

504 LOAN APPLICATION

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			Project Information			
Property Address:						
Square Footage of Building:			Square Footage to be Occupied by	OC:		
Refinancing debt?	Yes	No	Purchasing current property?	Yes	No	
Moving to new property?	Yes	No	Expanding to additional location?	Yes	No	

Operating Company (OC)					
Business Name:					
DBA Name:		Co-Borrower?	Yes	No	
Industry:	Entity Type:				
Tax ID Number:	Date Established (mm/dd/yyyy):				
Mailing Address:					
Bus. Phone:	Website:				
Principal in Charge:	Cell:	Email:			
Secondary Contact:	Cell:	Email:			
Current Number of Employees	FT:	PT:			
Estimated Number of Employees in Two years	FT:	PT:			

Real Estate Holding Company (EPC)				
Business Name:				
Tax ID Number:	Date Established (mm/dd/yyyy):			
Mailing Address:				
Principal in Charge:	Cell:	Email:		
Secondary Contact:	Cell:	Email:		

Owners / Key Employees / Officers (regardless of ownership)				
Full Name	Title	Owner % (OC/EPC)	Guaranty?	
*A Key Employee is any person hired by the business	to manaae dav-to-dav o	perations	•	

Existing Locations				
Address 1:				
Replaced by new property?	Yes	No	Lease Payment:	Square Footage:
Address 2:				
Replaced by new property?	Yes	No	Lease Payment:	Square Footage:
Address 3:				
Replaced by new property?	Yes	No	Lease Payment:	Square Footage:
Address 4:				
Replaced by new property?	Yes	No	Lease Payment:	Square Footage:



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Affiliate Businesses (businesses that have more than the OC or it's individual owners. Attach separate list as		
Affiliate Business 1:		
Industry:	Entity Type:	
Tax ID Number:	Date Established (mm/dd/yyyy):	
Mailing Address:		
Owner 1 Name:	Title:	Ownership %:
Owner 2 Name:	Title:	Ownership %:
Owner 3 Name:	Title:	Ownership %:
Owner 4 Name:	Title:	Ownership %:
Affiliate Business 2:		
Industry:	Entity Type:	
Tax ID Number:	Date Established (mm/dd/yyyy):	
Mailing Address:		
Owner 1 Name:	Title:	Ownership %:
Owner 2 Name:	Title:	Ownership %:
Owner 3 Name:	Title:	Ownership %:
Owner 4 Name:	Title:	Ownership %:

Tenants to Lease a Portion of the Building					
Tenant Name	Square Footage	Rent Amount			

Miscellaneous Questions		
Has any owner, officer, or manager of the above businesses (not including tenants) ever been involved in bankruptcy or insolvency proceedings? If yes, please furnish details below or provide in a separate exhibit.	Yes	No
Is any owner, officer, or manager of the above businesses (not including tenants) involved in any pending lawsuits? If yes, please furnish details below or provide in a separate exhibit.	Yes	No
Does anyone who owns, manages, or directs your business, or their spouses or members of their households, work for the Small Business Administration, SCORE, ACE, or a Federal Agency? If yes, please provide their name, address, grade, and office where employed details below or provide in a separate exhibit.	Yes	No



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Has any owner, officer, or manager of the above businesses (not including tenants) ever been disbatrom doing business with the government?	erred Yes	No
Is any owner, officer, or manager of the above businesses (not including tenants) delinquent on chil support under the terms of (1) administrative order, (2) court order, or (3) repayment agreement requiring payment of child support? If yes, please furnish details below or provide in a separate exhibit.	ld Yes	No
Are all business and personal taxes current?	Yes	No
Do any of the businesses above (not including tenants) currently or plan to engage in Export Trade?	Yes	No
Does the business derive revenue from marijuana-related activities (direct) or does the business supthe end-use of marijuana affiliated business or a hemp business (indirect)?	pport Yes	No
Does the business intend to lease a portion of the real estate collateral to a marijuana related busin	ess? Yes	No
effective throughout the life of the loan. I/We further authorize NWBDA to release such information to any entity they deem necessary for a credit transaction with them, as well as my/our employee, accountant or representative, specifically, until revoked I/We hereby certify that the enclosed information, including any attachments or exhibits provided by valid and correct to the best of my/our knowledge. This application must be signed by each owner of 20% or more of the operating company and EPC	y named: d in writing. nere within or at a la	
Cionatura		
Signature: Name of Applicant:	Date	
Signature: Name of Applicant:	Date	
Signature: Name of Applicant:	Date	
Signature:		
Name of Applicant:	Date	
For Internal Office Use Only		

How was this application received? ___Online ___In Person ___Over the Phone ___Through the Mail