



P.O. Box 60131
 New Orleans, Louisiana 70160-0131
 www.libertybank.net

BUSINESS LOAN APPLICATION

Financial Documents Checklist

Please Provide the following information for loan requests where the total commercial relationship with Liberty does not exceed \$100,000:

1. Personal tax return for the last 2 years
2. Current personal financial statement
3. Business tax return and financial statement for the last 2 years
4. Interim business financial statement (required when application is submitted more than four months after fiscal year end)

For the loan requests where the total commercial loan relationship with Liberty is greater than \$100,000:

1. Personal tax return for the last 3 years
2. Current personal financial statement
3. Business tax return and financial statement for the last 3 years
4. Interim business financial statement (required when application is submitted more than four months after fiscal year end)

Credit Request Profile

Amount of Loan Request:	Loan Purpose/Use of Proceeds: <input type="checkbox"/> Working Capital <input type="checkbox"/> Inventory Purchases <input type="checkbox"/> Accounts Receivable	<input type="checkbox"/> Residential Rental Property Financing <input type="checkbox"/> Commercial Real Estate Financing <input type="checkbox"/> Equipment Financing <input type="checkbox"/> Improvements/Expansion	<input type="checkbox"/> Business Vehicle Purchases <input type="checkbox"/> Refinancing Debt <input type="checkbox"/> Miscellaneous
Payment Options: <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Send Bill If Automatic Payment, indicate Liberty Bank business checking account number:	Overdraft Protection? <input type="checkbox"/> Yes <input type="checkbox"/> No If Overdraft Protection, indicate Liberty Bank business checking account number(s):		

Business Profile

Legal Name (under which tax returns are filed):	Business Phone: ()	Federal Tax ID:
Company (or DBA) Name:	Business Address: Street	City State Zip
Date Established (MM/YY):	Current Owner Since (MM/YY):	Mailing Address: Street City State Zip
Ownership Structure: <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> C Corporation	<input type="checkbox"/> S Corporation <input type="checkbox"/> General Partnership	<input type="checkbox"/> Limited Partnership <input type="checkbox"/> Non Profit <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Other _____
Nature of Business: In the space provided below, please provide a description of your Business. Attach product or service literature as necessary. Description:	Check one: <input type="checkbox"/> Retail <input type="checkbox"/> Wholesale <input type="checkbox"/> Manufacturing <input type="checkbox"/> Service	

Financial Profile

Business Accounting Firm:	Business Attorney:	Primary Bank:					
Do you currently have a business checking account with Liberty? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Contact to Open If yes, what is the current balance in your Liberty Business checking account(s):	Other Bank: Current balance in your other business checking account(s):	Annual Revenues of Business:					
Please list below all business debt and corresponding payment information.							
Creditor	Balance	Term or Line	Payment Amt.	Frequency	Interest Rate	Maturity	Collateral
Questions	Yes	No	Yes	No			
1. Does the business owe any taxes from prior years? If Yes, how much? \$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. Is the business a party to any claim or lawsuit?	<input type="checkbox"/>	<input type="checkbox"/>
2. Is the business an endorser, guarantor or co-maker for obligations not listed on its financial statement? If Yes, how much \$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Are there any delinquent FICA or sales taxes?	<input type="checkbox"/>	<input type="checkbox"/>
					5. Has the business ever declared bankruptcy?	<input type="checkbox"/>	<input type="checkbox"/>
					6. Have any principals ever declared bankruptcy?	<input type="checkbox"/>	<input type="checkbox"/>
					7. Are you applying for credit from another source? If Yes, From where _____	<input type="checkbox"/>	<input type="checkbox"/>

Owner Profile

Please list the following information on each owner of the company (Attach separate schedule if necessary)

Individual's Legal Name:	Social Security No.:	Percentage of Ownership:	Title:
Home Address (Street, City, State and Zip):	Personal Net Worth Excluding Business Value:		
Individual's Legal Name:	Social Security No.:	Percentage of Ownership:	Title:
Home Address (Street, City, State and Zip):	Personal Net Worth Excluding Business Value:		
Individual's Legal Name:	Social Security No.:	Percentage of Ownership:	Title:
Home Address (Street, City, State and Zip):	Personal Net Worth Excluding Business Value:		

Agreement

Signer(s) certifies that he/she is authorized to execute this Application on behalf of the business named above, and that all information provided, including federal income tax returns, is complete, true and correct. Signer(s) authorizes Bank to obtain personal, consumer, and/or business credit reports, including inquiries to the Internal Revenue Service, in their names as individuals at any time. If the business is a corporation, partnership, or a limited liability company, all owners/principals/members must sign and include their title.

1. Signature	Title	Date
2. Signature	Title	Date
3. Signature	Title	Date