

# SBA Paycheck Protection Program



**IMPORTANT INFORMATION ABOUT OPENING A NEW ACCOUNT:** Federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. When you open an account, we will ask 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 license or other identifying documents. In some cases, we may use outside sources to confirm the information. When you open an account or apply for a new loan for a covered legal entity, we will be required to obtain information about the beneficial owners in regards to the legal entity. A beneficial owner is: (a) each individual who owns 25% or more of the entity and/or (b) one individual who has significant managerial responsibility for the entity. You will be required to provide the name(s), address(es), date(s) of birth and other identifying information for each beneficial owner.

**The information you provide will be kept confidential and secure.**

## BORROWING ENTITY INFORMATION

*Type of Entity:* (Check One)

<input type="checkbox"/> Association	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Sole Proprietorship
<input type="checkbox"/> Corporation	<input type="checkbox"/> Non-Profit	<input type="checkbox"/> Trust
<input type="checkbox"/> Individual <sup>2</sup>	<input type="checkbox"/> Partnership	

*Legal Name:* \_\_\_\_\_

*Tax Identification Number:* \_\_\_\_\_ *Year Established:* \_\_\_\_\_

*Street Address:* \_\_\_\_\_ *Mailing Address:* \_\_\_\_\_  
(No P.O. Boxes)

*City, State, Zip:* \_\_\_\_\_ *City State Zip:* \_\_\_\_\_

Check here if your street and mailing address are the same.

*Telephone Number:* \_\_\_\_\_ *Contact Name:* \_\_\_\_\_

*Purpose of Business:* \_\_\_\_\_

## GENERAL INFORMATION

<i>Name:</i>	<i>Name:</i>
<i>Address:</i>	<i>Address:</i>
<i>Date of Birth:</i>	<i>Date of Birth:</i>
<i>SSN/TIN:</i>	<i>SSN/TIN:</i>
<i>Telephone:</i>	<i>Telephone:</i>
<i>Email Address:</i>	<i>Email Address:</i>
<i>Identity Verification:</i>	<i>Identity Verification:</i>
<input type="checkbox"/> DL #: _____ <input type="checkbox"/> Passport #: _____ <input type="checkbox"/> Other: _____	<input type="checkbox"/> DL #: _____ <input type="checkbox"/> Passport #: _____ <input type="checkbox"/> Other: _____
<i>Issue Date:</i>	<i>Issue Date:</i>
<i>Expiration Date:</i>	<i>Expiration Date:</i>
<i>Issued By:</i>	<i>Issued By:</i>
<i>Mother's Maiden Name:</i>	<i>Mother's Maiden Name:</i>
<i>City of Birth:</i>	<i>City of Birth:</i>
<i>Employer:</i>	<i>Employer:</i>
<i>Occupation:</i>	<i>Occupation:</i>

<sup>1</sup> For individuals only, this is not applicable for business entities.  
 Reg. B limits creditors from requiring spousal signatures on loan documents and mandates documentation of applicants' intent to apply jointly on joint loans.  
<sup>2</sup> If marked, complete Primary Borrower information in the Borrower Information section.

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<i>Name:</i>	<i>Name:</i>
<i>Address:</i>	<i>Address:</i>
<i>Date of Birth:</i>	<i>Date of Birth:</i>
<i>SSN/TIN:</i>	<i>SSN/TIN:</i>
<i>Telephone:</i>	<i>Telephone:</i>
<i>Email Address:</i>	<i>Email Address:</i>
<i>Identity Verification:</i>	<i>Identity Verification:</i>
<input type="checkbox"/> DL #: _____ <input type="checkbox"/> Passport #: _____ <input type="checkbox"/> Other: _____	<input type="checkbox"/> DL #: _____ <input type="checkbox"/> Passport #: _____ <input type="checkbox"/> Other: _____
<i>Issue Date:</i>	<i>Issue Date:</i>
<i>Expiration Date:</i>	<i>Expiration Date:</i>
<i>Issued By:</i>	<i>Issued By:</i>
<i>Mother's Maiden Name:</i>	<i>Mother's Maiden Name:</i>
<i>City of Birth:</i>	<i>City of Birth:</i>
<i>Employer:</i>	<i>Employer:</i>
<i>Occupation:</i>	<i>Occupation:</i>

**BENEFICIAL OWNERSHIP INFORMATION – Legal Entity Name:** \_\_\_\_\_

**OWNERSHIP PRONG**

List all individuals who own, directly or indirectly, **25% or more** of the entity applying for this loan.

Name	Date of Birth	Address	SSN/TIN or Other	ID Type	ID Number	Place of Issuance	Issue Date	Expiration Date

**CONTROL PRONG**

List one individual with significant managerial control of the entity applying for this loan.

Name	Date of Birth	Address	SSN/TIN or Other	ID Type	ID Number	Place of Issuance	Issue Date	Expiration Date

**Title:** \_\_\_\_\_

**BENEFICIAL OWNERSHIP INFORMATION – Legal Entity Name:** \_\_\_\_\_

**OWNERSHIP PRONG**

List all individuals who own, directly or indirectly, **25% or more** of the entity applying for this loan.

Name	Date of Birth	Address	SSN/TIN or Other	ID Type	ID Number	Place of Issuance	Issue Date	Expiration Date

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Name	Date of Birth	Address	SSN/TIN or Other	ID Type	ID Number	Place of Issuance	Issue Date	Expiration Date

**Title:** \_\_\_\_\_

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## NOTICES AND DISCLOSURES

**Beneficial Ownership:** I/We certify to the best of my/our knowledge that the beneficial ownership information provided here is complete and current. I/We agree to notify the lender of any changes in beneficial ownership for as long as this extension of credit is outstanding.

**Credit Authorization:** I/We authorize the Bank (Lender) to obtain a consumer report, and to obtain and exchange information from and with other credit grantors and consumer reporting agencies. I/We authorize Lender to retain all information and reports for the Lender's files.

**Credit Denial Notice:** If your gross revenues were \$1,000,000 or less in your previous fiscal year, or you are requesting trade credit, a factoring agreement or similar types of business credit in this Agricultural | Commercial Loan Application, and if your application for credit is denied, you have the right to a written statement of the specific reasons for denial. To obtain this statement, please contact:

The Union Bank Company  
105 Progressive Drive  
Columbus Grove, OH 45830

Within 60 days of the date you were denied. We will send you a written statement of reasons for the denial within 30 days of receiving your request. The notice that follows describes additional protections extended to you.

**Equal Credit Opportunity Act:** 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 (providing the applicant has the legal capacity to enter into a binding contract), because all or part of the applicant's income is derived from any public assistance program or because the applicant, in good faith, has exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning the bank is:

FDIC Consumer Response Center  
1100 Walnut Street Box #11  
Kansas City, MO 64106

**No Guarantee of Financing Success:** All reasonable and customary expenses and fees related to this application (application/processing fees, appraisals, credit reports, etc.) shall be incurred directly by the borrower(s) and paid in a timely fashion, regardless of the final dispensation of the transaction.

**True and Correct:** I/We certify that all statements made in this application are true and correct and that I/we have withheld nothing that would, if disclosed, unfavorably affect this application. The furnishing of false information for the purpose of influencing the Lender's loan decision violate federal criminal laws and may subject the violator to fines, imprisonment or both.

## SIGNATURES

**SIGN HERE** **X**  
(Signature) \_\_\_\_\_  
(Printed Name) \_\_\_\_\_ (Application Date) \_\_\_\_\_

**SIGN HERE** **X**  
(Signature) \_\_\_\_\_  
(Printed Name) \_\_\_\_\_ (Application Date) \_\_\_\_\_

**SIGN HERE** **X**  
(Signature) \_\_\_\_\_  
(Printed Name) \_\_\_\_\_ (Application Date) \_\_\_\_\_