



CERTIFICATION OF APPLICANT AND OTHER ENTITIES

To be completed by LOAN APPLICANT and ALL ENTITIES which hold a 20% or greater ownership interest in the loan applicant.

GENERAL INFORMATION

1. FULL LEGAL NAME:	2. PHONE NUMBER:	
3. ADDRESS:		
4. LOAN PROGRAM:		
5. STATE OF ORGANIZATION:	6. FEIN:	7. IF NOT LOAN APPLICANT, GIVE THE PERCENTAGE OF OWNERSHIP IN THE LOAN APPLICANT:

You must initial your responses to questions 8-13.

If you answer "yes" to questions 8-12 or "no" to question 13, furnish details on a separate sheet. For criminal matters, include dates, location, fines, sentences, whether misdemeanor or felony, unpaid fines or penalties, and any other pertinent information. A criminal record will not necessarily disqualify you; however, an untruthful answer will cause your application to be denied and subject you to other penalties as noted below.

8. Is your firm presently subject to an indictment, criminal information, arraignment, or other means by which formal criminal charges are brought in any jurisdiction?

Yes No Initials: _____

9. Has your firm filed for bankruptcy within the past ten (10) years?

Yes No Initials: _____

10. Are there any outstanding judgments entered against your firm?

Yes No Initials: _____

11. Is your firm presently a party to any lawsuits?

Yes No Initials: _____

12. Are there any local, state or federal tax liens filed against your firm?

Yes No Initials: _____

13. Is your firm current with all local, state, and federal taxes?

Yes No Initials: _____

CERTIFICATION

CAUTION – PENALTIES FOR FALSE STATEMENTS: Knowingly making a false statement on this form is a violation of law and could result in criminal prosecution, significant civil penalties, and a denial of your loan.

NAME & TITLE (TYPED OR PRINTED):

SIGNATURE:

DATE:



CERTIFICATION OF INDIVIDUAL

To be completed by ALL INDIVIDUALS who hold a 20% or greater ownership interest in the loan applicant.

GENERAL INFORMATION	
1. NAME AND ADDRESS OF APPLICANT (<i>Firm Name, Street, City, State and Zip</i>):	2. LOAN PROGRAM:
	3. PERSONAL STATEMENT OF: 3A. FIRST NAME:
	3B. MIDDLE NAME:
	3C. LAST NAME:
	4. % OF OWNERSHIP IN LOAN APPLICATION:
	5. SOCIAL SECURITY #:
6. DATE OF BIRTH (<i>Month, Day and Year</i>):	7. PLACE OF BIRTH (<i>City & State or Foreign Country</i>):
8. U.S. CITIZEN? <input type="checkbox"/> Yes <input type="checkbox"/> No Initials: _____ <i>If No, are you a lawful permanent resident alien?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	IF NON-U.S. CITIZEN PROVIDE ALIEN REGISTRATION NUMBER BELOW:
9. RESIDENCE: From (<i>MM/DD/YY</i>): _____ To (<i>MM/DD/YY</i>): _____ ADDRESS (<i>Street, City, State and Zip</i>):	MOST RECENT PRIOR ADDRESS (<i>omit if over 10 years ago</i>): From (<i>MM/DD/YY</i>): _____ To (<i>MM/DD/YY</i>): _____ ADDRESS (<i>Street, City, State and Zip</i>):
HOME PHONE (<i>Include Area Code</i>):	BUSINESS PHONE (<i>Include Area Code</i>):

You must initial your responses to questions 8 and 10-17.

If you answer "yes" to questions 10-16 or "no" to question 17, furnish details on a separate sheet. For criminal matters, include dates, location, fines, sentences, whether misdemeanor or felony, unpaid fines or penalties, and any other pertinent information. A criminal record will not necessarily disqualify you; however, an untruthful answer will cause your application to be denied and subject you to other penalties as noted below.

10. Are you presently subject to an indictment, criminal information, arraignment, or other means by which formal criminal charges are brought in any jurisdiction? <input type="checkbox"/> Yes <input type="checkbox"/> No Initials: _____	
11. Have you been arrested in the past 12 months for any criminal offense? <input type="checkbox"/> Yes <input type="checkbox"/> No Initials: _____	
12. For any criminal offense – other than a minor vehicle violation – have you ever: 1) been convicted; 2) pled guilty; 3) pled nolo contendere; 4) been placed on pretrial diversion; or 5) been placed on any form of parole or probation (including probation before judgment)? <input type="checkbox"/> Yes <input type="checkbox"/> No Initials: _____	
13. Have you filed for bankruptcy within the past ten (10) years?	<input type="checkbox"/> Yes <input type="checkbox"/> No Initials: _____
14. Are there any outstanding judgments entered against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No Initials: _____
15. Are you presently a party to any lawsuits?	<input type="checkbox"/> Yes <input type="checkbox"/> No Initials: _____
16. Are there any local, state or federal tax liens filed against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No Initials: _____
17. Are you current with all local, state, and federal taxes?	<input type="checkbox"/> Yes <input type="checkbox"/> No Initials: _____

CERTIFICATION

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NAME & TITLE (TYPED OR PRINTED):	
SIGNATURE:	DATE: