

## MEMBER BUSINESS LOAN APPLICATION

TYPE OF MEMBER BUSINESS LOAN						
<input type="checkbox"/> Term Loan	<input type="checkbox"/> USDA B&I	<input type="checkbox"/> SBA	Membership Number			
<input type="checkbox"/> Line of Credit	<input type="checkbox"/> GEDA	<input type="checkbox"/> Other _____				
TELL US ABOUT YOUR LOAN REQUEST						
Loan Amount Requested:		Purpose of Loan (describe)				
\$ _____		_____				
Terms Desired: _____		_____				
COLLATERAL TO BE USED AS SECURITY FOR THIS LOAN						
Collateral Description						
Applicant has legal rights to provide a security interest in the Collateral ?			Does the Collateral have a security lien against it ?			
<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No			
TELL US WHO IS YOUR BUSINESS CONTACT REPRESENTATIVE						
Contact Representative Name				Contact Title		
Best Phone Contact Number			Email Address			
TELL US ABOUT YOUR BUSINESS						
Legal Name of Business ("Applicant")				EIN or SSN		
DBA Name			Type of Business / Industry			
Mailing Address (Street, City, State, Zip)						
Business Address (Street, City, State, Zip), if different from Mailing Address.						
Business Structure (check one)						
<input type="checkbox"/> Sole Proprietorship		<input type="checkbox"/> Limited Liability Company		<input type="checkbox"/> Corporation		
<input type="checkbox"/> General Partnership		<input type="checkbox"/> Limited Partnership		<input type="checkbox"/> Other _____		
Annual Gross Sales / Revenues		Business Established	Years you Owned Business	No. of Employees	Business Phone	
\$ _____		Month: _____ Year: _____	Month: _____ Year: _____	_____	_____	
TELL US ABOUT YOUR BUSINESS BANKING RELATIONSHIPS (Attached a separate sheet, if necessary)						
Business Deposit Account(s)						
Name of Financial Institution		Account or service Type		Balance		
Business Loan(s)						
Name of Lender	Type of Loan	Original Amount	Balance Owing	Interest Rate	Monthly Payment	Maturity Date
DOCUMENTS REQUIRED WITH YOUR APPLICATION (Attach a copy of the following Business documents, where applicable.)						
<input type="checkbox"/> Current Business License		<b>Sole Proprietors</b>				
<input type="checkbox"/> Articles of Incorporation		<input type="checkbox"/> <u>Personal Tax Returns</u> - Last two years' Guam Income Tax Returns, including all schedules.				
<input type="checkbox"/> Bylaws		<b>Corporations, Partnerships, Limited Liability Companies</b>				
<input type="checkbox"/> Partnership Agreement		<input type="checkbox"/> <u>Business Financial Records</u> - Financial statements and filed Guam Income Tax Returns, including all applicable schedules for the last two years'.				
<input type="checkbox"/> Operating Agreement		<u>Personal Tax Returns</u> - Last two years' Guam Income Tax Returns, including all applicable schedules,				
<input type="checkbox"/> Corporate Resolution		of the owner(s), general partner(s), and/or principal officer(s).				
TELL US ABOUT THE PRINCIPAL APPLICANT						
<i>All owners and percentage of ownership must be listed and complete a Personal Financial Statement. Attach a separate sheet, if necessary.</i>						
Name (first, middle initial, last)			Your Title			
Home Phone		Cell Phone	Social Security Number		Date of Birth	
Residence Street Address				<input type="checkbox"/> Own	Yrs. at this Address	
				<input type="checkbox"/> Rent		
Mailing Address (If different than Residence Street Address)						
Previous Address (If less than 2 Years at Home Address)						
Percentage of Business You Own		Business Phone		Email Address (If different from Applicant)		
Name of Employer (If different from Applicant)			Position/Title with Employer		Yrs. with Employer	
Monthly Income						
\$ _____	+ \$ _____	+ \$ _____	+ \$ _____	+ \$ _____	= \$ _____	Gross Monthly Income
Salary & Wages	Bonuses & Commissions	Dividends & Interest	Rentals	Other Income *		
*Alimony, child support, or separate maintenance income need not to be revealed if you do not wish to have it considered as a basis for repaying this obligation.						

Continued on Back

**TELL US ABOUT OTHER PRINCIPAL APPLICANTS**

*All owners and percentage of ownership must be listed and complete a Personal Financial Statement. Attach a separate sheet, if necessary.*

Name (first, middle initial, last)		Your Title	
Home Phone	Cell Phone	Social Security Number	Date of Birth
Residence Street Address			<input type="checkbox"/> Own <input type="checkbox"/> Rent
Yrs. at this Address			
Mailing Address (If different than Residence Street Address)			
Previous Address (If less than 2 Years at Home Address)			
Percentage of Business You Own	Business Phone	Email Address (If different from Applicant)	
Name of Employer (If different from Applicant)		Position/Title with Employer	Yrs. with Employer
Monthly Income			
\$ _____ + \$ _____ + \$ _____ + \$ _____ + \$ _____ = \$ _____ <small>Salary &amp; Wages      Bonuses &amp; Commissions      Dividends &amp; Interest      Rentals      Other Income *</small>			
*Alimony, child support, or separate maintenance income need not to be revealed if you do not wish to have it considered as a basis for repaying this obligation.			

**QUESTIONNAIRE**

A. Are there any outstanding judgements against the Applicant(s) ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
B. Has the Applicant(s) declared bankruptcy within the past ten years ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
C. Is the Applicant(s) a party to a lawsuit ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
D. Does the Applicant(s) have any unpaid local or federal tax liability ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
E. Has any officer or agent of Applicant been convicted of a felony criminal violation for actions taken on behalf of Applicant under local or federal law in the 24 months preceding the date of application ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT**

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means to you: when you open an account, we will ask you for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's licenses or other identifying documents.

**SIGNATURES**

Each person(s) signing this Application certifies that he/she is authorized to execute and deliver this Application set forth or referred to herein on his/her behalf and on behalf of the business named on this Application (the "Applicant"), and the application is for business credit only and not consumer credit, and all information and documents submitted are true, correct, and complete. The signer(s) authorizes Community First Guam Federal credit Union ("Credit Union") both now and in the future, to obtain consumer credit reports in his/her name(s) as individual(s), to obtain business credit reports on the Applicant, to make available to, and to obtain information relating to both the signer(s) and the Applicant's financial condition, and to provide credit bureaus and others with information about the Credit Union's experience with him/her name(s) and the Applicant. The Credit Union will retain this Application and any other credit information received, even if no loan or credit is granted.

These representations and authorizations extend not only to the Credit Union, but also to any insurer of the loan and to any investor to whom the Credit Union may sell all or any part of the loan. The signer(s) certify that he/she is 18 years of age or older. The signer(s) and the Business acknowledge that if additional information becomes available which would have influenced Credit Union's decision to approve this Application prior to the closing of the transaction, the Credit Union reserves the right to withdraw such approval. This application cannot be processed to a foreign address. The Business designates the authorized signer(s) to receive all communications from the Credit Union. The signer(s) fully understand that it is a federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements concerning any of the above facts on the application under the provisions of Title 18, United States Code, Section 1014.)

If the Credit Union approves this Application, The signer(s) and Applicant agrees to abide by all terms and conditions of all applicable agreements for the business credit requested and approved, including but not limited to the Promissory Note and the Creditline Agreement. Upon approval, a copy of each applicable agreement will be provided to the Applicant. The Applicant understands that for final approval, additional agreements may need to be signed. If this Application is for secured credit, the Applicant is for secured credit, the Applicant understands that it will need to take all steps required by the Credit Union for the Credit Union to obtain and perfect its security interest in the collateral, and to meet all conditions of the loan approval and/or conditions of the loan agreement(s) or promissory note(s)

<b>X</b> _____	<b>X</b> _____	<b>X</b> _____	<b>X</b> _____
Authorized Signature	Print Name	Title	Date
_____	_____	_____	_____
Authorized Signature	Print Name	Title	Date

**GUARANTY (All owner(s), members, and /or general partner(s) must complete.)**

*Attach a separate sheet, if necessary.*

To induce Community First Guam Federal Credit Union ("Credit Union") to enter into a Promissory Note with Applicant, the undersigned, jointly and severally, if there are more than one signer (the "Guarantor"), (i) unconditionally and irrevocably guarantee(s) payment and performance (not of collection) to Credit Union of any and all amounts owed to Community First Guam Federal Credit Union, including but not limited to all credit, advances, debts, obligations and liabilities of the Applicant to Credit Union, under any or all of the foregoing agreements, however arising, whether due or not due, absolute or contingent, liquidated or unliquidated (the "Indebtedness"), as well as any extensions, increases, modifications, or renewals of such Indebtedness, (ii) waives notice of acceptance, presentment, demand, protest, notice of nonperformance, and any other notice of any kind whatsoever with respect to the Indebtedness, and lack of promptness does not waive the making of any claim or demand hereunder, (iii) waives notice of the existence, creation or incurring of new or additional Indebtedness, (iv) waives notice of renewal, extension, acceleration, change of payment terms, change or release of security, or release or substitution of any one or more Guarantors, (v) waives any right to require Credit Union to proceed against Applicant or any other person or entity, proceed against or exhaust any security held by Applicant, or pursue any other remedy in Credit Union's power whatsoever, (vi) agrees there is no right of subrogation (unless all Indebtedness from Applicant to Credit Union has been paid in full), and waives any right to enforce any remedy which Credit Union now has or may hereafter have against Applicant or any other person or entity, and any benefit of, and any right to participate in, any security now or hereafter held by Credit Union, (vii) waives the benefit of any statute of limitation affecting liability hereunder or enforcement thereof, (viii) agrees that Credit Union shall have a lien upon and a right to setoff against all moneys, securities, and other property of Guarantor now or hereafter in the possession of or on deposit with the Credit Union, (ix) agrees any indebtedness now and hereafter held by Guarantor is hereby subordinated to the indebtedness of Applicant to Credit Union, and (x) agrees to pay all costs incurred by Credit Union in the enforcement of this Guaranty and/or in collecting any or all of the indebtedness, including reasonable attorney's fees. Guarantor hereby agrees that this is a continuing Guaranty relating to any indebtedness, including that arising under successive transactions which shall either continue the Indebtedness of from time to time renew it after it has been satisfied. If this Application is not approved, then this Guaranty shall have no force or effect.

Sign below to acknowledge personal liability on the account as described above.

<b>X</b> _____	<b>X</b> _____	<b>X</b> _____	<b>X</b> _____
Guarantor	Print Name		Date
_____	_____		_____
Guarantor	Print Name		Date

**FOR CREDIT UNION USE**