



A. General Information

Business Name (<i>Applicant</i>)			Business Phone Number
Physical street address including city, state and ZIP (no P.O. Boxes)			
Mailing address (if different than above)			
Nature of business product or service			
Date business established	How long under current management	Number of employees	Tax ID number

B. Credit Request

Amount requested	Use of proceeds
Source of income for repayment	Secondary source
Collateral offered	Repayment structure requested

C. Business Organization

<input type="checkbox"/> Proprietorship		<input type="checkbox"/> General Partnership		<input type="checkbox"/> S-Corporation		<input type="checkbox"/> Sole Owner		State in which organized
<input type="checkbox"/> Limited Liability Company		<input type="checkbox"/> Limited Partnership		<input type="checkbox"/> C-Corporation		<input type="checkbox"/> Other: _____		
1. Name, title and position				Percent of ownership		Social Security number		
Home street address including city, state and ZIP (no P.O. Boxes)				Home phone number				
Valid driver's license or ID number	Type	State	Date of issuance	Expiration Date	Date of birth	Mother's Maiden Name		
2. Name, title and position				Percent of ownership		Social Security number		
Home street address including city, state and ZIP (no P.O. Boxes)				Home phone number				
Valid driver's license or ID number	Type	State	Date of issuance	Expiration Date	Date of birth	Mother's Maiden Name		
3. Name, title and position				Percent of ownership		Social Security number		
Home street address including city, state and ZIP (no P.O. Boxes)				Home phone number				
Valid driver's license or ID number	Type	State	Date of issuance	Expiration Date	Date of birth	Mother's Maiden Name		
4. Name, title and position				Percent of ownership		Social Security number		
Home street address including city, state and ZIP (no P.O. Boxes)				Home phone number				
Valid driver's license or ID number	Type	State	Date of issuance	Expiration Date	Date of birth	Mother's Maiden Name		
5. Name, title and position				Percent of ownership		Social Security number		
Home street address including city, state and ZIP (no P.O. Boxes)				Home phone number				
Valid driver's license or ID number	Type	State	Date of issuance	Expiration Date	Date of birth	Mother's Maiden Name		

BUSINESS CREDIT APPLICATION

D. Miscellaneous Information	YES	NO
1. Is the applicant an endorser, guarantor or co-maker for obligations (including any lease obligation, e.g. vehicle, equipment, business location) not listed on financial statements submitted?	<input type="checkbox"/>	<input type="checkbox"/>
2. Is the applicant party to any claim or lawsuit?	<input type="checkbox"/>	<input type="checkbox"/>
3. Have you and/or the applicant ever filed for bankruptcy? Chapter:_____ Filing Date: _____	<input type="checkbox"/>	<input type="checkbox"/>
4. Does the applicant's business activity involve the generation, use, transportation, storage or disposal of any hazardous material?	<input type="checkbox"/>	<input type="checkbox"/>
5. Does the applicant owe any taxes that are past due? Amount: _____ Owed To: _____	<input type="checkbox"/>	<input type="checkbox"/>
6. Are any assets pledged or mortgaged other than stated on business and personal financial statements submitted?	<input type="checkbox"/>	<input type="checkbox"/>

RIGHT TO REQUEST SPECIFIC REASONS: If this 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, contact us at Gesa Credit Union, P.O. Box 500, Richland, WA 99352, within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement.

The federal Equal Credit Opportunity Act prohibits creditors from discrimination 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 a good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this is the National Credit Union Administration Office of Examination and Insurance, 1775 Duke Street, Alexandria, Virginia 22314-3428.

REPORTING INFORMATION TO CREDIT BUREAUS:

Lender may report information about your account to credit bureaus. Late payments, missed payments or other defaults on your account may be reflected in your credit report.

ORAL AND WRITTEN AGREEMENTS:

Washington: Under Washington Law, oral agreements or oral commitments to loan money, extend credit or to forbear from enforcing repayment of a debt are not enforceable.

Gesa: Written commitments to loan money, extend credit, release collateral, or to forbear from enforcing repayment of a debt must be authorized by the following Gesa executives; President and CEO, Chief Lending Officer, or VP of Commercial Services.

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 ask you for your name, address, date of birth and other information that allow us to identify you. We may also ask to see your driver's license or other identifying documents.

BUSINESS CREDIT APPLICATION

STATEMENTS BY APPLICANT AND PRINCIPAL (S) (as applicable):

GENERAL: I certify that the information provided on and with this Business Credit Application, including any financial statements, are complete and correct and that I am authorized to execute this Application on behalf of the Applicant. I authorize Gesa Credit Union and its affiliates (collectively, Lender) to obtain balance and payoff information on all accounts requiring payoff as a condition of approving this Application. I understand that Lender may check my credit record(s) and any statements made by me. I give permission to all my creditors to give Lender any information it needs to make a credit granting decision. I further authorize Lender to provide credit reporting agencies and other creditors information relating to any credit Lender might grant pursuant to this Application. I agree to promptly notify Lender of any material changes that would affect the accuracy of these statements. All information is as of this date unless otherwise stated. I authorize Lender to cause such UCC financing statements to be filed in such form and in such jurisdictions and encumbering such assets as Lender or its counsel deem appropriate in their sole and absolute discretion.

AUTHORIZATION TO OBTAIN CREDIT REPORT: I authorize Lender to obtain a copy of my credit report in connection with this request for credit, and any modifications, renewals or extensions of such credit. I acknowledge that Lender shall use the credit report in connection with a credit transaction requested hereunder, and that Lender has a legitimate business need for the information. I acknowledge that this authorization is continuing in nature, and that Lender may obtain updated or additional credit reports at any time in connection with the renewal, extension or other modification of any loan or other credit accommodation related to this Application. I further direct the credit reporting agency to which Lender delivers a copy of this authorization to furnish the credit report to Lender.

RIGHT TO RECEIVE A COPY OF APPRAISALS: We may order an appraisal to determine the property's value and charge you for the appraisal. If your application collateral includes a 1st lien on a 1-4 family dwelling, we will promptly give you a copy of any appraisal, even if your loan does not close. you can pay for an additional appraisal for your use at your own cost.

By signing below, I declare that I have read and understand the above statements.

- ☐ This is an application for business credit submitted on behalf of the entity identified in Section A of this application form. (If the individual owners of the business intend to personally guaranty the loan, include guarantor information in Section C above. Authorized signor to sign below.)
- ☐ I am applying for business credit in my individual name and:

☐ I am relying on my own income and assets

☐ I am relying on my own income and assets and the income and/or assets owned jointly by me with another person or by another source identified as follows (list below or on a separate sheet if necessary):

- ☐ We are applying for joint business credit. The names of the joint applicants are as follows (list below or on a Separate sheet if necessary, co-applicants to sign below):

APPLICANT OR AUTHORIZED SIGNOR SIGNATURE	DATE	CO-APPLICANT SIGNATURE*	DATE
TITLE		CO-APPLICANT SIGNATURE*	DATE
CO-APPLICANT SIGNATURE*	DATE	CO-APPLICANT SIGNATURE*	DATE

Certification of Beneficial Owner(s)

Persons opening an account on behalf of a legal entity must provide the following information of the legal entity for which the account is being opened:

Organization: _____ Type: _____

Physical Address: _____

Provide the following information for each individual, if any, who directly or indirectly, through any contract, arrangement, understanding, relationship or otherwise, owns 25 percent or more of the equity interests of the legal entity listed above:

(If no individual meets this definition, please leave blank.)

Ownership Prong	Name and Residential Street Address	Date of Birth	Tax Identification Number	Identification ¹ (Type, Number, State, Issue Date, Expiration Date)

Provide the following information for one individual with significant responsibility for managing the legal entity listed above, such as:

- An executive officer or senior manager (e.g., Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, Treasurer); or
- Any other individual who regularly performs similar functions.

(If appropriate, an individual listed under the ownership prong above may also be listed in this section.)

Controlling Prong	Name and Residential Street Address	Date of Birth	Tax Identification Number	Identification ¹ (Type, Number, State, Issue Date, Expiration Date)
	Same as Acct. Signer? See page 3: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5			

I, _____, _____ (natural person opening account), hereby certify, to the
Name Title
best of my knowledge, that the information provided above is complete and correct. Furthermore, I agree to immediately notify the credit union of any changes in regards to the beneficial owners.

Signature: _____ Date: _____

¹ For any non-U.S. Persons, please contact the Compliance Department **prior** to establishing any accounts.