COMMERCIAL LOAN APPLICATION

First, download the form to your desktop and save to your personal computer. Next, close form. After you have closed your saved form, reopen the saved document on your computer, fill out, and save the form. Please drop off your completed application at any of our branches OR mail to Wayne Bank, Attn: Commercial Loan Dept., 500 South A Street, Richmond, IN 47374 OR fax to 765-935-3157. If you have any questions about the application or would like instructions to securely email your application, please contact our Commercial Loan Assistant at 765-598-5443 or call our main number at 765-935-5222 and ask for a Commercial Lender.

the application or would like instructions to securely email you								
IMPORTANT INFORMATION AF								
record information that identifies each person who opens an account. When you open an account, we will ask 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. In some cases, we may use outside sources to confirm the information. The information you provide will be kept confidential and secure.								
BORROWING INTENT:	<i></i>							
Check One		🗆 Indivi						
Borrowing intent should be evidenced when an individual is		□ Individual Credit						
applying with the applicant for shared or joint credit (e.g.								
individual is co-borrower with a business of	or two individuals are	□ Joint Credit: We intend to apply for joint credit.						
borrowing together).			(Initials)					
BORROWING ENTITY INFORMATION								
Type of Entity:	□ Corporation		🗆 Individual					
Check One	Partnership	🗆 Trust						
	Proprietorship Associa		\Box Association	on				
	□ LLC	□ Non-Profi						
Legal Name:								
Tax Identification Number:		Year Establishe						
Street Address:			Mailing Address:					
No P.O. Boxes			0					
City, State, ZIP	City, State, ZI		City, State, ZIP					
Check here if your street and mailing addresses are the same.								
Telephone Number:	Primary Busine			Contact				
-			Name:					
Description of Business:								
ADDITIONAL BORROWER	NFORMATION							
Co-Borrower Name #1	Name: Address:							
	SSN::	DOF	3:	Telephor	ne:			
Co-Borrower Name #2	Name:		Address:					
SSN:: DOB:								
Co-Borrower Name #3	Name:		Address:	:				
	SSN:: DO		3:	Telephone:				
BUSINESS ID INFORMATIO	N							
ID TYPE	ISSUE STATE	ISSUE DATE		ID NUMBER				
\Box Articles of Incorporation								
□ Certificate of Good Standing								
Partnership Agreement								
□ Trust Instrument								
Government-Issued Business License								
□ Other								
Do you cash checks?	I				YES 🗆 NO			
If you cash checks, do you cash more than \$1,000 per person per day?					YES 🗆 NO			
Do you sell money orders?					YES 🗆 NO			
Do you transmit money (e.g. wire transfers, Western Union, virtual currency, etc.)?					YES 🗆 NO			
Do you exchange currency and/or bullion?					YES 🗆 NO			
Do you primarily transact business in cash?					YES 🗆 NO			
Do you engage in internet gambling?					YES 🗆 NO			
Do you own or operate ATMs?					YES 🛛 NO			

Page | 1

BENEFICIAL OWNER INFORMATION								
Beneficial Owner Name(s)		% Ownership	CONTROL DESIGNATION (e.g. CEO, CFO, COO, Managing Member, General Partner, President, Vice President, Treasurer, etc.)		ID Number & Expiration Date			
GUARANTOR INFOR	MATIC	DN						
Guarantor Name #1		Name: Addre						
		SSN::	DOB:		Telephone:			
Guarantor Name #2		Name:		Address:				
				Telephone:				
Guarantor Name #3		Name:		Address				
		SSN::	DOB:		Telephone:			
GROSS ANNUAL REV (In Previous Fiscal Year)	GROSS ANNUAL REVENUES (In Previous Fiscal Year)							
□ Ov	rer \$1 Mi	illion			□ Under \$1 Million			
LOAN REQUEST					11			
Purpose:	🗆 Pur	Purchase		ement	Development			
. 1					1			
	🗆 Pur	rchase/Rehab	□ Const/I	Perm	Equipment			
	□ Ref		□ Spec Co	onst.	\Box Line of Credit			
	🗆 Ref	finance (No Cash Out)	□ Contrac	t Build	□ Other:			
		``````````````````````````````````````						
Amount Requested:					1			
COLLATERAL	1							
Collateral Description:								
Collateral Address:								
If applicable					T			
Lien Position:			Total Exist	ing				
T' 1 11 ()	<b> </b>		Liens:					
Lienholder(s);	<b> </b>			<b>T</b> T 1	Ι			
Sales Price: (Purchase)			Estimated	Value:				
COMMUNITY DEVEL	OPME	INT CONSIDERATI						
				ad				
Will the proceeds from this loan support affordable housing for low- and moderate-income individuals?					$\Box$ YES	□ NO		
Will the proceeds from this loan promote economic development?				□ YES	□ NO			
Will the proceeds from this loan revitalize or stabilize low- or moderate-income								
geographies, designated disaster areas or distressed or underserved areas?				$\Box$ YES	□ NO			
Will the proceeds from this loan support, enable or facilitate projects or				□ YES	□ NO			
activities designed to revitalize or support, enable of facilitate projects of								

## **NOTICES & DISCLOSURES**

**Credit Authorization:** I/We authorize the Bank (Lender) to obtain a consumer report(s), and to obtain and exchange information from and with other credit grantors and consumer reporting agencies. I/We authorize Lender to retain all information and reports for Lender's files.

**True and Correct:** I/We certify that all statements made on this application are true and correct and that I/We have withheld nothing that would, if disclosed, unfavorably affect this application. The furnishing of false information for the purpose of influencing Bank's loan decision violates Federal criminal laws and may subject a violator to fine, imprisonment or both.

For Loans Secured by a 1 st Lien on a Dwelling: We may order an appraisal to determine the property's value and charge you for this appraisal. 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 own use at your own cost. You may waive the timing requirement by checking this box:  $\Box$ . If you waive this timing requirement, you agree to receive a copy at or before consummation or account opening. If the transaction is not concumated of the account is not opened, we will provide these copies to you no later than 30 days after we determine consummation will not occur or the account will not be opened.

**Credit Denial Notice:** If your gross revenues were \$1,000,000 or less in your previous fiscal year, or you are requesting trade credit, a factoring agreement, or similar types of business credit in this Commercial Loan Application, and 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 *Wayne Bank, Attn: Commercial Loan Department, 500 South A Street, Richmond, IN 47374* within 60 days of 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 notice that follows describes additional protections extended to you.

**Equal Credit Opportunity 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 (providing the applicant has the capacity to enter into a binding contract), because all or a 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 Protection Act. The federal agency that administers compliance with this law concerning the Bank is: *Federal Reserve Consumer Help, PO Box 1200, Minneapolis, MN 55480* 

SIGNATURE(S)						
□ Authorized Signer						
Co-Borrower	-					
□ Guarantor	Signature	Printed Name	Date			
□ Authorized Signer						
Co-Borrower	Signature	Printed Name	Date			
□ Guarantor	Signature	T finted Tvanie	Date			
□ Authorized Signer						
Co-Borrower	Cique atoms	Printed Name	Date			
□ Guarantor	Signature	Printed Marile	Date			
□ Authorized Signer						
Co-Borrower	Signature	Printed Name	Date			
□ Guarantor	Signulure	T mited Ivalle	Date			