



*SBA Loan
Preliminary Checklist*

The items listed below are needed in order to complete a preliminary evaluation of your loan request. If you have any questions concerning the information requested, or if any of the items requested are unavailable, please contact our office at (405) 270-4736 or (888) 313-2722. Upon completion, please mail information to:

**BancFirst Commercial Capital
101 N. Broadway, Suite 460
Oklahoma City, Oklahoma 73102**

Applicant's Name _____ Date: _____

- Brief description of the loan requested including the proposed use of loan proceeds.
- Last three years business tax returns (IRS forms 1120 or 1120s or Schedule C if operating as a proprietor).
- Last three years personal tax returns.
- Compiled (CPA prepared) business financial statement for the last quarter or within the last 90 days.
- Complete **“Loan Request Information”** form.
- Complete **“Personal Financial Statement”** form on all principals.
- Complete **“Personal & Company Debt Schedule”** form on all principals.
- Complete **“Earnings Projection for 1 Year”** form. (Required for startup businesses)
- Complete **“Statement of Personal History”** form on all principals.
- Complete personal **“Resume”** form on all principals.
- Copy of proposed purchase contracts.



LOAN REQUEST INFORMATION

Please Print Legibly or Type (ALL BLANKS MUST BE COMPLETED, Use "N/A," If Blank is Not Applicable)

APPLICANT

Business Name _____

Trade Name (if different) _____

Type of Business _____ Number of Employees _____ Gross Annual Sales \$ _____

Type:

- Proprietorship
 Corporation
 LLC
 Other (Specify) _____

Address (Physical Location) _____

City _____ State _____ County _____ Zip _____

Mailing Address (if different from above) _____

City _____ State _____ County _____ Zip _____

Home Phone _____ Business Phone _____

Business Bank _____

LOAN REQUEST

Purpose:

- Real Estate Purchase \$ _____
 Business Acquisition \$ _____
 Furniture and Fixtures \$ _____
 Working Capital \$ _____
 Inventory \$ _____
 Debt Refinance \$ _____
 Other \$ _____

Total Loan Request \$ _____

PRINCIPALS

Full Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

Social Security Number _____ Percentage Owned _____ %

Full Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

Social Security Number _____ Percentage Owned _____ %

PAST OR PREVIOUS SBA OR OTHER GOVERNMENT FINANCING: All owners, principals, partners, and affiliates must report these debts.

Borrower Name	Name of Agency	Loan No.	Date	Amount	Balance	Status



PERSONAL FINANCIAL STATEMENT

U.S. SMALL BUSINESS ADMINISTRATION

As of _____, _____

Complete this form for: (1) each proprietor, or (2) each limited partner who owns 20% or more interest and each general partner, or (3) each stockholder owning 20% or more of voting stock, or (4) any person or entity providing a guaranty on the loan.

Name	Business Phone
Residence Address	Residence Phone
City, State, & Zip Code	
Business Name of Applicant/Borrower	

ASSETS	(Omit Cents)	LIABILITIES	(Omit Cents)
Cash on hand & in Banks	\$ _____	Accounts Payable	\$ _____
Savings Accounts	\$ _____	Notes Payable to Banks and Others	\$ _____
IRA or Other Retirement Account	\$ _____	(Describe in Section 2)	
Accounts & Notes Receivable	\$ _____	Installment Account (Auto)	\$ _____
Life Insurance-Cash Surrender Value Only	\$ _____	Mo. Payments \$ _____	
(Complete Section 8)		Installment Account (Other)	\$ _____
Stocks and Bonds	\$ _____	Mo. Payments \$ _____	
(Describe in Section 3)		Loan on Life Insurance	\$ _____
Real Estate	\$ _____	Mortgages on Real Estate	\$ _____
(Describe in Section 4)		(Describe in Section 4)	
Automobile-Present Value	\$ _____	Unpaid Taxes	\$ _____
Other Personal Property	\$ _____	(Describe in Section 6)	
(Describe in Section 5)		Other Liabilities	\$ _____
Other Assets	\$ _____	(Describe in Section 7)	
(Describe in Section 5)		Total Liabilities	\$ _____
Total	\$ _____	Net Worth	\$ _____
		Total	\$ _____

Section 1. Source of Income	Contingent Liabilities
Salary	As Endorser or Co-Maker
Net Investment Income	Legal Claims & Judgments
Real Estate Income	Provision for Federal Income Tax
Other Income (Describe below)*	Other Special Debt

Description of Other Income in Section 1.

*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

Section 2. Notes Payable to Banks and Others. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

Section 3. Stocks and Bonds. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed).

Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value

Section 4. Real Estate Owned. (List each parcel separately. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed.)

	Property A	Property B	Property C
Type of Property			
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Month/Year			
Status of Mortgage			

Section 5. Other Personal Property and Other Assets. (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and if delinquent, describe delinquency)

Section 6. Unpaid Taxes. (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

Section 7. Other Liabilities. (Describe in detail.)

Section 8. Life Insurance Held. (Give face amount and cash surrender value of policies - name of insurance company and beneficiaries)

I authorize SBA/Lender to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. I understand FALSE statements may result in forfeiture of benefits and possible prosecution by the U.S. Attorney General (Reference 18 U.S.C. 1001).

Signature: _____ Date: _____ Social Security Number: _____

Signature: _____ Date: _____ Social Security Number: _____

PLEASE NOTE: The estimated average burden hours for the completion of this form is 1.5 hours per response. If you have questions or comments concerning this estimate or any other aspect of this information, please contact Chief, Administrative Branch, U.S. Small Business Administration, Washington, D.C. 20416, and Clearance Officer, Paper Reduction Project (3245-0188), Office of Management and Budget, Washington, D.C. 20503. **PLEASE DO NOT SEND FORMS TO OMB.**

EARNINGS PROJECTION FOR 1 YEAR

(To be used for all new businesses and existing business if past earnings do not reflect ability to repay proposed loan)

Gross Receipts	\$ _____
Merchandise Cost/Cost of Sales	\$ _____
Gross Profit	\$ _____
<u>Expenses:</u>	
Officers' Salaries (If Corporation)	\$ _____
Employee Wages	\$ _____
Accounting & Legal Fees	\$ _____
Advertising	\$ _____
Rent	\$ _____
Depreciation	\$ _____
Supplies	\$ _____
Electricity	\$ _____
Telephone	\$ _____
Interest	\$ _____
Repairs	\$ _____
Employment Taxes	\$ _____
Real Estate Taxes	\$ _____
Insurance	\$ _____
Bad Debts	\$ _____
*Miscellaneous (Postage, etc.).....	\$ _____
Total Expenses	\$ _____
Net Profit	\$ _____
Less Income Taxes	\$ _____
Net Profit After Taxes.....	\$ _____
Less Withdrawals	
(Proprietorship/Partnership).....	\$ _____
Net Profit Remaining For Loan Payment	\$ _____

*If sum is large, please itemize.

It is extremely important that detailed comments be made in support of the above projections.

NOTICES REQUIRED BY LAW

The following is a brief summary of the laws applicable to this solicitation of information.

Paperwork Reduction Act (44 U.S.C. Chapter 35)

SBA is collecting the information on this form to make a character and credit eligibility decision to fund or deny you a loan or other form of assistance. The information is required in order for SBA to have sufficient information to determine whether to provide you with the requested assistance. The information collected may be checked against criminal history indices of the Federal Bureau of Investigation.

Privacy Act (5 U.S.C. § 552a)

Any person can request to see or get copies of any personal information that SBA has in his or her file, when that file is retrievable by individual identifiers, such as name or social security numbers. Requests for information about another party may be denied unless SBA has the written permission of the individual to release the information to the requestor or unless the information is subject to disclosure under the Freedom of Information Act.

Under the provisions of the Privacy Act, you are not required to provide your social security number. Failure to provide your social security number may not affect any right, benefit or privilege to which you are entitled. Disclosures of name and other personal identifiers are, however, required for a benefit, as SBA requires an individual seeking assistance from SBA to provide it with sufficient information for it to make a character determination. In determining whether an individual is of good character, SBA considers the person's integrity, candor, and disposition toward criminal actions. In making loans pursuant to section 7(a)(6) the Small Business Act (the Act), 15 USC § 636 (a)(6), SBA is required to have reasonable assurance that the loan is of sound value and will be repaid or that it is in the best interest of the Government to grant the assistance requested. Additionally, SBA is specifically authorized to verify your criminal history, or lack thereof, pursuant to section 7(a)(1)(B), 15 USC § 636(a)(1)(B). Further, for all forms of assistance, SBA is authorized to make all investigations necessary to ensure that a person has not engaged in acts that violate or will violate the Act or the Small Business Investment Act, 15 USC §§ 634(b)(11) and 687b(a). For these purposes, you are asked to voluntarily provide your social security number to assist SBA in making a character determination and to distinguish you from other individuals with the same or similar name or other personal identifier.

When this information indicates a violation or potential violation of law, whether civil, criminal, or administrative in nature, SBA may refer it to the appropriate agency, whether Federal, State, local, or foreign, charged with responsibility for or otherwise involved in investigation, prosecution, enforcement or prevention of such violations. See 56 Fed. Reg. 8020 (1991) for other published routine uses.

RESUMÉ

DATE _____

NAME: _____

SPOUSE: _____

SS#: _____

RESIDENCE ADDRESS: _____ FROM _____ TO _____

PREVIOUS ADDRESS: _____ FROM _____ TO _____

PERSONAL

DATE OF BIRTH: _____

TELEPHONE #: _____

PLACE OF BIRTH: _____

WORK #: _____

EDUCATION

College or Technical Training Name & Location	Dates Attended		Major	Degree of Certificate
	From	To		
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

MILITARY SERVICE BACKGROUND

BRANCH: _____

FROM: _____ TO: _____ RANK AT DISCHARGE: _____ HONORABLE? _____

Job Description: _____

Major assignments/accomplishments: _____

WORK EXPERIENCE

List chronologically, beginning with present employment. Emphasize accomplishments as well as responsibilities.

1. Name of Company & Location: _____

From: _____ To: _____

Title: _____ Duties: _____

2. Name of Company & Location: _____

From: _____ To: _____

Title: _____ Duties: _____

3. Name of Company & Location: _____

From: _____ To: _____

Title: _____ Duties: _____