

Each owner, shareholder, partner or member owning 25 percent or more interest in the business must sign a personal guaranty. A minimum of one (1) guarantor is required regardless of percent ownership. Additional guarantees may be required.

CREDIT REQUEST

Loan Amount: Amount Requested: \$ _____ Term _____ <input type="checkbox"/> Months <input type="checkbox"/> Years Purchase Price: \$ _____ (Include copy of purchase order for equipment/vehicle purchase.)	Loan Type: <input type="checkbox"/> Term Loan <input type="checkbox"/> Business Line of Credit <input type="checkbox"/> Time Note <input type="checkbox"/> Commercial Real Estate
Use of Funds: <input type="checkbox"/> Refinance existing debt <input type="checkbox"/> Purchase new equipment <input type="checkbox"/> Manage seasonal cash flow shortages <input type="checkbox"/> Purchase existing business <input type="checkbox"/> Buy-out partner(s) <input type="checkbox"/> Acquire Real Estate <input type="checkbox"/> Letter of credit needs <input type="checkbox"/> Refinance commercial real estate <input type="checkbox"/> Other (describe): _____	

Collateral Available:

•Loans will be secured by all business assets unless specific assets, acceptable to the Bank, are pledged. Please describe fully any such specific assets that you wish to use as collateral. Please note which assets, if any, are pledged as collateral for other loans. Please note location of collateral if different from your business location.

The bank may not condition an extension of credit on either (a) the borrower's purchase of an insurance or annuity from the bank or from any of its affiliates, or (b) the borrower's agreement not to obtain, or prohibition on the borrower from obtaining, an insurance product or annuity from an entity that is unaffiliated with the bank.

BUSINESS PROFILE

Business Legal Name (exact legal name)		DBA (if applicable)		
Taxpayer ID Number	Year Business Began Operation	Years Of Current Ownership this line of business	Years owners have been in this line of business	Gross Annual Sales \$
Business Type: <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> CORPORATION <input type="checkbox"/> OTHER <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> General Partnership <input type="checkbox"/> Sub-S Corporation <input type="checkbox"/> Non-Profit Organization <input type="checkbox"/> Individual <input type="checkbox"/> Limited Partnership <input type="checkbox"/> C-Corporation <input type="checkbox"/> Professional Association <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Other				
Description of Business or Service				
Primary Contact Name		Business Phone ()	Business Fax ()	

BUSINESS PHYSICAL ADDRESS

Street Address	City	State	Zip
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BUSINESS MAILING ADDRESS (if different from above):

FINANCIAL AND RELATED BUSINESS PROFILE

Business Deposit Accounts

Financial Institution	Account Type	Current Balance	Average Balance	Would you like to move the account to MBT?
		\$	\$	<input type="checkbox"/> Yes
		\$	\$	<input type="checkbox"/> Yes
		\$	\$	<input type="checkbox"/> Yes

Business Debts (List all business debts, including accounts and payables. Include any existing Metairie Bank outstanding debts.)

Payable to	Type of Account (Revolving, Term, etc.)	Balance Owing	Payment	Pay off with proceeds?
		\$	per	<input type="checkbox"/> Yes
		\$	per	<input type="checkbox"/> Yes
		\$	per	<input type="checkbox"/> Yes
		\$	per	<input type="checkbox"/> Yes

RELATED BUSINESS INQUIRY

(If Yes, please explain on separate sheet)

Has the Business Applicant ever declared bankruptcy?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If Yes, Date _____
Has any Principal, Guarantor or Co-applicant ever declared bankruptcy?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If Yes, Date _____
Is the Business Applicant liable as guarantor or endorser on an existing or outstanding loan?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If Yes, Amount _____
Is Principal, Guarantor or Co-Applicant liable as guarantor or endorser on an existing or outstanding loan?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If Yes, Amount _____
Is the Business Applicant or any Principal, Guarantor or Co-Applicant a party to any legal claim or lawsuit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If Yes, Date _____
Is the Business already pledging any assets for a loan or lease?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If Yes, Describe _____
Is the Business Applicant or any Principal, Guarantor or Co-applicant currently past due on any taxes?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If Yes, Amt. & Yr. _____
Are there any tax liens filed against the Business Applicant, or any Principal, Guarantor or Co-applicant?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If Yes, Amt. & Yr. _____

Does Business Applicant own or lease occupied building? Own Lease

If leased, name of lessor: _____ Mailing address of lessor: _____

Years remaining on lease: _____

Monthly lease payments, if applicable \$ _____

OWNERSHIP/MANAGEMENT PROFILE

List all owners of the company

Name	Social Security #	Title	Ownership %	This Line of Business

PRINCIPAL, GUARANTOR AND CO-APPLICANT INFORMATION

Name		Position		Social Security Number	
Address					
Home Phone	Cell Phone	Business Phone	Email		
Name		Position		Social Security Number	
Address					
Home Phone	Cell Phone	Business Phone	Email		
Name		Position		Social Security Number	
Address					
Home Phone	Cell Phone	Business Phone	Email		
Name		Position		Social Security Number	
Address					
Home Phone	Cell Phone	Business Phone	Email		

EQUAL CREDIT OPPORTUNITY NOTICE - ADVERSE ACTION NOTICE- The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against applicants on the basis of race, color, religion, national origin, sex, marital status, age (providing the applicant has the 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 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 the FDIC Consumer Response Center, 1100 Walnut Street, Box#11, Kansas City, MO 64106.

If your application for business credit is denied, you have the right to a written statement of the specific reasons for denial. To obtain the statement, please send your written request within 60 days of the date of the Creditor's decision to Metairie Bank, P O Box 217, Metairie, La 70004, Attention: Business and Professional Lending. The Creditor will send you a written statement of the reasons within 30 days of receiving your request for the statement.

FINANCIAL STATEMENTS AND TAX RETURNS-Please provide a copy of the company's financial statements or tax returns for the last three years and interim financial statements for the current year. Please also provide guarantors' tax returns for the last three years and updated personal financial statements.

Authorization: Each Business Applicant and each person or entity signing this application ("Signer") certifies that the information provided by the Business Applicant and the Signer is true and complete, and authorizes Metairie Bank and Trust and its agents to obtain credit and employment information about the Business Applicant and Signer, obtain credit reports and make any inquiries Metairie Bank and its agents consider appropriate in connection with this application or the review of this loan account from time to time; make Metairie Bank's experience with this loan account and information about this application available to credit bureaus, other Signer or other persons who have or expect to have financial dealings with the Business Applicant and the Signer, share collection information with the Signer's other creditors, and disclose account information as required by law. Each Signer acknowledges that additional information may be required in order to make a final credit decision. Business Applicant also acknowledges receipt of the Equal Credit Disclosures provided with this application.

REQUIRED SIGNERS- All signers must also be duly authorized to sign on behalf of applicant. All applicants and co-applicants MUST sign this application.

ACKNOWLEDGEMENT: EACH SIGNER ACKNOWLEDGES THAT METAIRIE BANK AND TRUST AND ITS AGENTS MAY RELY ON THE STATEMENTS AND INFORMATION SET FORTH IN THIS APPLICATION AND THAT SUCH STATEMENTS AND INFORMATION MAY BE INCORPORATED BY REFERENCE IN ANY AGREEMENT ANY OF THE UNDERSIGNED MAY ENTER INTO WITH METAIRIE BANK AND TRUST. EACH OF THE UNDERSIGNED HEREBY AGREES TO NOTIFY METAIRIE BANK AND TRUST PROMPTLY OF ANY CHANGE IN ANY SUCH STATEMENT OR INFORMATION. EACH SIGNER HAS READ AND UNDERSTOOD THE TERMS OF THIS APPLICATION, INCLUDING THE ABOVE DISCLOSURES, ANY ADDENDUM, AND REPRESENTS AND WARRANTS THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT. EACH SIGNER ACKNOWLEDGES THEY HAVE RETAINED A COPY OF THIS APPLICATION FOR THEIR RECORDS.

Signature X	Print Name	Title	Date
Signature X	Print Name	Title	Date
Signature X	Print Name	Title	Date
Signature X	Print Name	Title	Date

Thank you for choosing Metairie Bank. We look forward to serving your financial needs.

Applicant Names (Please Print): _____

GOVERNMENT MONITORING INFORMATION

PLEASE COMPLETE THE FOLLOWING SECTIONS FOR ALL LOANS SECURED BY ANY PIECE OF RESIDENTIAL PROPERTY IF THE PURPOSE IS TO PURCHASE, IMPROVE OR REFINANCE A LOAN SECURED BY RESIDENTIAL PROPERTY.

<input type="checkbox"/> Residential, (1-4 units, including condominiums/town homes or vacation homes) <input type="checkbox"/> Manufactured Home (with or without real estate) including mobile homes <input type="checkbox"/> Multi-family residential property with (5 or more units)		<input type="checkbox"/> 1 st lien <input type="checkbox"/> Subordinate/Junior lien <input type="checkbox"/> Not secured by R/E	<input type="checkbox"/> Owner occupied <input type="checkbox"/> Non-owner occupied (Includes 2 nd home and vacation homes)
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INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the federal government types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing laws, and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. You may select one or more designations for race. The law provides that a lender may not discriminate on the basis of this information, or on whether you choose to furnish it. However, if you chose not to furnish the information and you have made this application in person, under Federal regulations the lender is required to note ethnicity, race and sex on the basis of visual observation or surname. If you do not wish to furnish this information, please check below

APPLICANT	CO-APPLICANT
ETHNICITY <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	ETHNICITY <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
RACE OR NATIONAL ORIGIN <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	RACE OR NATIONAL ORIGIN <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White
SEX: <input type="checkbox"/> Female <input type="checkbox"/> Male	SEX: <input type="checkbox"/> Female <input type="checkbox"/> Male
<input type="checkbox"/> I DO NOT WISH TO FURNISH THIS INFORMATION	<input type="checkbox"/> I DO NOT WISH TO FURNISH THIS INFORMATION

X _____		_____	
Applicant Signature	Date	Co-Applicant Signature	Date

Loan Officer: _____