

Commercial Real Estate Loan Application

PART 1. APPLICANT INFORMATION

| Complete Legal Name: | | | SSN/EIN: | | | | |
|---|---------------------|---------------------------|----------------------------------|----------------|-------------|--|--|
| Organization Ty | pe (if applicable): | Sole Proprietor | Partnership | Corporation | OLLC or LLP | | |
| | | S Corp. | Non-Profit | Trust | | | |
| Applicant Street | t Address: | | | | | | |
| City: | | | State: | Zip: | | | |
| Subject Property Street Address: | | | | | | | |
| City: | | | State: | Zip: | | | |
| Subject Property APN (s): | | How will title be vested? | | | | | |
| Estimated Value of Property / Recent Appraised Value: \$ | | | | | | | |
| Date Purchased: Purchase Price: | | Ow | vner Occupied? | Yes No | | | |
| Primary Contact Name: | | | Phone Number: | | | | |
| Primary Contact | Email: | | | | | | |
| PART 2: LOAN INFORMATION | | | | | | | |
| Type of Loan: Purchase/Price: | | \$ | Construction/Tenant Improvements | | | | |
| | SBA 7(a) or SBA | A 504 Refinance | ce Refinanc | e/Cash Out: \$ | | | |
| Purpose of Cash Out: | | | | | | | |
| Requested Loan Maturity (months/years): Requested Amortization (months/years): | | | | | | | |
| PART 3: PROPERTY INFORMATION | | | | | | | |
| Office | Light Industrial | Multi-Family | Hospitali | ity Reta | il | | |
| Other: | | | | | | | |
| Building Size (sf | ·): Lo | t Size (sf): | Units/Tenants | : Year B | Built: | | |
| Additional Relevant Details: | | | | | | | |
| Property/Casualty Insurance Co: | | | | | | | |
| Name of Agent's Phone: | | | | | | | |
| Preferred Title Co. Name: Escrow Of | | | | | | | |
| Applications for construction or tenant improvement financing will require additional project and contractor information. An SCCCU Loan Officer will contact you to discuss this. Applications for SBA (7a) or SBA 504 loans are subject to eligibility requirements and additional information will be required. An SCCCU Loan Officer will contact you to discuss additional needs. | | | | | | | |



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PART 4. OWNERS OF BUSINESS

| Owner Name: | Title: | | | | | | |
|---|----------------|-------------------------------|--|--|--|--|--|
| Physical Address: | | | | | | | |
| Social Security No: | % Ownership: | Authorized Signer? Yes No | | | | | |
| Owner Name: | Title: | | | | | | |
| Physical Address: | | | | | | | |
| Social Security No: | % Ownership: | Authorized Signer? Yes No | | | | | |
| Owner Name: | Title: | | | | | | |
| Physical Address: | | | | | | | |
| Social Security No: | % Ownership: | Authorized Signer? Yes No | | | | | |
| PART 5: PLEASE ANSWER ALL QUESTIONS On behalf of all Applicants, Owners/Guarantors: | | | | | | | |
| Have you ever declared bankruptcy? Yes No | | | | | | | |
| Are you a party to any claim or lawsuit? Yes No | | | | | | | |
| Are you current with all employee withholding and/or income taxes, Federal and State? Yes No | | | | | | | |
| Are there or have there been any satisfied or unsatisfied judgements against you? Yes No | | | | | | | |
| Have you given a lender a deed in lieu of foreclosure or been involved in a loan default? Yes No | | | | | | | |
| Are any assets on financial statements pledged to secure indebtedness other than liabilities listed? Yes No | | | | | | | |
| Are any Owner/Guarantor assets held in personal trusts? Yes No | | | | | | | |
| | | | | | | | |
| PART 6: OTHER | | | | | | | |
| How were you referred? Branch: | Santa Cruz Soq | uel Watsonville Advertisement | | | | | |
| SCCCU Employee / Name: | | | | | | | |
| Auto Payment? | | | | | | | |
| Take Payment from SCCCU Account #: | | | | | | | |
| Take Payment from Other Institution Account #: | | | | | | | |



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PART 7: AFFIRMATION & SIGNATURE

I (we) hereby affirm that the foregoing information contained in this business loan application is presented for the purpose of obtaining credit as of the date indicated and is true, complete and correct. I understand that Santa Cruz Community Credit Union (SCCCU) is relying on this application in making loan(s) to me. SCCCU or its designee is authorized to make any investigation of the credit of the applicant(s), business owner(s) and/ or guarantor(s) either directly or through any agency employed by SCCCU for that purpose now and in the future. SCCCU may disclose to any other interested parties SCCCU's experience with this account. I agree to inform SCCCU immediately of any matter which will cause any material change to my financial condition. I understand that SCCCU will retain this business loan application whether or not the credit is granted.

If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact Santa Cruz Community Credit Union.

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal agency that administers compliance with this law concerning this creditor is: Federal Trade Commission, 400 7th St., SW Washington, DC 20024, Telephone: (202) 326-2222.

| Entity Name: | Entity Name: |
|----------------------|----------------------|
| By: | By: |
| Title: | Title: |
| Applicant Signature: | Applicant Signature: |
| Date: | Date: |