruptcy or insolvency proceedings? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please provide details.
  
26. Retirement Plan: Yes \_\_\_\_\_ No \_\_\_\_\_; Previous SBA Financing: Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please provide details.

# Loan Request Form



Western Commerce Bank

## APPLICANT COMPANY

Company Name \_\_\_\_\_ Telephone \_\_\_\_\_  
 Day-to-Day Manager \_\_\_\_\_ Telephone \_\_\_\_\_  
 Complete Address \_\_\_\_\_  
 Name of Franchise \_\_\_\_\_ Name of Franchise Representative \_\_\_\_\_  
 Type of Entity:  Corporation  Partnership  Limited Liability Company  Sole Proprietorship  
 Date Established \_\_\_\_\_ Number of Employees: Existing \_\_\_\_\_ After this Loan \_\_\_\_\_  
 Tax ID: \_\_\_\_\_ SSN: \_\_\_\_\_  
 Accountant's Name \_\_\_\_\_ Telephone \_\_\_\_\_  
**Insurance Carrier:** \_\_\_\_\_ Telephone \_\_\_\_\_  
 Life Insurance Carrier \_\_\_\_\_ Life Insurance Policy Amount \$ \_\_\_\_\_

## EXISTING BUSINESSES:

	Gross Receipts	Net Income
2010	\$ _____	\$ _____
2011	\$ _____	\$ _____
2012	\$ _____	\$ _____
2013 YTD	\$ _____	\$ _____

## OWNERSHIP OF APPLICANT COMPANY

List below all **owners and/or managers** titles and percentage (%) of ownership. Managers to be listed even if no ownership percentage in the business. Use separate sheet if more than 4.

NAME	TITLE	% OF OWNERSHIP
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

## AFFILIATES

List below **all** business concerns in which the Applicant Company or **any** of the individuals listed in the ownership section above have any ownership. Use separate sheet if more than 4.

COMPANY NAME	OWNER (APPLICANT COMPANY OR INDIVIDUALS)	% OF OWNERSHIP
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

## ESTIMATED PROJECT COSTS

*Purchase Land	\$ _____
*Purchase Land & Improvements	\$ _____
*Purchase Improvements	\$ _____
*Construct a Building	\$ _____
*Add an Addition to a Building	\$ _____
*Make Renovations to a Building	\$ _____
*Pay Off Interim Construction Loan	\$ _____
*Pay Off Lender's Interim Loan	\$ _____
*Make Leasehold Improvements to a Building	\$ _____
Purchase machinery/equipment	\$ _____
Purchase Fixtures	\$ _____
Purchase Inventory	\$ _____
Pay Trade or Accounts Payable	\$ _____
Pay Notes Payable	\$ _____
Pay Outstanding Debt	\$ _____
Purchase a Business	\$ _____
Purchase all Outstanding Stock	\$ _____
Pay SBA Loan	\$ _____
Working Capital	\$ _____
Franchise Fee	\$ _____
Closing Costs (Approximately 3-5% of Loan Amount)	\$ _____
<b>TOTAL PROJECT AMOUNT</b>	<b>\$ _____</b>
<b>LESS CASH/EQUITY TO BE INJECTED BY APPLICANT</b>	<b>[\$ _____]</b>
<b>TOTAL LOAN REQUESTED FOR PROJECT</b>	<b>\$ _____</b>

**\*Must include water/sewer source information**

**GENERAL BUSINESS DISCLOSURES  
CREDIT REPORT AUTHORIZATION**

I/We hereby authorize Western Commerce Bank to check my/our personal credit and employment history and/or have a credit-reporting agency prepare a credit report on me/us.

I/We also acknowledge that Western Commerce Bank will verify the creditworthiness of the Business Entity, if any, associated with this loan request, as well as any payoffs that be deemed necessary for this loan request.

Signature: \_\_\_\_\_  
Social Security # \_\_\_\_\_  
Physical Address \_\_\_\_\_  
Driver's License # \_\_\_\_\_ State \_\_\_\_\_  
DOB \_\_\_\_\_

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

Signature: \_\_\_\_\_  
Social Security # \_\_\_\_\_  
Physical Address \_\_\_\_\_  
Driver's License # \_\_\_\_\_ State \_\_\_\_\_  
DOB \_\_\_\_\_

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

Signature: \_\_\_\_\_  
Social Security # \_\_\_\_\_  
Physical Address \_\_\_\_\_  
Driver's License # \_\_\_\_\_ State \_\_\_\_\_  
DOB \_\_\_\_\_

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

Signature: \_\_\_\_\_  
Social Security # \_\_\_\_\_  
Physical Address \_\_\_\_\_  
Driver's License # \_\_\_\_\_ State \_\_\_\_\_

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

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**FINANCING STATEMENT AUTHENTICATION**

I/We, "Debtor", hereby authorize Western Commerce Bank, "Secured Party", to file a Financing Statement covering Debtor's Property to be pledged as collateral for this loan request. Debtor will comply with, facilitate, and otherwise assist Secured Party in connection with obtaining possession or control over the Property for purposes of perfecting Secured Party's interest under the Uniform Commercial Code.

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

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

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

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

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

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

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

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

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**ACKNOWLEDGEMENT OF NEW MEXICO LAW CONCERNING WRITTEN AGREEMENTS**

I/We hereby acknowledge that I/We are aware that New Mexico Law (Laws 1990, Chapter 45, Section 1) provides:

A contract, promise or commitment to loan money or grant, extend or renew credit or any modification thereof, in an amount greater than twenty-five thousand dollars (\$25,000.00), not primarily for personal, family or household purposes, made by a financial institution shall not be enforceable unless in writing and signed by the party to be charged or that party's authorized representative.

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

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

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

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

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

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

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

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

**MANAGEMENT RESUME**

Please fill in all spaces. If an item is not applicable, please indicate as such. You may include additional relevant information on a separate exhibit. SIGN/DATE where indicated.

**PERSONAL INFORMATION:**

NAME		SS#	
DATE OF BIRTH		PLACE OF BIRTH	
RESIDENCE TELEPHONE		BUSINESS TELEPHONE	
RESIDENCE ADDRESS			
FROM		TO	
PREVIOUS ADDRESS			
FROM		TO	
SPOUSE'S NAME		SS#	
ARE YOU EMPLOYED BY THE US GOVERNMENT?		AGENCY/POSITION	
ARE YOU A CITIZEN:		IF NO, GIVE ALIEN REGISTRATION #	

**EDUCATION:**

High School./College/Technical-Name/Location	Dates Attended	Major	Degree/Certificate

**MILITARY SERVICE BACKGROUND:**

Branch Of Service	Dates of Service
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**WORK EXPERIENCE: List chronologically beginning with present employment.**

Company Name/Location							
From		To		Title			
Duties							
Company Name/Location							
From		To		Title			
Duties							
Company Name/Location							
From		To		Title			
Duties							

Signature	Date

