



# Business credit application

9 S. Washington, Suite 700 | Spokane, WA 99201 | (509) 344.2200, (208) 619.4001 or (877) 304.7185 | Fax: (509) 344.2545 | stcu.org

## General information

Applicant is a:		<input type="checkbox"/> Sole proprietorship	<input type="checkbox"/> General partnership	<input type="checkbox"/> S-Corporation	<input type="checkbox"/> Non-profit	State organized
		<input type="checkbox"/> Limited liability company	<input type="checkbox"/> Limited partnership	<input type="checkbox"/> C-Corporation	<input type="checkbox"/> Other	
Business name (applicant)			Business phone		Member #	
Email address	Physical street address (no P.O. boxes)		City	State	Zip code	
Number of employees	Mailing address		City	State	Zip code	
Nature of business, product or service			Tax ID number		Date established	
Prior year gross annual business revenue		Insurance Agent/Company			Phone	
Email address	Mailing address		City	State	Zip code	

## Credit request

Amount requested	Use of proceeds
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## Loan Type

<input type="checkbox"/> Business line of credit		<input type="checkbox"/> Business term loan	<input type="checkbox"/> Commercial real estate
Term requested (months / years)	Automatic payment account #		Repayment structure requested
		<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually <input type="checkbox"/> Other	
Commercial real estate (only)	Refinance requests – Amount of cash back requested		Use of cash back

## Schedule of collateral offered

Description	Value	Liens	Ownership	Creditor's name

## Principal and guarantors (List all guarantors and/or principals with 20% ownership or more on separate sheet.)

Name, title and position	<input type="checkbox"/> Guarantor	Ownership %	Social Security Number	Birth date
Home address (no P.O. Boxes)		City	State	Zip code
Home phone number	Driver's license # or gov't photo ID	State issued	Date issued	Date expired
Name, title and position	<input type="checkbox"/> Guarantor	Ownership %	Social Security Number	Birth date
Home address (no P.O. Boxes)		City	State	Zip code
Home phone number	Driver's license # or gov't photo ID	State issued	Date issued	Date expired
Name, title and position	<input type="checkbox"/> Guarantor	Ownership %	Social Security Number	Birth date
Home address (no P.O. Boxes)		City	State	Zip code
Home phone number	Driver's license # or gov't photo ID	State issued	Date issued	Date expired
Name, title and position	<input type="checkbox"/> Guarantor	Ownership %	Social Security Number	Birth date
Home address (no P.O. Boxes)		City	State	Zip code
Home phone number	Driver's license # or gov't photo ID	State issued	Date issued	Date expired



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### Miscellaneous information

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?  Yes  No

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Is the applicant party to any claim or lawsuit?  Yes  No

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Have you and/or the applicant ever filed for bankruptcy? Filing date: \_\_\_\_\_ Chapter: \_\_\_\_\_  Yes  No

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Does the applicant's business activity involve the generation, use, transportation, storage or disposal of any hazardous material?  Yes  No

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Does the applicant owe any taxes that are past due? Amount: \_\_\_\_\_ Owed to: \_\_\_\_\_  Yes  No

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Are any assets pledged or mortgaged other than stated on business and personal financial statements submitted?  Yes  No

### Applicant's statements

**GENERAL STATEMENTS BY APPLICANT AND PRINCIPAL(S) (as applicable):** I/We certify to Spokane Teachers Credit Union (STCU or Credit Union) that the information provided on and with the Business Credit Application (Application), including any financial statements, are complete and correct and that I/we am/are authorized to execute this Application on behalf of the Applicant. I/We authorize Credit Union to verify with other parties and to make any investigation of the applicant's and my/our credit, either directly or through any agency employed for that purpose to obtain credit reports in connection with this application for credit and for any update, renewal or extension of the credit received. I/We authorize and direct applicant's creditors to give Credit Union any information it requests. Credit Union may also disclose to any other interested parties information as to Credit Union's experience or transactions with my/our account. I/We further authorize Credit Union to provide any such insurer or investor any information and documentation that they may request with respect to this application, credit, or loan. I/We also agree to notify Credit Union of any change in name or address. I/We certify that we are applying for credit for business purposes only and not for personal, familial or household purposes.

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

  X    
Authorized signer/title: \_\_\_\_\_ Date \_\_\_\_\_

  X    
Authorized signer/title: \_\_\_\_\_ Date \_\_\_\_\_

  X    
Authorized signer/title: \_\_\_\_\_ Date \_\_\_\_\_

  X    
Authorized signer/title: \_\_\_\_\_ Date \_\_\_\_\_

Note: The spouse of an authorized signer need not sign unless he/she intends to be an authorized signer.

### IMPORTANT NOTICE TO APPLICANTS REGARDING LOAN COMMITMENTS

The Washington State Legislature enacted RCW 19.36 a new statute regarding the method in which extensions of credit can be committed. The statute calls upon us to give you the following notice.

#### ORAL AGREEMENTS OR ORAL COMMITMENTS TO LOAN MONEY, EXTEND CREDIT, OR TO FORBEAR FROM ENFORCING PAYMENT OF A DEBT

If you are making application for credit from STCU you may be notified in the form or a written commitment letter if your loan request is approved. This commitment will state the terms of conditions under which STCU will provide you credit. You may rely upon a written commitment for credit approval.

#### DISCLOSURE OF RIGHT TO REQUEST SPECIFIC REASON FOR CREDIT DENIAL – BUSINESS CREDIT

If your application for business credit is denied, you may have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact STCU, Commercial Banking Manager, 9 S. Washington, Suite 700, Spokane, WA 99201, 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.

**Equal Credit Opportunity Act (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, and marital status, or age (provided that 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: **Consumer Response Center, Federal Trade Commission 600 Pennsylvania Ave., NW, Washington DC, 20580.**

**RIGHT TO APPRAISAL REPORT:** You have a right to a copy of the appraisal report and valuation used in connection with your application for credit. If you wish to have a copy, you must write to us at: STCU, Attn: Commercial and Business Services, 9 S. Washington, Suite 700, Spokane, WA 99201. We must receive your written request no later than 90 days after we notify you about the action taken on your credit application or you withdraw your application.

**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.

### IMPORTANT PROCEDURES FOR OPENING NEW ACCOUNTS

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.

### For STCU use only

Completed application received:	Lender: Acct #:	Branch:
Application taken: <input type="checkbox"/> By phone <input type="checkbox"/> In person <input type="checkbox"/> 3 <sup>rd</sup> party (outside STCU)	New member or existing less than 1 year? <input type="checkbox"/> Yes - Verify ID <input type="checkbox"/> No	
Auto payment? <input type="checkbox"/> Yes – Acct # <input type="checkbox"/> No	Secured by land or improved real estate? <input type="checkbox"/> Yes – Order flood <input type="checkbox"/> No	
HMDA -- Is application for a dwelling-secured loan to purchase, refinance or improve a dwelling, or improve property?		<input type="checkbox"/> Yes <input type="checkbox"/> No
GMI -- If applicant is a natural person, attach completed Government Monitoring Information sheet (S0767)		<input type="checkbox"/> N/A – LOC <input type="checkbox"/> Yes <input type="checkbox"/> No