

COMMERCIAL LOAN APPLICATION



Glacier Bank
202 Main Street – PO Box 27
Kalispell, MT 59903
(406)756-4200

Application Date: _____
If you intend to apply for joint credit, please initial below

Applicant

Joint Applicant

APPLICANT

Is your business a Sole Prop. Corporation LLC LLP Partnership Business Individual(s) Trust
Name: _____ Name: _____

Legal Business Name: _____

Mailing Address: _____

Physical Address: _____

City/State/Zip: _____ Cell No.: _____

Tax ID or SSN#: _____ Business No.: _____ Fax No.: _____

Joint Applicants _____

SSN# or Tax ID _____

Are you current on all Payroll, Income and Property Taxes? Yes No

Is your business registered with the Secretary of State? Yes No

Is your business qualified to do business in Montana? Yes No

Is the business or any members a defendant in a suit or legal action? Yes No

Has the business or any members gone through bankruptcy or has a judgment against them? Yes No

Number of Employees (including subsidiaries and affiliates):
At Time of Application _____ If loan is Approved _____ Subsidiaries or Affiliates _____

OFFICERS / PARTNERS / MEMBERS

Name	% of Ownership	Title	Social Security #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

LOAN REQUEST NUMBER 1

Amount \$ _____ Term: _____

Purpose of Loan: _____

Source of Repayment: _____

Collateral Offered	Estimated Value
_____	\$ _____
_____	\$ _____

LOAN REQUEST NUMBER 2

Amount \$ _____ Term: _____

Purpose of Loan: _____

Source of Repayment: _____

Collateral Offered	Estimated Value
_____	\$ _____
_____	\$ _____

PROFESSIONALS AND REFERENCES:

I hereby authorize Lender to contact the below listed references

Accountant: _____ Phone #: _____

Attorney: _____ Phone #: _____

Insurance Agent: _____ Phone #: _____

Trade Reference: _____ Phone #: _____

Trade Reference: _____ Phone #: _____

In addition – Please provide the following:

1. Business Financial Statements (Balance Sheet & Income Statements) for the last three fiscal years and year-to-date information.
2. Business Federal Tax Returns for past three years.
3. Current personal financial statement and past three years Federal Tax Returns on each 20% or greater owner. Please provide the complete return with all schedules and attachments, including form K-1's.
4. Projections for the next twelve months.
5. Any additional information you feel is material in providing us information concerning your loan request.

Business Debts

To Whom Debt is Owed	Monthly Payments	Balance (*)	Collateral Description

Place an (*) next to any debt you intend to pay off with this loan.

ACKNOWLEDGEMENT AND AGREEMENT

Pursuant to the National Privacy Law that took effect July 1, 2001, I authorize Glacier Bank to obtain verification of any information needed to complete my loan request. This information includes but is not limited to my bank account, other assets, employment earning record and the need to order a consumer credit report. I further authorize anyone to accept a photocopy or facsimile of this document as his or her authorization to release such information, including detailed payoff information, to Glacier Bank.

Right to Receive a copy of Appraisal & Valuations for 1st Lien Dwelling secured transactions (Required under 12 CFR § 1002.14). 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.

Everything that I/we have stated in this application is correct to the best of my/our knowledge. I/We understand that you will retain this application whether or not my/our request is approved.

Applicant Signature _____

Date _____

Applicant Signature _____

Date _____

ONLY COMPLETE THE FOLLOWING SECTION IF THE PURPOSE OF THIS REQUEST IS FOR THE PURCHASE, REFINANCE OR HOME IMPROVEMENT OF A DWELLING AND THE BORROWER IS A NATURAL PERSON

INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the Federal Government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender may not discriminate either on the basis of this information, or on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, under Federal regulations, this lender is required to note the information on the basis of visual observation and surname if you have made this application in person. If you do not wish to furnish the information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable state law for the particular type of loan applied for)

BORROWER	<input type="checkbox"/> I do not wish to furnish this information	CO-BORROWER	<input type="checkbox"/> I do not wish to furnish this information
Ethnicity:	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non Hispanic or Latino		<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non Hispanic or Latino
Race:	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Black or African American		<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White
Sex:	<input type="checkbox"/> Female <input type="checkbox"/> Male		<input type="checkbox"/> Female <input type="checkbox"/> Male

To be Completed by Loan Originator:

This information was provided: In a face-to-face interview By the applicant and submitted by fax or mail
 In a telephone interview By the applicant and submitted via e-mail or internet

FOR BANK USE ONLY

CUSTOMER IDENTIFICATION

Existing Glacier Bank Customer <input type="checkbox"/> Yes <input type="checkbox"/> No If no, Description of document(s) used to verify the customer's identity.				
	Doc Type	ID No.	Issue Date	Expiration Date
Applicant				
Co-Applicant				

Other: _____