

COMMERCIAL LOAN APPLICATION

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 for 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 license or other identifying documents.

I. BUSINESS PR	OFILE								
LEGAL BUSINESS NAME / BORROWING ENTITY				BUSINESS TAX I.D. NUMBER					
DOING BUSINESS AS (DBA) NAME, IF ANY				EMAIL ADDRESS					
BUSINESS ADDRESS		CITY, STATE	E, ZIP	BUSINESS PHONE N	BUSINESS PHONE NUMBER			BUSINESS FAX NUMBER	
BUSINESS STRUCTURE (PI									
Limited Liability Partnership Limited Liability Company Sole Pro				Partnership Limited Partnership prietorship Not For Profit Individual					
NATURE OF BUSINESS				YEAR BUSINESS EST	r	CURRENT	OWNER SINCE	NUMBER OF EMPLOYEES	
DOES THE BUSINESS OWI	LEASE	T (NAME & PHONE)							
INSURANCE AGENT (NAM	ATTORNEY REFERENCE (NAME & PHONE)								
II. LOAN REQUE		hereby apply to B	CT for the follo	wing extension of commercial credit (Check all that apply)]					
DOLLAR AMOUNT OF LOAN				COLLATERAL				. VALUE OR PURCHASE CE	
\$				BUSINESS A					
PURPOSE RECEIVABLE GROWTH RECEIVABLE GROWTH REQUIPMENT PURCHASE				☐ MACHINERY AND/OR EQUIPMENT ☐ VEHICLES, TRUCKS, OR TRAILERS					
☐ INVENTORY PUR	<u> </u>	RENEWAL	10102	REAL ESTATE / COMMERCIAL PROP					
REAL ESTATE ACC	QUISITION/REFI	REFINANCE		REAL ESTATE / PERSONAL RESIDENCE					
☐ REAL ESTATE CO	NSTRUCTION	OTHER		MARKETABLE SECURITIES / CD / SAVINGS					
☐ VEHICLE PURCH	ACCOUNTS RECEIVABLE								
				INVENTORY					
TYPE OF CREDIT	OTHER LIST:								
BUSINESS LINE O	F CREDIT	MENT LOAN	☐ COMMERCIAL MORTGAGE ☐ LETTER OF CREDIT						
SOURCE OF REPAYMENT									
III. LIST OF ALL									
DESCRIPTION OF DEBT	ORIGINAL AMOUNT	CURRENT BALANCE	MONTHLY PAYME	ENT MATURITY DATE	CREDITO	CREDITOR NAME		COLLATERAL	
DESCRIPTION OF DEBT	ORIGINAL AMOUNT	CURRENT BALANCE	MONTHLY PAYME	ENT MATURITY DATE	CREDITO	OR NAME	COLLATERAL		
DESCRIPTION OF DEBT	ORIGINAL AMOUNT	CURRENT BALANCE	MONTHLY PAYME	ENT MATURITY DATE	CREDITO	DR NAME	COLLATERAL		
L									
IV. LIST OF ALL	BUSINESS' BAN	IK DEPOSIT ACC	COUNTS	V. BACKGR	OUND IN	FORMA	TION		
NAME OF BANK AND LOC		T ON DEPOSIT	Has your business ever filed for bankruptcy? If yes, what year?						
				Is your business	a party to an	•		YES No	
NAME OF BANK AND LOCATION AMOUNT ON DEPOSIT				Is your business in arrears or in dispute of any tax payment?					
				If the answer to any of these questions is "Yes", please provide an explanation on a separate sheet of paper.					

VI. OWNERS – List All					
OWNER / GUARANTOR NO. 1	OWNER / GUARANTOR NO. 2				
NAME	NAME				
TITLE / POSITION	TITLE / POSITION				
PCT. OF OWNERSHIP	PCT. OF OWNERSHIP				
HOME ADDRESS	HOME ADDRESS				
CITY, STATE, ZIP	CITY, STATE, ZIP				
PHONE NUMBER	PHONE NUMBER				
OWNER / GUARANTOR NO. 3 NAME	OWNER / GUARANTOR NO. 4 NAME				
TITLE / POSITION	TITLE / POSITION				
PCT. OF OWNERSHIP	PCT. OF OWNERSHIP				
HOME ADDRESS	HOME ADDRESS				
CITY, STATE, ZIP	CITY, STATE, ZIP				
PHONE NUMBER	PHONE NUMBER				
	,				
VII. BUSINESS LOAN APPLICATION CHECKLIST					
PERSO	ONAL FEDERAL TAX RETURNS FOR THE PAST THREE YEARS FOR EACH OWNER				
BUSINESS LOAN APPLICATION LISTER	D ABOVE				
BUSINESS FEDERAL TAX RETURNS FOR PAST THREE FISCAL PERSONAL FINANCIAL STATEMENT FOR EACH OWNER LISTED ABOVE YEARS					
☐ INTERIM FINANCIAL STATEMENTS (IF AVAILABLE) ☐ OTHE	:R				
BUSINESS ORGANIZATION PAPERS					
VIII. PLEASE READ					
APPRAISAL NOTICE: If the collateral which will secure this loan is a 1-4 family resi application for credit. If you wish to have a copy, please write to us at the following Charles Town, WV 25414. We must hear from you no later than ninety (90) days after you withdraw your application. Your written request materials for the copy. If you have not already paid for the appraisal, we may result the second sec	ng address: Bank of Charles Town, Commercial Loan Department, PO Box 906, after we notify you about the action taken on your credit application or no later nust contain: Applicant's name, property address, application date; and mailing				
LOANS TO INDIVIDUALS: If the purpose of the loan is to purchase, refinance, or in individual(s), then complete and sign the Government Monitoring Information For	· · · · · · · · · · · · · · · · · · ·				
REPRESENTATIONS: The information contained in this application is provided for of the undersigned. It is understood the lender will rely on the information provid deems necessary to verify the accuracy of the statements herein made, or in its diobtaining consumer and/or business reports. Bank of Charles Town is authorized report with other Bank of Charles Town affiliates. The lender is hereby authorized experience with the lender.	scretion, to further determine the undersigned's credit standing, including to share the information it obtains through these inquiries and any credit bureau				
AUTHORIZATION: The undersigned authorizes Bank of Charles Town, or any of its outside entity for the purpose of that entity determining if it has any interest in particular and credit transaction which the undersigned has entered into or may e	articipating with, or outright purchase from, Bank of Charles Town, or any of its				
As an authorized agent of the applicant company, I confirm that everyth application is true and complete.	ing in the application and information submitted along with the				
APPLICANT/PRINCIPAL SIGNATURE	APPLICANT/PRINCIPAL SIGNATURE				
PRINT NAME	PRINT NAME				
TITLE	TITLE				
DATE SIGNED	DATE SIGNED				
FOR BANK USE ONLY					
HMDA: ☐ YES ☐ NO CDL: ☐ YES ☐ NO	CIP: YES NO				
Application Rec'd Date: Complete Application Rec'd Date:					



LOAN PURPOSE

DEMOGRAPHIC INFORMATION FORM

To be completed with Bank of Charles Town Loan Application

PLEASE READ: If the purpose of the loan is to purchase, refinance, or improve a 1-4 family dwelling or 5 or more residential units, and the applicant is an individual(s), then complete sections I, II, and III of the demographic information form below.

1. CUSTOMER
LEGAL BUSINESS NAME/BORROWING ENTITY

COLLATERAL (Provide the complete physical address of the property which will be purchased, refinanced, or improved)

II. INFORMATION FOR DEMOGRAPHIC INFORMATION COLLECTION PURPOSES - NOTICE

The purpose of collecting this information is to help ensure that all applicants are treated fairly and that the housing needs of communities and neighborhoods are being fulfilled. For residential mortgage lending, Federal law requires that we ask applicants for their demographic information (ethnicity, race, and sex) in order to monitor our compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to provide this information, but are encouraged to do so. You may select one or more designations for "Ethnicity" and one or more designations for "Race." The law provides that we may not discriminate on the basis of this information, or on whether you choose to provide it. However, if you choose not to provide the information and you have made this application in person, Federal regulations require us to note your ethnicity, race, and sex on the basis of visual observation or surname. If you do not wish to provide some or all of this information, please check below.

application in person, Federal regulations require us to note your ethnicity, race, of provide some or all of this information, please check below.	and sex on the basis of visual observation or surname. If you do not wish to					
III. APPLICANT	CO-APPLICANT					
ETHNICITY: - Check one or more Hispanic or Latino Mexican Puerto Rican Cuban Other Hispanic or Latino - Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on: Not Hispanic or Latino I do not wish to provide this information RACE: - Check one or more American Indian or Alaskan Native - Print name of enrolled or principal tribe: Asian	ETHNICITY: - Check one or more Hispanic or Latino Mexican Puerto Rican Cuban Other Hispanic or Latino - Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on: Not Hispanic or Latino I do not wish to provide this information RACE: - Check one or more American Indian or Alaskan Native - Print name of enrolled or principal tribe: Asian					
Asian Indian Chinese Filipino Japanese Korean Vietnamese Other Asian- Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on: Black or African American Native Hawaiian or Other Pacific Islander Native Hawaiian or Chamorro Samoan Other Pacific Islander- Print race, for example, Fijian, Tongan, and so on: Uhite I do not wish to provide this information SEX:	Asian Indian Chinese Filipino Japanese Korean Vietnamese Other Asian- Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on: Black or African American Native Hawaiian or Other Pacific Islander Native Hawaiian or Chamorro Samoan Other Pacific Islander- Print race, for example, Fijian, Tongan, and so on: White I do not wish to provide this information SEX:					
Female Male I do not wish to provide this information	Female Male I do not wish to provide this information					
IV. TO BE COMPLETED BY FINANCIAL INSTITUTION	TO BE COMPLETED BY FINANCIAL INSTITUTION					
Was the ethnicity of the applicant collected on the basis of visual observation or surname? Yes No	Was the ethnicity of the co-applicant collected on the basis of visual observation or surname? Yes No					
Was the race of the applicant collected on the basis of visual observation or surname? Yes No	Was the race of the co-applicant collected on the basis of visual observation or surname? Yes No					
Was the sex of the applicant collected on the basis of visual observation or surname? Yes No	Was the sex of the co-applicant collected on the basis of visual observation or surname? Yes No					
V. TO BE COMPLETED BY FINANCIAL INSTITUTION INITIAL APPLICATION RECEIVED:						
Face-to-Face By Phone	☐ By Fax ☐ By Email					
INTERVIEWER'S NAME (PRINT OR TYPE)						