commercialbanking@stmarysbank.com | www.stmarysbank.com

Legal Name of Applicant			Doing Business As (DBA) Name, if any		
Physical Street Address (no PO B	oxes)	City	State	Zip Code	
Business Entity Type: 🔲 Corpora	tion 🔲 LLC 🔲 Sole Prop	orietorship 🔲 Partnersl	nip 🔲 Not for Profit 🔲 Ind	ividual 🔲 Other	
Tax ID# Date Established		Primary Inc	Primary Industry		
Number of Employees Gross Sales/Revenue		/Revenues (last fiscal ye	s (last fiscal year)		
Phone#	_ Email	Web	site		
CO-APPLICANT (if applicab	le)				
Legal Name of Co-Applicant		Doing Bu	siness As (DBA) Name, if a	ny	
Physical Street Address (no PO B	loxes)	City	State	Zip Code	
LOAN REQUEST 1					
Amount	Loan Type:	☐ Line of Credit	☐ Term Loan ☐ Co	ommercial Mortgage	
Desired Term		☐ Construction Loan	☐ Letter of Credit ☐ O	ther	
Purpose of Loan					
Description of Collateral (if Real E	state, include physical ac	ldress)	Estimated Valu	e of Collateral	
Collateral Type:	☐ Mixed-Use ☐ 1-4 U	nit Residential 🔲 5+			
LOAN REQUEST 2					
Amount	Loan Type:	☐ Line of Credit	☐ Term Loan ☐ Co	ommercial Mortgage	
Desired Term		☐ Construction Loan	☐ Letter of Credit ☐ O	ther	
Purpose of Loan					
Description of Collateral (if Real Estate, include physical address)		ldress)	Estimated Value	e of Collateral	
Collateral Type: Business Ass	sets 🔲 Equipment 🗆	Real Estate	sle		
If Real Estate:	• •				
Occupancy Status: 🔲 Owner O	ccupied 🔲 Non Owner	Occupied			

BOOMLESS OWNE	ERS AND GUARANTORS	(All owners. List additional principals on	separate sne	et)
Name (First, Middle Initia	al, Last)	Social Security# / ITIN	Date of	Birth (MM/DD/YYYY)
Physical Street Address	(no PO Boxes)	City	State	Zip Code
Phone#	Email	Title		Ownership %
Name (First, Middle Initia	al, Last)	Social Security# / ITIN	Date of	Birth (MM/DD/YYYY)
Physical Street Address	(no PO Boxes)	City	State	Zip Code
Phone#	Email			Ownership %
Name (First, Middle Initia	al, Last)	Social Security# / ITIN	Date of	Birth (MM/DD/YYYY)
Physical Street Address	(no PO Boxes)	City	State	Zip Code
Phone#	Email			Ownership %
BANKING RELAT	IONSHIP AND ACCOUNT	TRELATIONSHIP		
Financial Ins	titution	Account Type		Balance
1				
		ess or partnership, or any guarantors be nis application.	en involved i	n a bankruptcy?
2. Is business involved in YES NO	n any lawsuit or pending litigation	n? If yes, please provide the details as a	n attachment	to this application.
3. Are all of your busines YES NO	ss tax obligations current? If no, p	please provide the details as an attachm	nent to this ap	pplication.
ACKNOWLEDGM	ENTS			
application fee which inc		nection with your application for a mort raisal, you will receive a copy of the repo ed and read this notice.		if you have paid an
Initials Init				
If applying for joint credit		ify that we intend to apply for joint cred	it with respec	et to the credit application

FINANCIAL INFORMATION

Please include with this application the last three years of your business financial statements, tax returns, accounts receivable aging, inventory listings, equipment listings, accounts payable aging, projections, and any other information you have to support your loan request. If you have prepared a recent business plan, include a copy with this application. If your company is new, please provide an opening balance sheet and two years earning projections for the loan being requested.

The undersigned hereby declares and represent that all statements made in this application and in supporting documentation are complete and true, that all financial and credit information has been given as an inducement to St. Mary's Bank to grant the loan for which this application is made. The undersigned authorize St. Mary's Bank, or its agent, to verify all information given and to make such additional normal inquiries as reasonably may be related to or associated with the application, from credit bureaus, employers, creditors, and references listed on this application and the supporting documentation, and authorize St. Mary's Bank to give such information to others.

APF	PLICANT:		
RV·			
DI	Applicant Signature	Print Name	
	Title	Date	
CO.	-APPLICANT:		
BY:			
	Co-Applicant Signature	Print Name	
	Title	Date	
GU	ARANTORS:		
BY:	Guarantor Signature	Print Name	Date
RV.			
D1	Guarantor Signature	Print Name	Date
BY:			
	Guarantor Signature	Print Name	Date

If the applicant is an individual and the requested loan will be secured by a residential-use property, this section must be completed.

DATA COLLECTION FORM DEMOGRAPHIC INFORMATION OF APPLICANT AND CO-APPLICANT

The purpose of collecting this information is to help ensure that all applicants are treated fairly and that the housing needs of communities and neighborhoods are being fulfilled. For residential mortgage lending, Federal law requires that we ask applicants for their demographic information (ethnicity, race, and sex) in order to monitor our compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to provide this information, but are encouraged to do so. You may select one or more designations for "Ethnicity"

and one or more designations for "Race."

CO-APPLICANT:

The law provides that we may not discriminate on the basis of this information, or on whether you choose to provide it. However, if you choose not to provide the information and you have made this application in person, Federal regulations require us to note your ethnicity, race, and sex on the basis of visual observation or surname. If you do not wish to provide some or all of this information, please check below.

APPLICANT:

ETHNICITY: (Check one or more) ☐ Hispanic or Latino ☐ Mexican ☐ Puerto Rican ☐ Cuban ☐ Other Hispanic or Latino—Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on:	ETHNICITY: (Check one or more) ☐ Hispanic or Latino ☐ Mexican ☐ Puerto Rican ☐ Cuban ☐ Other Hispanic or Latino—Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on:		
☐ Not Hispanic or Latino ☐ I do not wish to provide this information	☐ Not Hispanic or Latino ☐ I do not wish to provide this information		
RACE: (Check one or more) ☐ American Indian or Alaska Native—Print name of enrolled or principal tribe: ☐ Asian ☐ Asian Indian ☐ Chinese ☐ Filipino ☐ Japanese ☐ Korean ☐ Vietnamese ☐ Other Asian—Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on:	RACE: (Check one or more) American Indian or Alaska Native—Print name of enrolled or principal tribe: Asian Asian Indian Chinese Filipino Japanese Korean Vietnamese Other Asian—Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on:		
□ Black or African American □ Native Hawaiian or Other Pacific Islander □ Native Hawaiian □ Guamanian or Chamorro □ Samoan □ Other Pacific Islander – Print race, for example, Fijian, Tongan, and so on: □ White □ I do not wish to provide this information	□ Black or African American □ Native Hawaiian or Other Pacific Islande □ Native Hawaiian □ Guamanian or Chamorro □ Samoan □ Other Pacific Islander – Print race, for example, Fijian, Tongan, and so on: □ White □ I do not wish to provide this information		
SEX: ☐ Female ☐ Male ☐ I do not wish to provide this information	SEX: ☐ Female ☐ Male ☐ I do not wish to provide this information		
To Be Completed by Financial Institution (for application taken in person): Was the ethnicity of the applicant collected on the basis of visual observation or surname? ☐ Yes ☐ No	To Be Completed by Financial Institution (for application taken in person): Was the ethnicity of the applicant collected on the basis of visual observation or surname? Yes No		
Was the race of the applicant collected on the basis of visual observation or surname? ☐ Yes ☐ No	Was the race of the applicant collected on the basis of visual observatio or surname? $\ \square$ Yes $\ \square$ No		
Was the sex of the applicant collected on the basis of visual observation or surname? ☐ Yes ☐ No	Was the sex of the applicant collected on the basis of visual observation or surname? ☐ Yes ☐ No		