



COMMERCIAL LOAN APPLICATION PACKAGE

Fort Worth	Mid-Cities	Burleson	Azle
2535 N.E. 28th Street	2080 Precinct Line Road	400 E. Renfro Street	405 Commerce Street
Fort Worth, TX 76106	Hurst, TX 76054	Burleson, TX 76028	Azle, TX 76020
817-625-5511	817-428-9966	817-426-6268	817-444-4235

ITEMS NEEDED



- ☐ Commercial Loan Application (must be signed by all authorized borrowers and guarantors)
- ☐ 3 Years Tax Returns on business
- ☐ 3 Year-End Business Financials (Balance Sheet & Income Statement)
- ☐ Year-To-Date Business Financials (Balance Sheet & Income Statement)
- ☐ Accounts Receivable Aging ☐ Accounts Payable Aging ☐ Inventory/Equipment/Machinery Listing
- ☐ 3 Months Checking Account Statements from current bank
- ☐ Photo ID of all authorized borrowers and guarantors
- ☐ Personal Financial Statement on all authorized borrowers and guarantors
- ☐ 3 Years Personal Tax Returns on all authorized borrowers and guarantors

- ☐ Sole Proprietors
 - ☐ Doing Business As (DBA) registration with County/Counties
 - ☐ Proof of SSN or Employment Identification Number (EIN)

- ☐ Limited Liability Company (LLC)
 - ☐ Certificate of Formation filed with the State of Texas
 - ☐ Articles of Organization including any amendments filed with the State of Texas
 - ☐ Operating Agreement
 - ☐ Meeting Minutes (if applicable)
 - ☐ Doing Business As (DBA) registration with State of Texas (if applicable)
 - ☐ Doing Business As (DBA) registration with County/Counties (if applicable)
 - ☐ Proof of Employment Identification Number (EIN)

- ☐ Corporation
 - ☐ Certificate of Formation filed with the State of Texas
 - ☐ Articles of Incorporation including any amendments filed with the State of Texas
 - ☐ By-Laws
 - ☐ If multiple owners – Corporate Resolution (if granting select person(s) to transmit financial business for the company in general or to open and control accounts specifically)
 - ☐ Meeting Minutes (if applicable)
 - ☐ Doing Business As (DBA) registration with State of Texas (if applicable)
 - ☐ Doing Business As (DBA) registration with County/Counties (if applicable)
 - ☐ Proof of Employment Identification Number (EIN)

- ☐ Partnerships
 - ☐ General Partnerships:
 - ☐ Written Partnership Agreement
 - ☐ Joint Venture Agreement
 - ☐ Limited Partnership, Limited Liability Limited Partnerships:
 - ☐ Partnership Agreement
 - ☐ Certificate of LP/LLLP filed with the State of Texas
 - ☐ Amendments to Partnership Agreement or Joint Venture Agreement (if applicable)
 - ☐ Meeting Minutes listing the current General Partners
 - ☐ If one of the General Partners is another business, an authorizing representative of that business must acknowledge authorization and provide needed business documentation
 - ☐ Proof of Employment Identification Number (EIN)

BUSINESS PROFILE

Business Name:		TIN#/EIN#:	
Doing Business As (if applicable):		State of Organization:	
Business Physical Address:			
Business Mailing Address:			
<input type="checkbox"/> Individual <input type="checkbox"/> Proprietorship <input type="checkbox"/> Corporation __C__S <input type="checkbox"/> General Partnership <input type="checkbox"/> Trust <input type="checkbox"/> Other:			
Nature Of Business:			
Year Business Established:	Current Owner Since:	# Of Locations:	# Of Employees:
Primary Contact:			
Phone:		Fax:	
Email:		Website:	
Gross Revenues For Prior Fiscal Year: 20 \$		Net Profit For Prior Fiscal Year: 20 \$	
Do You Currently Have A Banking Relationship With NBT? <input type="checkbox"/> No <input type="checkbox"/> Yes:			
How Were You Referred To NBT?			

LOAN REQUEST

Amount Requested: \$		Months To Repay or Payments Requested:	
Type of Credit: <input type="checkbox"/> Installment Loan <input type="checkbox"/> Line of Credit <input type="checkbox"/> Commercial Mortgage <input type="checkbox"/> Letter of Credit			
Primary Use/Purpose:	<input type="checkbox"/> Purchase Equipment	<input type="checkbox"/> Purchase Inventory	<input type="checkbox"/> Business Property Improvements
	<input type="checkbox"/> Purchase Vehicle	<input type="checkbox"/> Debt Restructuring	<input type="checkbox"/> Real Estate Acquisition
	<input type="checkbox"/> Working Capital	<input type="checkbox"/> Account Receivables	<input type="checkbox"/> Real Estate Construction
	<input type="checkbox"/> Other:		
Source Of Repayment:			
Collateral Available To The National Bank Of Texas (Including Assets To Be Acquired With Proceeds)			
<input type="checkbox"/> Vehicles/Trailers	Market Value \$	<input type="checkbox"/> Acct Receivable	Market Value \$
<input type="checkbox"/> Equipment	Market Value \$	<input type="checkbox"/> Real Estate	Market Value \$
<input type="checkbox"/> Inventory	Market Value \$	<input type="checkbox"/> Securities/CD/Accts	Market Value \$
<input type="checkbox"/> Machinery	Market Value \$	<input type="checkbox"/> Other	Market Value \$
Are You Applying For Credit From Any Other Source? <input type="checkbox"/> No <input type="checkbox"/> Yes - Where?			

PRINCIPAL OWNERS

Name:	Title:	Ownership %:
Address:	Date of Birth:	SSN#:
Email:	Phone #:	
Are you a US Citizen? Yes: <input type="checkbox"/> No: <input type="checkbox"/> if NO, what country are you a Citizen of:		
Do you work for a foreign consultant or are you a relative of someone who works for or is a figure of a foreign Government:		
Yes: <input type="checkbox"/> No: <input type="checkbox"/>		

Commercial Loan Application

Name:	Title:	Ownership %:
Address:	Date of Birth:	SSN#:
Email:	Phone #:	

Are you a US Citizen? Yes: ☐ No: ☐ if NO, what country are you a Citizen of: _____

Do you work for a foreign consultant or are you a relative of someone who works for or is a figure of a foreign Government:
Yes: ☐ No: ☐

BANK REFERENCES

Deposits:

Name Of Financial Institution	Location	Type Of Account	Acct Number	Balance
				\$
				\$
				\$

Loans:

Name Of Financial Institution	Contact Name	Phone Number.	Balance
			\$
			\$
			\$

BUSINESS REFERENCES

Business Name	Name Of Contact	Address	Phone Number

ADDITIONAL INFORMATION

- 1 Is the business for sale or under agreement that would change the ownership of the business? ☐ YES ☐ NO
- 2 Is the business or guarantor involved in any claim or lawsuit? ☐ YES ☐ NO
- 3 Has the business or guarantor ever been declared bankrupt or had a judgment against it? ☐ YES ☐ NO
- 4 Are there any taxes not currently paid or in dispute? ☐ YES ☐ NO
- 5 Is the business liable for any guaranties, commitments, or other contingency agreements? ☐ YES ☐ NO
- 6 Does the business have a controlling interest in other businesses? ☐ YES ☐ NO
If yes, please provide names & relationships: _____
- 7 Is any collateral offered to NBT currently pledged to other creditors? ☐ YES ☐ NO
If yes, please explain: _____
- 8 I'm interested in having monthly loan payments automatically deducted from checking account... ☐ YES ☐ NO
NBT Account Number(s): _____
Other Bank Name: _____
Other Bank Account Number(s): _____
- 9 Are you a Marijuana-related business? ☐ YES ☐ NO
Marijuana-related business are divided into two categories; directly related and indirectly related. Directly related businesses include growers and providers/dispensaries. Indirectly related businesses provide goods or services to growers/providers (e.g., a commercial landlord that leases property to marijuana-related businesses or a business that sell supplies to a provider.) Further, I agree to notify this bank in writing immediately if any of our accounts are used in conjunction with such activities in the future.

Commercial Loan Application



10 Are you a sexually oriented business?

☐ YES ☐ NO

A sexually oriented business is defined as a business that is part of the sex industry, such as sites of erotic performance and erotic paraphernalia stores. Further, I agree to notify this bank in writing immediately if any of our accounts are used in conjunction with such activities in the future.

DISCLOSURE AND SIGNATURES

The undersigned certifies that all statements in this Application and on each document required to be submitted in connection herewith, including federal income tax returns, are true, correct and complete. The undersigned authorizes NBT Financial ("Bank") to make such inquiries and gather such information as the Bank deems necessary and reasonable concerning any information provided to the Bank on this Application or on any such required document, including inquiries to the Internal Revenue Service, and any Credit Bureau Reporting Agencies. The undersigned further agrees to notify the Bank promptly of any material change in any such information. You agree that we can retain this application whether or not it is approved. Any willful misrepresentation on this application could result in a fine and/or imprisonment under provisions of the US Criminal code. We 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.

☐ **JOINT CREDIT – We Intend To Apply For Joint Credit (initials):** _____

Authorized Signature:	Authorized Signature:
Printed Name: _____ Date: _____	Printed Name: _____ Date: _____

BANK USE

☐ **APPROVED** ☐ **DECLINED** ☐ **COUNTEROFFER**

Reason For Denial, Comments Or Counteroffer (Describe In Detail)	Date Application Taken _____
_____	Date Action Taken _____
_____	Officer Signature _____

Continuation For Additional Principal Owners

ADDITIONAL PRINCIPAL OWNERS AND/OR GUARANTORS

Name:	Title:	Ownership %:
Address:	Date of Birth:	SSN#:
Email:	Phone #:	
Are you a US Citizen? Yes: <input type="checkbox"/> No: <input type="checkbox"/> if NO, what country are you a Citizen of:		
Do you work for a foreign consultant or are you a relative of someone who works for or is a figure of a foreign Government:		
Yes: <input type="checkbox"/> No: <input type="checkbox"/>		

Name:	Title:	Ownership %:
Address:	Date of Birth:	SSN#:
Email:	Phone #:	
Are you a US Citizen? Yes: <input type="checkbox"/> No: <input type="checkbox"/> if NO, what country are you a Citizen of:		
Do you work for a foreign consultant or are you a relative of someone who works for or is a figure of a foreign Government:		
Yes: <input type="checkbox"/> No: <input type="checkbox"/>		

Name:	Title:	Ownership %:
Address:	Date of Birth:	SSN#:
Email:	Phone #:	
Are you a US Citizen? Yes: <input type="checkbox"/> No: <input type="checkbox"/> if NO, what country are you a Citizen of:		
Do you work for a foreign consultant or are you a relative of someone who works for or is a figure of a foreign Government:		
Yes: <input type="checkbox"/> No: <input type="checkbox"/>		

Name:	Title:	Ownership %:
Address:	Date of Birth:	SSN#:
Email:	Phone #:	
Are you a US Citizen? Yes: <input type="checkbox"/> No: <input type="checkbox"/> if NO, what country are you a Citizen of:		
Do you work for a foreign consultant or are you a relative of someone who works for or is a figure of a foreign Government:		
Yes: <input type="checkbox"/> No: <input type="checkbox"/>		

ADDITIONAL DISCLOSURE AND SIGNATURES

The undersigned certifies that all statements in this Application and on each document required to be submitted in connection herewith, including federal income tax returns, are true, correct and complete. The undersigned authorizes NBT Financial Bank ("Bank") to make such inquiries and gather such information as the Bank deems necessary and reasonable concerning any information provided to the Bank on this Application or on any such required document, including inquiries to the Internal Revenue Service, and any Credit Bureau Reporting Agencies. The undersigned further agrees to notify the Bank promptly of any material change in any such information. You agree that we can retain this application whether or not it is approved. Any willful misrepresentation on this application could result in a fine and/or imprisonment under provisions of the US Criminal code. We 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.

Authorized Signature:	Authorized Signature:
Printed Name: _____ Date: _____	Printed Name: _____ Date: _____

Authorized Signature:	Authorized Signature:
Printed Name: _____ Date: _____	Printed Name: _____ Date: _____



Confidential Financial Statement as of

NAME	PHONE NUMBER	DATE OF BIRTH	EMPLOYER	YEARS
NAME OF SPOUSE	# DEPENDENTS	SOCIAL SECURITY #	OCCUPATION POSITION	YEARS
HOME ADDRESS	DRIVER'S LICENSE		BUSINESS ADDRESS	PHONE NUMBER

ASSETS		(OMIT CENTS)	LIABILITIES		(OMIT CENTS)
CASH (Schedule 1)	In This Bank		MORTGAGES PAYABLE (Schedule 7)	Homestead	
	In Other Institutions			Other Wholly-Owned R/E	
SECURITIES (Schedule 2)	Marketable		NOTES PAYABLE (Schedule 6)	Partially Owned R/E	
	Not Publicly Traded			To This Bank	
ACCOUNTS RECEIVABLE				Other Notes Payable	
NOTES RECEIVABLE (Schedule 3)			TAXES OWING	Income Taxes	
NET CASH VALUE OF INS. & ANNUITIES (Schedule 4)				Other Taxes	
REAL ESTATE (Schedule 7)	Homestead		ACCOUNTS PAYABLE		
	Other Wholly-Owned R/E		ESTIMATED CREDIT CARD BALANCE		
	Partial Ownership in R/E		OTHER LIABILITIES (Schedule 8)		
EQUIPMENT & OTHER BUSINESS ASSETS					
DEFERRED COMP. & RETIREMENT PLANS (Schedule 5)					
PERSONAL PROPERTY & AUTOMOBILES					
OTHER ASSETS (Schedule 8)					
			TOTAL LIABILITIES		
			NET WORTH (Assets less Liabilities)		
TOTAL ASSETS			TOTAL CONTINGENT LIABILITIES (Schedule 9)		

INCOME/EXPENSE INFORMATION

SOURCES OF CASH (See note 2 on page 4)		LAST YEAR 20____	THIS YEAR 20____	PROJECTED NEXT YEAR 20____	USES OF CASH		THIS YEAR 20____	PROJECTED NEXT YEAR 20____
RECURRING	SALARY & WAGES				EXPENSES	INCOME TAXES & FICA		
	COMMISSION, BONUS, ETC.					OTHER PAYROLL DED.		
	INTEREST & DIVIDENDS					LIVING EXP. & MISC.		
	RENTAL INCOME					RENTAL EXPENSES		
	OTHER BUSINESS INCOME					OTHER BUSINESS EXP.		
	OTHER:					OTHER:		
SUBTOTAL					SUBTOTAL			
NON-RECURRING	COMMISSION, BONUS, ETC.				DEBT SERVICE	REG SCHED. PYMTS.		
	SALE OF ASSETS					OTHER INTEREST		
	TAX REFUND					OTHER PRINCIPAL		
	OTHER:					CONTINGENT LIAB.		
TOTAL CASH SOURCES					TOTAL CASH USES			
					NET CASH FLOW			

The above financial and supporting schedules, which are submitted to you (Lender) for the purpose of obtaining credit from you, present a true, complete and correct statement of my financial condition as of the date shown. I understand that misrepresenting information on this statement is a criminal offense under federal law punishable by a fine and/or imprisonment.

I will notify you in writing of any material unfavorable change in my financial condition. In the absence of such notice, you may consider this a continuing statement and substantially correct. If I apply for further credit, this statement shall have the same force and effect as if delivered as an original statement of my financial condition at the time I request such further credit. You are authorized to contact any appropriate third parties for the purpose of verifying any stated information herein or at any time furnished by me to you, and obtaining credit information at any time from any of my creditors and/or credit reporting agencies. This financial statement and any other information furnished to you shall be your property. You are authorized to answer questions about your credit experience with me.

SIGNATURE

DATE

SCHEDULE 1 - DEPOSIT ACCOUNTS					
STYLE OF ACCOUNT	NAME & LOCATION WHERE HELD	BALANCE	TYPE OF ACCOUNT	ACCOUNT NUMBER	RESTRICTED? YES OR NO
TOTAL THIS BANK			TOTAL IN OTHER INSTITUTIONS		

SCHEDULE 2 - STOCKS AND BONDS								
NAME OF ISSUER	WHERE TRADED	SHARES	MARKET PER SHARE	MARKET VALUE	COST	PLEGGED? YES OR NO	RESTRICTED* YES OR NO	REGISTERED IN THE NAME OF
TOTAL MARKETABLE					TOTAL NOT TRADED			

*RESTRICTED MEANS TRADING OF THE SECURITY IS SUBJECT TO LIMITATIONS DUE TO LETTER, LEGEND OR CONTROL.

SCHEDULE 3 - NOTES RECEIVABLE							
DUE FROM	ORIGINAL AMOUNT	PRESENT BALANCE	RATE	MATURITY	PAYMENT TERMS	COLLECTABLE YES OR NO	COLLATERAL
TOTAL TO PAGE 1							

SCHEDULE 4 - LIFE INSURANCE AND ANNUITIES (Including employer provided)							
COMPANY	FACE AMOUNT	BENEFICIARY	CASH VALUE	POLICY LOAN	NET CASH VALUE	INSURED	PLEGGED YES OR NO
TOTAL TO PAGE 1							

SCHEDULE 5 - DEFERRED COMPENSATION & RETIREMENT PLANS*							
TRUSTEE OR PLAN ADMINISTRATOR	TYPE OF ACCOUNT	BENEFICIARY	BALANCE VALUE	PLAN LOAN	NET PLAN VALUE	IN NAME OF	ACCESS DATE
TOTAL TO PAGE 1							

*INCLUDES I.R.A. ACCOUNTS, KEOGH, 401(K), FULLY VESTED BENEFIT PLANS, ETC

SCHEDULE 6 - NOTES PAYABLE (Exclude mortgages listed in Schedules 7 & 8)							
DUE TO	ORIGINAL AMOUNT	PRESENT BALANCE	RATE	MATURITY	PAYMENT TERMS	CURRENT YES OR NO	COLLATERAL**
TOTAL THIS BANK			TOTAL IN OTHER INSTITUTIONS				

**IF YOU ARE A COMAKER, LIST THE LOAN IN THIS SCHEDULE AND STATE THE BORROWER'S NAME IN THIS COLUMN.

SCHEDULE 7 - REAL ESTATE

#	LOCATION, SIZE, IMPROVEMENTS	YEAR ACQUIRED	COST & IMPROVEMENTS	MARKET VALUE	PRESENT BALANCE	LIENHOLDER	MATURITY	RATE	ANNUAL PAYMENTS	ANNUAL INCOME	TAX CURRENT	
1	HOMESTEAD									N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
OTHER WHOLLY OWNED REAL ESTATE												
2											<input type="checkbox"/> Yes <input type="checkbox"/> No	
3											<input type="checkbox"/> Yes <input type="checkbox"/> No	
4											<input type="checkbox"/> Yes <input type="checkbox"/> No	
5											<input type="checkbox"/> Yes <input type="checkbox"/> No	
						TOTALS TO PAGE 1						

#	PARTIAL OWNERSHIP IN REAL ESTATE	%	YEAR ACQUIRED	COST & IMPROVEMENTS	MARKET VALUE	PRESENT BALANCE	LIENHOLDER	MATURITY	RATE	ANNUAL PAYMENTS	ANNUAL INCOME	TAX CURRENT
1												<input type="checkbox"/> Yes <input type="checkbox"/> No
2												<input type="checkbox"/> Yes <input type="checkbox"/> No
3												<input type="checkbox"/> Yes <input type="checkbox"/> No
4												<input type="checkbox"/> Yes <input type="checkbox"/> No
5												<input type="checkbox"/> Yes <input type="checkbox"/> No
YOUR PORTION OF MARKET VALUE AND DEBT						TOTALS TO PAGE 1						

REGARDING SCHEDULES 7 AND 8, IF THE AMOUNT OF DEBT WHICH CAN BE LEGALLY ENFORCED AGAINST YOU EXCEEDS YOUR % OWNERSHIP, PLEASE DETAIL IN SCHEDULE 9.

SCHEDULE 8 - OTHER ASSETS/LIABILITIES (INCLUDING PARTNERSHIP INTERESTS)

	TYPE OF ASSET/LIABILITY, LOCATION, DESCRIPTION AND SOURCE OF VALUATION	%	YEAR ACQUIRED	DATE OF VALUATION	PRESENT VALUATION	RELATED DEBT (MARK "*" BY AMOUNT IF NOT PERSONALLY LIABLE)				NET OPERATING REVENUE*	TAX CURRENT
						PRESENT BALANCE	LIENHOLDER	MATURITY	RATE		
1											<input type="checkbox"/> Yes <input type="checkbox"/> No
2											<input type="checkbox"/> Yes <input type="checkbox"/> No
3											<input type="checkbox"/> Yes <input type="checkbox"/> No
4											<input type="checkbox"/> Yes <input type="checkbox"/> No
5											<input type="checkbox"/> Yes <input type="checkbox"/> No
						TOTALS TO PAGE 1					

*NET OPERATING REVENUE AFTER OPERATING EXPENSES.

SCHEDULE 9 - CONTINGENT LIABILITIES	
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331	332
333	

INSTRUCTIONS: STATE TOTAL AMOUNT BY TYPE OF LIABILITY AND PROVIDE APPROPRIATE DETAIL IN THE SPACE BELOW.

1. AS GUARANTOR OR ENDORSOR	5. STANDBY LETTER OF CREDIT
2. ON LEASES OR CONTRACTS	6. LIABILITY IN EXCESS OF % IN PARTIALLY OWNED ASSETS
3. LEGAL CLAIMS OR JUDGMENTS	7. TAX LIABILITY IF ASSETS SOLD AT STATED VALUES
4. INCOME TAX CLAIM OR DISPUTED AMOUNT	8. OTHER

TYPE #	NAME OF PARTY RECEIVING BENEFIT	OBLIGATION AMOUNT TIMING OF PAYMENTS	EXPLANATION INCLUDING WHETHER YOU ANTICIPATE HAVING TO HONOR THIS LIABILITY	MATURITY OR EXPIRATION DATE

BUSINESS IN WHICH I AM A PARTNER, OFFICER, PRINCIPAL OWNER, ETC.	NATURE OF BUSINESS	BUSINESS' BANK OF ACCOUNT

I understand that the following questions are addressed to me and I have answered them as appropriate.

- ☐ Yes ☐ No 1. Are any of the Assets held in trust, in an estate or in any other name or capacity?

☐ Yes ☐ No 2. Were any of the Assets (i) owned or claimed by your spouse before marriage; or (ii) acquired by your spouse during marriage by gift or inheritances; or (iii) recovered for personal injuries sustained by your spouse during marriage; or (iv) acquired from the proceeds of liquidation of any of the proceeding?

☐ Yes ☐ No 3. Are any of your real estate properties used by you in your business?

☐ Yes ☐ No 4. Do any of your Assets secure any debts which have not been reported in the preceding schedules?

☐ Yes ☐ No 5. Are you a party to any suit or are there any unsatisfied judgements against you?

☐ Yes ☐ No 6. Have you been through bankruptcy or made an assignment for benefit of creditors?

I have explained fully under "Additional Remarks" on this page any "Yes" answers to the foregoing questions.

- ☐ Yes ☐ No 7. I have made a will; the executor is _____

ADDITIONAL REMARKS

NOTES: 1. Spouse information need not be revealed unless you reside in Texas or other community property state.

- NOTES:**
1. Spouse information need not be revealed unless you reside in Texas or other community property state.
 2. Alimony, child support or separate maintenance income need not be revealed unless you wish to have them considered as a basis for repaying the requested credit.