



New Jersey Business Growth Fund Business Loan Application Checklist

We are pleased to receive your application for a business loan from PNC Bank. The following are required prior to beginning our review of your request:

- ___ Completed **Business Banking Loan Application**.
- ___ Signed copies of the last three (3) years' **Business Tax Returns** for Corporations, Partnerships and Limited Liability Companies (may substitute financial statements if they are audited or reviewed by CPA).
- ___ Completed **Personal Financial Statement** (provided at the end of this form) for each Owner, Principal, Partner, Member or Guarantor. Print duplicate copies as needed. (All owners with 10% or greater ownership will be required to guaranty)
- ___ Copies of recent **bank and/or brokerage statements** showing ownership of items listed on Personal Financial Statement, such as:
 - ___ Non-PNC Bank Accounts
 - ___ Stocks, Bonds, Securities, Brokerage Accounts
 - ___ IRAs, Pension Plans, Other Retirement Accounts
- ___ Signed copy of the most recent year's **Personal Tax Return** for each Owner, Principal, Partner, Member or Guarantor including all schedules and K-1's. (If most recent tax return is on extension, please provide a copy of the extension application and the prior year's tax return.)
- ___ **Supporting Documents** (i.e. Agreement of Sale, Invoice, Appraisals, Real Estate Descriptions, Accounts Receivable Agings, Accounts Payable Agings, etc.)

New Jersey Business Growth Fund

Eligibility Requirements

- Y N Are you creating one new job in New Jersey for each \$50,000 in loan proceeds you are applying for or, if you are a manufacturing business, are you maintaining jobs in New Jersey?
- Y N Is the business located in a geographic area or industry identified by the New Jersey Economic Development Authority (EDA)?
- Y N Will the assets acquired with the loan proceeds be located in New Jersey?
- Y N Is the business authorized to do business in the state of New Jersey?

All loan applications are subject to credit approval by PNC Bank and the New Jersey Economic Development Authority.



New Jersey Business Growth Fund Business Loan Application

Business Applicant Information			
Legal Name of Business		Doing Business As	
Business Street Address		City	State Zip
Mailing Address		City	State Zip
Telephone Number	County of Business	Business e-mail address (optional)*	
Fax Number	* (By completing the e-mail field, you agree to receive any required federal or state disclosures or other information regarding this loan application electronically, and you authorize us to communicate with you using electronic mail.)		
Name of Contact Person (Officer / Owner)			
Legal Information			
Name of Counsel to Applicant		Contact Person	
Business Address		City	State Zip
Telephone Number		Fax Number	
Accountant Information			
Name of Accounting Firm		Contact Person	
Business Address		City	State Zip
Telephone Number		Fax Number	
Organization Information			
Business Tax ID/SSN		Nature of Business (<i>Detailed description of what business does, makes or sells</i>)	SIC Code /NAICS (if known)
Year Established	State of Organization	Number of Employees	Annual Sales/Revenue
Type of Organization <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Limited Partnership <input type="checkbox"/> General Partnership <input type="checkbox"/> C Corporation <input type="checkbox"/> Subchapter S Corporation <input type="checkbox"/> Limited Liability Co. <input type="checkbox"/> Non-Profit Organization <input type="checkbox"/> Business Individual			
Bank Reference Information			
Bank Name	Checking Balance	Savings Balance	Loan Balance
Bank Name	Checking Balance	Savings Balance	Loan Balance
Additional Business Information			
Company Annual Sales Volume:			
List the five largest customers and suppliers:			
Describe Sales Pattern: <input type="checkbox"/> Steady <input type="checkbox"/> Seasonal <input type="checkbox"/> Increasing <input type="checkbox"/> Decreasing			
Management Succession: Indicate Name(s) of Successor(s) to current company management:			

Loan Information					
Loan Amount		Loan Purpose <i>(Provide a detailed explanation of what loan proceeds will be used for)</i>			
If you have an existing PNC Bank Business Checking Account, please provide the following information to enable automatic payment of your loan. If you do not have a PNC Bank Business Checking Account, one will be opened for you.					
Name on Account		PNC Bank Business Checking Account Number			
Do you wish to pay off an existing loan?		___ Yes ___ No			
If applicant wants to pay off an existing loan (from another institution) please provide the following:					
Name on Account		Name of Institution	Account Balance	Contact Phone Number	
Collateral					
Address of Where Collateral is to be Located		City	State	Zip	County
<u>Detailed Description of Collateral</u> <i>(Include all real estate and pieces of machinery / equipment)</i>		<u>Cost of Collateral</u>	<u>Name of Current Owner</u>	<u>Market Value</u>	<u>Loan Balance</u>

Business Owner Information (Please provide a Personal Financial Statement on PNC Bank form for each owner)					
Owner 1			Owner 2		
Name			Name		
Title		Date of Birth	Title		Date of Birth
Personal Identification ___ Driver's license ___ State Issued ID ___ US Passport		Identification State/Source	Personal Identification ___ Driver's license ___ State Issued ID ___ US Passport		Identification State/Source
Identification Number		Expiration Date	Identification Number		Expiration Date
Percent of Business Ownership		Years of Ownership	Percent of Business Ownership		Years of Ownership
Owner 3			Owner 4		
Name			Name		
Title		Date of Birth	Title		Date of Birth
Personal Identification ___ Driver's license ___ State Issued ID ___ US Passport		Identification State/Source	Personal Identification ___ Driver's license ___ State Issued ID ___ US Passport		Identification State/Source
Identification Number		Expiration Date	Identification Number		Expiration Date
Percent of Business Ownership		Years of Ownership	Percent of Business Ownership		Years of Ownership

Additional Information About the Business	
Has this business or any affiliated business ever declared bankruptcy? Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please describe:
Do you have any lawsuits pending against you or any business you own (including this one)? Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please describe:
Do you or any business you own (including this one) owe any taxes that are past due? Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please describe:
Has this business or any affiliated business ever defaulted on a loan? Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please describe (include name of financial institution):
Do you or any business you own (including this one) have any other credit applications pending? Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please describe (include name of financial institution):
Does your business have credit at other institutions? Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please describe (include name of financial institution):
New Jersey Business Growth Fund Eligibility Information	
Number of permanent, full-time jobs to be created in New Jersey by project within next 24 months:	Full Time _____
Number of permanent, full-time jobs to be maintained in New Jersey (manufacturing businesses only):	Full Time _____
Number of existing jobs at time of application:	Full Time _____
Location where jobs will be created or retained:	Municipality: _____ County: _____
Block(s): _____	Lot(s): _____
Has any EDA financial assistance been previously arranged by or for the benefit of the project, applicant or related parties in New Jersey?	Yes _____ No _____
If you answered Yes to the above question, please provide the following information:	
Name of Applicant:	Application Number:
Has the applicant or project occupant or any related parties applied for or received financial assistance for this project from any other NJ governmental authority or agency?	Yes _____ No _____
If you answered Yes to the above question, please provide the following information:	
Name of authority or agency:	Contact Person: _____ Telephone Number: _____
Description of Project Costs:	
Description	Amount
Acquisition of Building	\$ _____
Refinance of Building	\$ _____
Purchase of New Machinery & Equipment	\$ _____
Purchase of Used Machinery & Equipment	\$ _____
Fees (Accounting, Legal, Financing, etc.)	\$ _____
TOTAL PROJECT COST	\$ _____



Business Banking Loan Application

New Jersey Business Growth Fund

Authorization to Pull Credit Report

By indicating agreement below, the individual who has completed this application, who is either the credit applicant, a principal of the credit applicant or a personal guarantor of such applicant's obligations, provides written authorization to PNC Bank or its designee (and any assignee or potential assignee of this application) authorizing review of such individual's personal credit profile from one or more national credit bureaus. Such authorization shall extend to obtaining a credit profile in considering the application for credit and subsequently for the purposes of update, renewal or extension of such credit or additional credit and for reviewing or collecting the resulting account. A photocopy, a facsimile or electronic copy of this authorization shall be valid as the original. By indicating agreement below, such person affirms his/her identity as the individual identified in the above referenced application.

Do you consent to the above paragraph?

YES, I agree.

NO, I do not agree. I understand that PNC Bank will be unable to further process this application.

Information Sharing

Each Applicant understands that in order to offer a full range of financial services, PNC Bank may share personal information such as applications, financial statements and credit reports with any of its affiliates. If any Applicant does not want PNC Bank to share such information with PNC Bank's affiliates, such Applicant may advise PNC Bank of its wishes by calling PNC Bank at 1-877-BUS-BNKG or by writing to PNC Bank at: P.O. Box 96066, Pittsburgh, Pennsylvania 15226 including the Applicant's name, address and account number(s) or Social Security / EIN number(s).

Business Purpose Affirmation

THE APPLICANT CERTIFIES THAT ALL LOAN PROCEEDS WILL BE USED FOR BUSINESS PURPOSES.

You certify that everything you have stated in this application to PNC Bank is true and correct to the best of your knowledge.

Regulatory Disclosures

These disclosures contain important information about your Business Credit Application.

Notice to Borrower/Appraisal

If your application is to be secured by a one to four family dwelling, you have the right to a copy of the appraisal report used in connection with your application for credit. If you have not already paid for the appraisal, you must pay us the cost plus photocopying and postage, prior to our delivering the copy. If you wish a copy, please write to us at PNC Bank, Business Banking Credit Administration Center, MS: F6-F266-05-2, 8800 Tincum Boulevard, Philadelphia, PA 19153, Attn: Support Desk. We must hear from you no later than 90 days after we notify you about the action taken on your credit application, or you withdraw your application. In your letter please provide the name of the Applicant and the address of the appraised property.

Notice for Denial

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 contact the Business Banking Credit Administration Center, MS: F6-F266-2, 8800 Tincum Boulevard, Philadelphia, PA 19153, 1-877-287-2654, within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for denial within 30 days of receiving your request for the statement.

ECOA Notice

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 (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 good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is Office of the Comptroller of the Currency, Customer Assistance Group, 1301 McKinney Street, Suite 3450, Houston, Texas 77010-9050.

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 customer that opens an account. What this means for you: When you open an account, we will ask you 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 information.

State-Specific Disclosures

Notice to New Jersey Residents:

Under New Jersey law we are required to give you the following notification if we make a loan offer to be secured, in whole or in part, by real property located in New Jersey: *"The interests of the borrower and lender are or may be different and may conflict, and the lender's attorney represents only the lender and not the borrower. The borrower is, therefore, advised to employ an attorney of the borrower's choice, licensed to practice law in the State of New Jersey to represent the interests of the borrower."*

Certification, Authorization, Signatures

The Applicant certifies that the statements made on this application and the other information provided with this application are true and complete. **THE APPLICANT CERTIFIES THAT ALL LOAN PROCEEDS WILL BE USED FOR BUSINESS PURPOSES.** (The term "Applicant" as used herein shall include the business entity applying for the loan and all other persons who by providing information herein may be liable for the loan requested in this application, as an endorser, surety or guarantor). The Applicant agrees to promptly notify the Bank of any material changes to this information. The Bank is authorized to make all inquiries it deems necessary to verify accuracy and determine the Applicant's creditworthiness, and to share any information provided to the Bank with any Bank affiliate, the New Jersey Economic Development Authority (EDA) and with any third party that performs services for the Bank in connection with this application or the loan or to whom this application or any loan to the Applicant may be transferred. The Applicant authorizes any person or consumer reporting agency to give the Bank or such third party any information it may have on the Applicant, and authorizes the Bank, EDA or such third party to make inquiries of the Applicant's accountant directly and to obtain any information deemed necessary to process this application. The Applicant authorizes the Bank, EDA and any transferee of this application or the loan to answer any questions concerning its credit experience with Applicant. **The Applicant(s) understands that if it is a legal entity, all owners must sign and include their titles.** The Applicant understands that all fees, including commitment and documentation fees and annual credit review fees are non-refundable. In addition, once the commitment has been issued the Applicant will pay all expenses, including but not limited to: documentation fees, mortgage taxes, insurance premiums, recording and filing fees, appraisal fees, etc.

If the Applicant does not qualify for the loan for which the Applicant is applying, the Applicant agrees that the Bank is authorized to consider this application under the terms and conditions of any applicable alternative financing program. Such financing may be sold to any Bank affiliate or other credit provider with whom the Bank has a relationship. The Applicant authorizes the Bank to forward this application and other documentation to any Bank affiliate or other credit provider with whom the Bank has an arrangement for alternative financing, and understands that the terms and conditions of such alternative financing program may differ from those for which the Applicant is currently applying.

If the Applicant does not want the Bank to share personal, non-transaction information with the Bank's affiliates or such third parties, the Applicant must write to the Bank at: PNC Bank, P.O. Box 96066, Pittsburgh, Pennsylvania 15226 including the Applicant's name, address and account number(s) or social security/EIN number(s).

Borrower(s)

Name or Corporation, Partnership or Other Entity, if applicable:		Note: If Borrower is a Partnership, all general partners must sign.	
Signature:	Date:	Signature:	Date:
Name & Title (Please Print)		Name & Title (Please Print)	
Signature:	Date:	Signature:	Date:
Name & Title (Please Print)		Name & Title (Please Print)	

PERSONAL FINANCIAL STATEMENT



IMPORTANT: READ THESE DIRECTIONS BEFORE COMPLETING THIS STATEMENT. CHECK APPROPRIATE BOX.

If you are relying solely on your own income or assets, and not the income or assets of another person (including a spouse) as the basis for repayment of the credit requested, complete only Sections 1 and 3.

SECTION 1 - INDIVIDUAL INFORMATION (TYPE OR PRINT)				SECTION 2 - JOINT PARTY INFORMATION (IF APPLICABLE TO THIS STATEMENT.)			
Name		Date of Birth		Name		Date of Birth	
Residence Address				Residence Address			
City, State, and ZIP Code		Years at Address		City, State, and ZIP Code		Years at Address	
Position or Occupation		Soc. Security #		Position or Occupation		Soc. Security #	
Business Name				Business Name			
Business Address				Business Address			
City, State, and ZIP Code				City, State, and ZIP Code			
Residence Phone ()		Business Phone ()		Residence Phone ()		Business Phone ()	

Financial statement as of: _____ Asset Ownership: J = Joint* I = Individual Only

SECTION 3 - STATEMENT OF FINANCIAL CONDITION					
ASSETS (DO NOT INCLUDE ASSETS OF DOUBTFUL VALUE)	IN DOLLARS (OMIT CENTS)	J/I	LIABILITIES	IN DOLLARS (OMIT CENTS)	J/I
Cash in other banks					
Marketable securities - see Schedule A			Due to brokers - see Schedule D		
Non-marketable securities - see Schedule B					
			Amounts payable to others - see Schedule D		
Partial interest in real estate investments- see Schedule B			Loans on life insurance policy(s) - see Schedule E		
Real estate owned - see Schedule C			Real estate mortgages payable - see Schedules B and C		
Loans receivable					
			Other debts - itemize:		
Cash value life insurance - see Schedule E					
Net worth of business owned - (attach Financial Statement)					
IRA's, pensions, Keogh, profit sharing					
Other assets - itemize:					
			TOTAL LIABILITIES		
			NET WORTH (Total Assets Minus Total Liabilities)		
TOTAL ASSETS			TOTAL LIABILITIES and NET WORTH		

* Please provide name(s) if jointly owned:

CASH INCOME AND MONTHLY HOUSING EXPENSE			
Cash Income for the Year Ended:	INDIVIDUAL	JOINT PARTY	TOTAL
Salary, bonuses and commissions			
Other income: (Income from alimony, child support, or separate maintenance income need not be revealed if the applicant or co-applicant does not wish to have it considered as a basis for repaying this obligation.)			
TOTAL INCOME			
MONTHLY HOUSING EXPENSE (Mortgage payments, taxes, and insurance, or rent)			

Any significant changes expected in the next 12 months? Yes No (If yes, attach explanation)

SCHEDULE A - INVESTMENTS & MARKETABLE SECURITIES				
NUMBER OF SHARES OR FACE VALUE (BONDS)	DESCRIPTION	IN NAME OF	ARE THESE PLEDGED?	MARKET VALUE

SCHEDULE B - INVESTMENTS IN REAL ESTATE. UNREGISTERED (I.E., NON-MARKETABLE) SECURITIES, ETC.					
LOCATION / DESCRIPTION OF INVESTMENT / %OWNED	INVESTMENT YEAR	INVESTMENT COST	OWNED BY	CURRENT VALUE OR NET R/E EQUITY	MORTGAGES

SCHEDULE C - REAL ESTATE OWNED							
ADDRESS	TITLED IN NAME(S) OF	DATE BOUGHT	COST	MARKET VALUE	MORTGAGES		
					OWING NOW	MATURITY DATE	HELD BY

SCHEDULE D - NOTES OWING BANKS, BROKERS, FINANCE COMPANIES AND OTHERS				
OWING TO	BALANCE DUE	REPAYMENT TERMS	DATE OF FINAL PAYMENT	SECURED BY

SCHEDULE E - LIFE INSURANCE						
NAME OF INSURANCE COMPANY	OWNER OF POLICY	BENEFICIARY	TYPE*	FACE AMOUNT	POLICY LOANS	CASH SURRENDER VALUE

*W - Whole Life T - Term E - Endowment A - Annuity G - Group O - Other

SCHEDULE F - BANKS OR FINANCE COMPANIES WHERE CREDIT HAS BEEN OBTAINED						
NAME & ADDRESS OF LENDER	CREDIT IN THE NAME OF	SECURED OR UNSECURED	ORIGINAL DATE	HIGH CREDIT	YEAR PAID	

CONTINGENT LIABILITIES

Are you a guarantor, co-maker or endorser for any debt not shown above? Yes No Are you a party to any claim or lawsuit? Yes No
 Are you contingently liable for any lease or contract? Yes No Are any of your taxes past due? Yes No

Please provide details if you answered yes to any of the questions above, _____

Please answer the following questions:

1. Income tax returns filed through (date) _____

2. Have you or any firm in which you were a major owner ever declared bankruptcy? Yes No

If yes, please provide details _____

REPRESENTATIONS AND WARRANTIES; AUTHORIZATION TO OBTAIN CREDIT REPORTS; INFORMATION SHARING

The information contained in this statement is provided to induce you to extend or to continue the extension of credit to me or to others upon my guarantee. I acknowledge and understand that you are relying on the information provided in this statement in deciding to grant or to continue credit. I represent, warrant and certify that the information provided is true, correct and complete, and agree to promptly notify you of any material changes to this information. If I fail to notify you as required above, or if any of the information should prove to be materially inaccurate or incomplete, you may declare my debt or that debt which I guarantee immediately payable. You are authorized to make all inquiries you deem necessary to verify accuracy of the information submitted and to determine my creditworthiness, and to share any information provided to you by or about me with any third party that performs services for you in connection with any extension of credit to me or others upon my guarantee or to whom any such extension(s) of credit may be transferred. I shall continue to supply you or any such transferee annually with an updated financial statement. Any statement or financial information that I give to you shall be your property. I authorize any person or consumer reporting agency to give you or any such third party any information it may have on me and authorize you or any such third party to make inquiries of my accountant directly and obtain any information deemed necessary in processing any application for which this personal financial statement is provided. I authorize you and any transferee of this personal financial statement or extension of credit to answer any questions about its credit experience with me.

By signing below, the undersigned individual(s), who is/are either a principal(s) of the credit applicant or a personal guarantor(s) of its obligations, provides written authorization to you or your designee (and any assignee or potential assignee hereof) to obtain my/our personal credit profile(s) from one or more national credit bureaus. Such authorization shall extend to obtaining a credit profile(s) in considering this application and subsequently for the purposes of update, renewal or extension of such credit or additional credit and for reviewing or collecting the resulting account. A photocopy or facsimile copy of this authorization shall be valid as the original. By signature below, I/we affirm my/our identity(ies) as the respective individual/s identified in the above statement.

If I and/or others do not qualify with you under your standard lending guidelines for the extension of credit for which this statement is being submitted, I authorize you to consider this statement under the terms and conditions of your optional Expanded Credit Program, which is offered through special arrangements with non-PNC Bank lenders. I authorize you to forward my application, credit report, and all other documents and other information in your possession to non-PNC Bank lenders participating in the Expanded Credit Program. I understand that if my application is approved under the Expanded Credit Program, a non-PNC Bank lender may either make the loan directly to me or purchase the loan from you. I also understand that the terms and conditions of an Expanded Credit Program loan may differ from the terms and conditions of the loan for which I or others originally applied.

_____ **YES.** I/we wish to be considered for PNC Bank's Expanded Credit Program. By checking this line, I am providing written authorization to such non-PNC Bank lender to obtain my/our personal credit profile(s) from one or more national credit bureaus. Such authorization shall extend to obtaining a credit profile(s) in considering this statement and subsequently for the purposes of update, renewal or extension of such credit or additional credit and for reviewing or collecting the resulting account.

_____ **NO.** I/we do not wish to be considered for PNC Bank's Expanded Credit Program.

I understand that in order to offer a full range of financial services, you may share personal information such as applications, financial statements and credit reports with any of your affiliates. If I do not wish you to share such information with your affiliates, I understand that I may advise you of my wishes by calling the Bank at 1-877-BUS-BNKG or by writing to PNC Bank, P.O. Box 96066, Pittsburgh, Pennsylvania 15226 and including my name, address, account number(s) or social security number.

By initialing, we confirm that we intend to apply for joint credit or to jointly guarantee credit. Applicant _____ Joint Party _____

Date	Signature (Individual)	Signature (Joint Party)
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