

3777 West Road, PO Box 1208 East Lansing, MI 48826 - 1208 Phone: 517-333-2424 Option 5 Fax: 517-664-4865

Section 1 - Business Information										
Applicant company/Company legal name DBA (if a							applica	ble)		
Phone	Fax					Website				
Company street addres	City					State		ZIP		
Company mailing addr	City					State		ZIP		
Principal address (if not listed above)			City							ZIP
Do you own or lease this space/building?			☐ Own ☐ Lease ☐ Not applicable				plicable	Monthly payment		
Federal Tax ID Number			NAICS code					Number of employees		
Business Structure	□ Sole	vidual(s) proprietorsh eral partners	•	□ Limi	ted lia	artnershi ability pa ability co	rtnership	[□ S coi	rporation rporation corporated association
State of organization	County				Date	compar	ny founded	ı	Date of	current ownership
Section 2 - Primar	y Cont	act								
Name						Email	□ Check	if preferre	d metho	d
Office phone Che		Mobile phone ☐ Check if pi			if prefer	red method				
Section 3 - Compa	any Ow	nership								
List below all owners, p	oartners,	limited liabili	ity compa	ıny (LLC) n	nemb	ers, and	stockholde	rs totalir	ng 100%	% of ownership.
Name			Address				Ownership %		9	Social Security Number
							%			
								%		
								%		
								%		
								%	,	
								%	,	
Section 4 - Profess	sional S	ervices								
Accounting firm				Contact name					Pl	hone
Law firm				Contact name					Pl	hone
Insurance agency				Contact name					Pl	hone

Section 5 - Credit Requested	d							
Funds needed	\$_			Term of lo	an requested	Loan	Loan type	
Less funds provided by you	Less funds provided by you -\$							
Less funds provided by others	-\$_			HOW WIII t	How will the funds be used?			
Total loan needed	\$_					_		
Section 6 - Schedule of Busi	iness					ddition	al sheet if necessary.	
Original amount		Current balance			Monthly payment	% Rate ☐ Fixed ☐ Variable		
Lender		Loan number			Original date		Maturity date	
Collateral					1			
Original amount		Current balance			Monthly payment		% Rate ☐ Fixed ☐ Variable	
Lender		Loan numbe	er		Original date		Maturity date	
Collateral								
Original amount		Current balance			Monthly payment		% Rate ☐ Fixed ☐ Variable	
Lender		Loan number			Original date		Maturity date	
Collateral								
Section 7 - Collateral Offere	d by	Applicant			Use ac	ddition	al sheet if necessary.	
Description		Value	Tota	al Liens	Ownership Status for Applicant		Creditor Name	
	\$		\$		☐ Purchase money☐ Presently owned			
	\$		\$		☐ Purchase money ☐ Presently owned			
	\$		\$		☐ Purchase money☐ Presently owned			
	\$		\$		☐ Purchase money☐ Presently owned			
	\$		\$		☐ Purchase money☐ Presently owned			
Section 8 - Other Information	on		<u>'</u>					
Have you ever filed for bankruptcy or so If yes, explain:	ettled a	iny debts for les	ss than am	ount owed?		□ Yes	□ No	
Have you filed federal income tax returns for the most recent year?								
Have you filed federal income tax return	ns for t	he most recent	year?			☐ Yes	□ No	
Have you filed federal income tax return Have you paid all related taxes?	ns for t	he most recent	year?			☐ Yes		
			year?				□ No	

S	ection 9 - Business Description
1.	Nature of business
2.	Business history (management history, management structure, key personnel, major accomplishments, etc.)
	, (g,,,,,,,,,,
3.	Explain company's target market and the types of products/services offered
4.	Future plans for growth/expansion
5.	Other

Applicant Signatures

I/We hereby apply for the loan or credit described in this application on behalf of the applicant business. I/We certify that I/we made no misrepresentation in this loan application or in any related documents (including federal income tax returns), that all information is true and complete, and that I/we did not omit any important information. I/We agree that any property securing the loan or credit will not be used for any illegal or restricted purpose. MSUFCU is authorized to verify with other parties and to make any investigation of my/our credit, either directly or through any agency employed by MSUFCU for that purpose. MSUFCU may disclose to any other interested parties information as to MSUFCU's experiences or transactions with my/our account. I/We understand that MSUFCU will retain this application and any other credit information MSUFCU receives, even if no loan or credit is granted. These representations and authorizations extend to MSUFCU, any insurer of the loan, and any investor to whom MSUFCU may sell all or part of the loan. I/We further authorize MSUFCU to provide any such insurer or investor any information and documentation it may request with respect to my/our application, credit, or loan.

Print name Title / Position	Signature	Date
Print name		Date
Print name Title / Position		Date
Print name Title / Position	-	Date
Print name Title / Position	Signature	Date

