All-In-One Business Loan Application





All-in-One Commercial Loans - less paperwork and quicker solutions.

The world isn't slowing down. You know it and **First Northern Bank** knows it. If you want your business to keep up, you need answers quickly. **First Northern Bank** understands that. That's why we have responded with our All-in-One Commercial Loan. Now you can apply for a business loan or line of credit up to \$300,000 and get your answer in as soon as 24 hours. It's easy, and it's fast.

The Simplicity of applying for \$50,000 or Less...

- Complete this All-in-One Commercial Loan application package
- Drop off the application at one of our convenient branch locations
- See checklist for details

...Applying for \$50,001 to \$300,000...

- Provide two years of financial information (see checklist for details)
- Complete this All-in-One Commercial Loan application package
- Drop off the application at one of our convenient branch locations

Business Checking Plus

Amount Minimum: \$2.500

Maximum: \$10,000

Rate Base Rate* + 8% up to \$4,999

Base Rate* + 6% up to \$10,000

Term Revolving
Fees \$100 Set-up
Use of Funds - Working Capital

- Finance Receivables and Inventory

Business ExpansionPurchase EquipmentOverdraft Protection

Express Line of Credit

Amount Minimum: \$10,000

Maximum: \$50,000

Rate Variable, based on Commercial Base

Rate*

Term 5 years

Fees \$150 Annual Fee
Use of Funds - Working Capital

- Finance Receivables and Inventory

- Business Expansion

Revolving Business Line of Credit

Amount Minimum: \$50,001

Maximum: \$300,000

Rate Variable, based on Commercial Base

Rate*

Maximum Term Line of Credit - 3 years

Fees Line of Credit – \$200.00 Annual Fee

Use of Funds - Working Capital

- Finance Receivables and Inventory

Term Loan

Amount Minimum: \$5,000

Maximum: \$300,000

Rate Variable, based on Commercial Base

Rate*

Maximum Term Up to 60 Months

Fees ½% Origination Fee (Minimum Loan

Fee is \$200)

Use of Funds - Business Expansion

- Purchase Equipment

Non-Revolving Line to Term Loan

Amount Minimum: \$50,000

Maximum: \$300,000

Rate Variable, based on Commercial Base

Rate*

Term Interest only for 12 months, term up

to 60 months

Fees ½% Origination Fee
Use of Funds - Business Expansion

- Purchase Equipment

^{*}First Northern Bank's Commercial Base Rate.



Your Checklist for All-In-One Commercial Loans

Dear Borrower,

Thank you for selecting **First Northern Bank** for your commercial loan.

In order to accurately and efficiently determine your eligibility, we ask that you complete <u>in ink</u> the attached All-In-One Commercial Loan Application together with other forms and documentation:

Business Checking Plus ☐ Completed All-in-One Commercial Loan application package	Sole Proprietorship – please provide the following: □ Fictitious Name Statement
Express Line of Credit or Term Loan less than \$50,000 Completed All-in-One Commercial Loan application package	Partnership – please provide the following: □ Partnership Agreement Corporation/LLC – please provide the following: □ Articles of Incorporation or LLC Agreement
Revolving Line of Credit or Term Loan \$50,000 and over Completed All-in-One Commercial Loan application package Two years Federal Tax Returns – including all schedules (personal and business) Current interim and two FYE business	Equipment Secured Loans – please provide the following: Purchase Invoice or current appraisal Complete description of collateral with I.D. numbers Other:
financial statements Current personal financial statement Account Receivables and Account Payables to match current interim business financial statements Please Note: If any Borrower or Guarantor has a Trust, the complete Trust document must be provided for any loan request.	Your cooperation will help us to expedite the processing of your application. Should you have any questions, please call your loan officer. We look forward to assisting you with your loan request. Thank You!
	Loan Officer's Name Loan Officer's Phone Number



Customer Identification Notice (U.S.A. Patriot Act)

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 person who opens an account.

What this means for you: 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.

BANK USE



Loan Officer		App #	
Branch #	Br. Rec'd Date		
Rec'd at CSD	Complete		All-In-

FIRST NORTHERN BANK

Business Credit Application

Check all that apply: Busi				-	Line of Credit (\$10,001 an (\$5,000 - \$300,000)) 🖵 Business	Line of Cre	edit (\$50,001	- \$300,	(000)
Amount Requested	Line of				Loan Purpose			Colla	teral – Bank	Use	
	☐ Renewal								Value		isting Liens
\$	□ New Revolving	Line					A/R				
Auto-debit? ☐ Yes ☐ No	☐ Increase Exist						- Inventory				
FNB Account #	= merease Exist	ing bine ii					Equipme	nt \$. \$	
Amount Requested	Ter	n		Ī	Loan Purpose			Colla	teral – Bank	Use	
-									Value		isting Liens
\$	☐ 12 Months	□ 48 Mor	nths				A/R	\$		\$	
Auto-debit? ☐ Yes ☐ No	☐ 24 Months	□ 60 Mor	nths				- Inventory				
FNB Account #	□ 36 Months						Equipme	nt \$		\$	
	-						_				
BUSINESS INFORMATION											
Legal Name (under which tax	returns are filed)				Company (or DBA	name)					
Street Address			Mailing Address (if	different)	Street	t					
City, State, Zip					City, State, Zip						
Business Phone Number	Bus (iness Fax i	Number		Federal Tax ID Nur	mber			No. of Own	ers	
Date Business Established	MM DI)	YY		Under Current Own	nership Sii	nce MM	Y	Y	_	
Annual Sales/Revenues (last)	Annual Sales/Revenues (last FULL year) \$			Annual Net Profit				No. of Emp	loyees		
Describe Your Product/Service			Website Address								
Type of Ownership (Please p	rovide supporting d	ocumenta	tion, such as Article	s of Inc	corporation, Partnersh	ip Agreem	ent, etc.)				
Business Type (check one)	☐ Sole Proprietors ☐ General Partners				☐ S Corporation☐ Limited Liability	Co.	☐ Other				
Industry Type (check one)	□ Contractor □ Media □ High-tec	□ Manufacturer □ Agriculture □ Retail/Wholesale			☐ Real Estate ☐ Financial Service ☐ Business Service		☐ Health Car ☐ Consumer ☐ Hotel/Mote	Service	Other Bu	usiness	
BUSINESS DEPOSIT ACCOUNTS											
Financial Insti		(Checki	Type of Account ing, Savings, Investment	, etc)	Account Num	ber	Av	verage Balar	nce	Мо	ve to FNB?
						\$			☐ Yes	s 🖵 No	
						\$			C		s 🖵 No
							\$			☐ Yes	s 🖵 No
CURRENT BUSINESS DE		1				1					
Creditor	Type of Debt (Loan, LOC, Lease)	Or \$	0		Current Balance				cipal & Inter Interest Onl		Maturity Date MM/DD/YY
		\$		\$ \$		\$				+	
		\$		\$		\$					
		\$		\$		\$				+	
		\$		\$		\$					
		\$		\$		\$				\perp	
		\$		\$		\$					
			Total Owing	\$							

OTHER BUSINESS INFORM	ATION								
						If "yes" to	any of these qu	uestio	ns, explain:
Is the business currently invol-			al claims?	☐ Yes	□ No				
Has the business or any princip				☐ Yes	□ No				
Are there any delinquent taxes	•		ncipal?	☐ Yes	□ No				
Is the company liable on any d				☐ Yes	□ No				
Is the company or any principa			or or endorser?		□ No				
Has the business incurred a los	•	•		☐ Yes	□ No				
Is the business for sale or unde	er agreement tha	at would change	ownership?	☐ Yes	□ No				
PERSONAL INFORMATION (A	LL 20% OR MORE	OWNERS TO COM	PLETE. IF MORE	E THAN TV	VO, PLEA	ASE USE SEP	ARATE APPLICAT	TION A	ND ATTACH.)
1.) Owner Name (please print)		% Owners	hip	Co	ompany	Title			Social Security Number
Home Address				'					Driver's License Number
Home Phone Number	Total Revolving		Mortgage/Rent	Payment		Monthly Sa	lary		r Income Describe:
	Payments (mon	thly)	(monthly)			\$		(mon	thly)
Financial Institution Nar	<u> </u>	pe of Account (Ch	pecking, Savings, e	tc.)		Account N	Jumher) 3	Average Balance
T HIGHER HISTEREION THE	19	pe of ficeballt (c)	ecening, ouvings, c	(6.)		riccountr	· unioci		\$
									\$
Brokerage Firm Name		Type of A	Account			Margin A	ccount		Current Balance
						☐ Yes	□ No		\$
						☐ Yes	□ No		\$
Have you transferred any assets	into a trust?	□ Yes □ N	0						
If yes, Name of Trust									
2.) Owner Name (please print)		% Owners	hip	Co	ompany	Title			Social Security Number
Home Address		-		'					Driver's License Number
Home Phone Number	Total Revolving Payments (mon		Mortgage/Rent (monthly)	Payment		Monthly Sa	lary	(mon	r Income Describe: thly)
()	\$		\$			\$		\$	
Financial Institution Nar	ne Ty	pe of Account (Ch	iecking, Savings, e	tc.)		Account N	lumber		Average Balance
								-	\$
Brokerage Firm Name		Type of A	\ccount			Margin A	ccount		Current Balance
Dioketage Film Name		Type of I	Account			☐ Yes	□ No		\$
						☐ Yes	□ No	\rightarrow	\$
Have you transferred any assets	into a trust?	☐ Yes ☐ No	n						<u> </u>
Have you transferred any assets into a trust?									
credit and employment inforn connection with this applicati information about this applica information may be required i	this application nation about ea on or review of ation available t in order to mak	n certifies that a ch person or er this loan accou to credit bureau te a final credit	ntity; 2) obtain ant from time as, and accoun decision.	credit ro to time; t inform	eports a 3) mak ation as	and make in e First Nor s required b	nquiries First thern Bank's by law. Each p	North experi erson	s First Northern Bank to: 1) obtain nern Bank considers appropriate in ience with this loan account and or entity acknowledges that additional
Business Name									B.:
_									_ Date
Title									
Print Name						1	Fitle		
Authorized Signature									_ Date
Print Name						1	Fitle		
Authorized Signature									Date

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 guarantee on the loan.										
lame	3011 OF CHILLY PROVIDE	ig a guarantee on the lo	cari.	Business Phone						
esidence				Residence Phone						
ldress ity, State, & Zip Code				Cell Phone						
usiness Name of Applicant/Borrower				Email Address						
• • • • • • • • • • • • • • • • • • • •	TIS AS OF (DATE)			Liliali Address						
	T IS AS OF (DATE)	(0.11.0.1.)	-		LIABULITIES	(0 " 0 +)				
Cash on hand & in Banks	ASSETS \$	(Omit Cents)	Accounts Payable		LIABILITIES	(Omit Cents)				
			1	also and Others (Describe in Co	O)					
Savings Accounts	\$		Notes Payable to Ba	nks and Others (Describe in Se	ection 2)	\$				
RA or Other Retirement Account	\$									
Accounts & Notes Receivable	\$		Installment Account			\$				
Cash Surrender Value of Life Insurance (S	Section 8) \$		Mo. Payments S	\$						
			Installment Account	(Other)		\$				
Stocks and Bonds (Complete in Section 3)	\$		Mo. Payments	\$						
			Loan on Life Insuran	ce		\$				
Real Estate (Complete Section 4)	\$		Mortgages on Real E	Estate (Describe in Section 4)		\$				
Automobile-Present Value	¢		Lippoid Toyon (Doon	ribe in Section 6)		¢				
	ion 5)		Unpaid Taxes (Desc	TIDE ITI SECLIOTI 0)		Φ				
Other Personal Property (Describe in Sect	tion 5) \$									
Desired to the section of the sectio	. 5\		Other Liabilities (Des	scribe in Section 7)		\$				
Business Investments (Describe in Section	n 5) \$			Tatal	I :-b:!!#:	Φ.				
					Liabilities	\$				
					Net Worth	\$				
Tota	al Assets \$				Total	\$				
ection 1. Source of Annual Income			Annual Expenditures	s / Contingent Liabilities						
Salary	\$		As Endorser or Co-N	<i>l</i> aker		\$				
nterest/Dividend Income	\$		Legal Claims & Judgr	ments		\$				
Real Estate Income	\$		Provision for Federal	I Income Tax		\$				
Distributions from Partnership / LLC / S Co	orps \$		Alimony/Child Suppo	rt/Maintenance Expense		\$				
Other Income (Describe below)*	\$		Living Expense			\$				
Description of Other Income in Section 1										
Description of Other Income in Section 1.										
Alimony or child support payments need r	not he disclosed in "i	Other Income" unless it	is desired to have such r	payments counted toward total	income					
Section 2. Notes Payable to Banks and Ot			· · · · · · · · · · · · · · · · · · ·	nust be identified as a part of th		nd signed)				
Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	· · · · · ·		Type of Collateral				
ane and Address of Notelloider(s)	Original balance	Current Dalance	rayment Amount	r requericy (monthly, etc.)	now secured -	rype or Collateral				
Marital Status (answer only if this financial statement is provided in connection with a request for secured credit or if you live in a community property state, such as California):										
arital Status (answer only if this financial state Married/Registered Domestic Partner (RDP)				Married/Registered Separated Unmarried (unmarried includes single, divorced, widowed)						
Married/Registered Domestic Partner (RDP)	Sep	parated	Unma	rried (unmarried includes single, o						
Married/Registered Domestic Partner (RDP) U MAY APPLY FOR CREDIT OR FINANCIAL AC	Sep	parated	Unma	rried (unmarried includes single, o						

Section 3. Sto	cks and Bonds. (Use at	ttachments if necessary. Each attachment	must be identified as a	part of this statement	and signed).		
Number of Shares	1	Name of Securities	Cost	Market Value	Date of Valuation	Total Value	
Section 4. Real Estate Owned. (List each parcel separately. Use attachment if necessary.)							
Type of Proper	tv	Property A	Prope	erty B	Pr	operty C	
Type of Floper	ty						
Address							
Date Purchase	ed						
Original Cost							
Present Marke	t Value						
Name of Lende	er						
Interest Rate							
Mortgage Acco	ount Number						
.Mortgage Bala							
	ment per MonthlYear						
Property Held i	·						
	ner Personal Property a	nd Other Assets	(Describe, and if any is	s nledged as security	state name and a	ddress of lien holder	
	ioi i oroonari roporty a	na other Access.	amount of lien, terms			duress of herr floider,	
Section 6. Unnaid Taxos. (Describe in detail as to type to whom payable when due amount and to what property if any a toy lien attaches.)							
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)							
Section 8. Lite Insurance Heid. (Give face amount and cash surrender value of policies - name of insurance company and beneficiaries)							
Signature:			Date:	Social Security N	lumber:		
Signature:			Date:	Social Security N	lumber:		
designation of my requested or rece until I otherwise r property, at your notice. You may i	r property as separate or co- cived. I promise that this is notify you in writing. If any election any or all of my incretain and verify this staten	is I understand that First Northern Bank is relyi community property) in deciding to give or cont is a true statement of my financial condition as adverse changes occurs in my financial condit debtedness and obligations to you, direct or co ment. I understand that from time to time you perience information about me and my relatio	inue the financial accommon of the date of valuations. ion, or if I should file for bontingent, shall become d may receive information	modation or extension o You may rely on it as b pankruptcy or any other lue and payable immedi about me from others a	f credit I have eing true and corre creditor tries to sei ately without dema and may answer	ize my	
representations a	nd warranties are from eac	ch of us.					

SCHEDULE OF REAL ESTATE HOLDINGS

As of: Borrowers Name:

Borrowers Name:				(List Market Value, I	(List Market Value, Mortgages, and Gross Rents at Full Value)	Full Value)				
Property Address	Date Acquired Purchase Price	% Owned	Property Held in Name of	Current Market Value	Lender's Name	Original Amount 1st Mortgage 2nd Mortgage	Current Balance 1st Mortgage 2nd Mortgage	Monthly Payment 1st Mortgage 2nd Mortgage	Interest Rate Maturity Date	Monthly Gross Rents

TOTALS



Insurance Verification

Adequate insurance coverage is required on the property that will secure this loan request. The insurance policy must contain a Loss Payable Clause Endorsement naming **First Northern Bank**, its successors and/or assignees. Please provide the following information so that your insurance agent may be contacted. Your loan will not be funded unless a Certificate of Insurance is issued to **First Northern Bank**.

Insurance Co.	Agent's Name	
Agent's Phone	Agent's Fax	
Agent's Address		
Policy Number		
_		
Insurance Co.	Agent's Name	
Agent's Phone	Agent's Fax	
Agent's Address		
Policy Number		
,		
Signed By		
Date Signed		
Signed By		
Date Signed		



How else can First Northern Bank assist you and your business?

(Please check the appropriate services)

Business & Personal Checking,	Business Electronic & Convenience Services
Savings & Investment Accounts	☐ ACH Fraud Detection Service
☐ Totally FREE Checking Accounts	☐ Business Online Banking
☐ Savings Accounts	☐ Cash Management Services
☐ Money Market Investment Accounts	Wire Transfers
☐ Certificate of Deposit Accounts	Bill Payment
☐ IRAs – Traditional and Roth	Direct Deposit/Payment
□ SEP IRAs	Payroll Service
☐ Coverdell Education Savings Accounts	Account Reconciliatioin
☐ Health Savings Accounts	☐ Courier Services
☐ Investment & Brokerage Services	☐ Deposit Capture
(not FDIC insured)	□ eStatements
☐ Asset Management & Trust Services	□ Lock Box
(Investments not FDIC insured)	☐ Online Bill Pay
(Intestinents not I DIO titotrea)	☐ Positive Pay for Check Fraud Detection
Business Loans	☐ Small Business Resource Center
Assignational Loops	☐ TeleBank
□ Agricultural Loans□ Business Checking Plus	- Telebalik
☐ Business Credit Cards	Personal Electronic & Convenience Services
☐ Business Credit Cards	O oStatements
☐ Commercial Real Estate Loans	eStatements Use Hantity That Protection
	☐ Identity Theft Protection
☐ Equipment Loans and Leasing☐ Letters of Credit	☐ Mobile Banking
	Online Banking
□ Non-Revolving Line to Term Loan	Online Bill Pay
Operating Loans for Livestock and Crops	☐ TeleBank
□ SBA Loans	Business & Personal Card Services
☐ Small Business Loans	
☐ Term Loans	☐ Business & Personal Visa Check Cards
Personal Loans	☐ Business & Personal Credit Cards
	☐ Merchant Card Services
☐ All-in-One Combined Construction	
& Permanent Financing	
☐ Automobile Loans	
☐ Boat and RV Loans	
☐ Construction Loans	
☐ Credit Cards	
☐ Home Equity Loans/Lines of Credit	
☐ Home Improvement Loans	
☐ Lines of Credit	
☐ Mortgage Loans – <i>Apply online anytime!</i>	
• Fixed & Adjustable Rates	
 Vacation & Country Home Loans 	
• Jumbo	
• VA	
• FHA	
 First-time Home Buyer Loans 	
Overdraft Protection	
☐ Personal Loans	

www.thatsmybank.com

Branch Locations

Auburn Financial Center

390 Elm Avenue Auburn, CA 95603 530.885.5009

Davis Financial Center

434 Second Street Davis, CA 95616 530.758.7500

Dixon Financial Center

195 N. First Street Dixon, CA 95620 707.678.4422

Downtown Sacramento Financial Center

700 J Street

Sacramento, CA 95814 916.447.9000

Fairfield Financial Center

1455 Oliver Road Fairfield, CA 94534 707.425.2900 **Roseville Financial Center**

2150 Douglas Blvd., Suite 260 Roseville, CA 95661 916.787.8510

Vacaville Downtown Financial Center

555 Mason Street Vacaville, CA 95688 707.447.8600

West Sacramento Financial Center

1300 Harbor Boulevard West Sacramento, CA 95691 916.372.1023

Winters Financial Center

48 Main Street Winters, CA 95694 530.795.4501

Woodland Financial Center

11 W. Court Street Woodland, CA 95695 530,661,6000

Department Locations

Davis Real Estate Loan Office

508 Second Street, Suite 104 Davis, CA 95616 530.753.1585 or 800.682.8648

Roseville Real Estate Loan Office

2150 Douglas Blvd., Suite 260 Roseville, CA 95661 916.787.8500 or 866.547.5239

Administration

195 N. First Street Dixon, CA 95620 707.678.3041 Asset Management & Trust Department*

1007 7th Street, Suite M100 Sacramento, CA 95814 916.325.0050

Investment & Brokerage Services*

508 Second Street, Suite 104 Davis, CA 95616 888.716.1548

Small Business Lending

2150 Douglas Blvd., Suite 260 Roseville, CA 95661 916.567.6270 or 888.999.4SBA

*Non-FDIC insured



Toll free 24-hour touch-tone telephone banking: TeleBank • 800.818.24HR

Member FDIC Revision 02/2012