



REI Corporate Headquarters
2912 Enterprise Drive
Durant, OK 74701
580.924.5094 ~ Fax 580.920.2745
www.reibusinesslending.org

Loan Application & Supporting Forms

This checklist has been provided to assist you through the process of gathering the necessary information for the evaluation of your loan request. **Complete** information will be necessary to process your application. If you need assistance completing the loan application please give us a call at 800.658.2823.

All loan applicants must complete the following:

- ___ 1. Completed Loan Application* (Use full legal name(s))
- ___ 2. Personal Financial Statement* complete on all owners, partners, officers, directors, key employees, guarantors, stockholders with 20% or more ownership of applicant business.
- ___ 3. Three years Personal Federal Tax Returns, with all schedules, on each individual referred to in #2 above.
- ___ 4. Owner/Management Resume* on all individuals referred to in #2 above.
- ___ 5. Copy of Drivers License on all individuals referred to in #2 above.
- ___ 6. Statement of Personal History* on all individuals referred to in #2 above.
- ___ 7. Business plan or detailed description of the business.
- ___ 8. Projections for the current and future three fiscal years & assumptions to the projections. *
- ___ 9. Copy of Corporate, LLC or Partnership docs, if applicable.
- ___ 10. Copy of Franchise Agreements and/or Fuel Supply Agreement, if applicable.
- ___ 11. List of machinery/equipment and/or furniture/fixtures to be acquired, if applicable.
- ___ 12. List of machinery & equipment or furniture & fixtures, including model & serial number, offered as collateral.
- ___ 13. Itemized breakdown of working capital, if applicable.
- ___ 14. Affiliate Company(s) Federal Tax Returns for three years, plus a current interim statement. (An affiliate company is one in which any key principal in the application has a 20% or more ownership interest or in which they are a general partner or operating partner.), if applicable.
- ___ 15. Copies of Permits/Licenses necessary for the business.
- ___ 16. D&B Number.

If an existing business, provide items 1-16 and the following:

- ___ 17. Business tax returns for the past three years.
- ___ 18. Complete financial statements (including balance sheet and income statement for the past three years) plus interim statements no more than 60 days old.

- ___ 19. Detailed Business Debt Schedule, balancing with interim financial statements. *
- ___ 20. A recent aging of account receivable & payable, balancing with interim financial
- ___ 21. statements. 4506-C form on business – (to be completed by owner or officer of business). *

If purchasing an existing business, provide items 1-16 and the following:

- ___ 22. Reason for the sale of the business.
- ___ 23. Business tax returns for the past three years.
- ___ 24. Complete financial statements (including balance sheet and income statement for the past three years) plus interim statements no more than 60 days old.
- ___ 25. Copy of Sales Agreement.
- ___ 26. 4506-C form on business – (to be completed by seller of business).

If real estate and/or construction is involved, provide items 1-16 and the following:

- ___ 27. Copy of Sales Agreement.
- ___ 28. Copy of Construction Contract, Cost Breakdown, and/or Bids, if applicable.
- ___ 29. Environmental Questionnaire, including legal description, on real estate being purchased or offered as collateral - (to be completed by owner of real estate). *
- ___ 30. Name of Interim Lender.

If refinancing existing debt, provide items 1-16 and the following:

- ___ 31. Copies of bank transcripts on loans to be refinanced.

* Forms Enclosed

**REI Oklahoma Headquarters
2912 Enterprise Drive
Durant, OK 74701
580.924.5094
580.920.2745 – Fax
www.reibusinesslending.org**

FOR MORE INFORMATION CALL 1-800-658-2823

Please be advised that all financial statements and tax returns must have original signatures and dates. After photocopying financial statements and tax returns, **please sign again and affix current date.**

LOAN REQUEST FORM

APPLICANT COMPANY:

Company Name _____ Phone _____
Address _____ City _____ State _____ Zip _____
Type of Business _____ Date Established _____
Type of Entity: Corporation _____ LLC / PLLC _____ Sole Proprietorship _____
Federal ID # _____ NAICS Code _____
D & B # _____
Current number of employees _____ FT _____ PT Number of jobs to be created _____ FT _____ PT
E-Mail Address _____

OWNERSHIP OF APPLICANT COMPANY: List all officers, directors, partners, owners & co-owners, and all stockholders with 20% or more of total stock issued.

NAME	TITLE	% OF OWNERSHIP
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

AFFILIATES: List all business concerns in which the applicant company or any of the individuals listed in the Ownership Section above have an ownership interest of 20% or more.

COMPANY NAME	OWNER (Applicant company or individuals)	% OF OWNERSHIP
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

ESTIMATED PROJECT:

Loan Amount Needed:	\$ _____
New building construction (provide construction bids)	\$ _____
Land and/or building acquisition (provide purchase agreement)	\$ _____
Building improvements or repairs (provide bids)	\$ _____
Acquisition of machinery/equipment (provide detailed list)	\$ _____
Other Costs	
Working capital	\$ _____
Inventory	\$ _____
Furniture/Fixtures	\$ _____
Refinance	\$ _____

TOTAL ESTIMATED PROJECT AMOUNT	\$ _____
BORROWER'S FUNDS TO BE USED IN PROJECT	\$ _____

LOAN REQUEST FORM

BUSINESS OWNERS:

Please provide the name, home address, date of birth and social security number for all principals of the business. This information will be used for obtaining credit reports.

Full Legal Name _____

Address _____

% Owned _____ Date of Birth _____ Social Security Number _____

Full Legal Name _____

Address _____

% Owned _____ Date of Birth _____ Social Security Number _____

Full Legal Name _____

Address _____

% Owned _____ Date of Birth _____ Social Security Number _____

Full Legal Name _____

Address _____

% Owned _____ Date of Birth _____ Social Security Number _____

REFERENCES: (For existing businesses only)

Please provide references from all financial institutions with whom your company has significant borrowing, leasing or depository relationship (attach additional sheets if necessary)

Financial Institution: _____ Financial Institution: _____

Address: _____ Address: _____

Contact person & phone number _____ Contact person & phone number _____

Nature & extent of relationship (include account numbers) _____ Nature & extent of relationship (include account numbers) _____

If borrowing or leasing relationship, include:

Collateral: _____

Guarantors: _____

If borrowing or leasing relationship, include:

Collateral: _____

Guarantors: _____

SEASONAL INFLUENCES TO THE BUSINESS:

STATISTICAL INFORMATION

The U.S. Small Business Administration (SBA) has requested that we obtain the following information for statistical purposes only. Please check all those that apply:

Business Owned by: ☐ Female (100%) ☐ Female (51%) ☐ Male (100%) ☐ Male (51%)

Veteran Status: ☐ Non-Veteran ☐ Vietnam-era Veteran ☐ Other Veteran

Race/Ethnicity: ☐ Black ☐ Hispanic ☐ Puerto Rican ☐ Asian/Pacific Islander
☐ Eskimo/Aleuts ☐ American Indian ☐ Multi Group ☐ White

Number of Female employees _____ Number of Minority employees _____

As of the date of this application, your combined household income is: \$ _____

Number of people in your household: _____

Please indicate below how you became aware of our loan programs.

- ☐ Newspaper
- ☐ Radio
- ☐ REI Business Lending Website
- ☐ Internet Search
- ☐ Newsletter
- ☐ Referral ☐ Personal Referral, by whom _____
- ☐ Organization _____
- ☐ Facebook
- ☐ Other _____

Does any principal of the business have delinquent and/or past due child support? Yes

☐

No

☐

If yes, please provide detailed explanation below:

Has the business, or any principals of the business, been involved in bankruptcy? Yes ☐

No

☐

If yes, please provide a copy of the bankruptcy documents and provide detailed explanation below:

Is the business, or any principals of the business, currently involved in lawsuit or pending litigation?

Yes ☐

No ☐

If yes, please provide detailed explanation below:

Has the business, or any principals of the business, received previous government financing?Yes ☐ No ☐
(SBA, Rural Development, VA, FHA, etc)

If yes, please complete the following:

Borrower Name	Federal Source	Loan Program Type	Loan Number	Original Balance	Current Balance	Status

Additional Comments:

I give authorization to REI to verify government debt with the appropriate lending agency and authorize the agency to release information to REI concerning the status of this debt.

Signature

Date

Signature

Date

AUTHORIZATION TO RELEASE INFORMATION

I/We hereby authorize the release to Rural Enterprises of Oklahoma, Inc. of any and all information they may require at any time for any purpose related to our credit transaction with them including but not limited to all information which I/we provide to the Certified Development Company and the Certified Development Company acquires with request to my/our loan application. We further authorize Rural Enterprises of Oklahoma, Inc. to release such information to any entity it deems necessary for any purpose related to our credit transaction with them.

I/We hereby certify that the enclosed information (plus any attachments or exhibits) is valid and correct to the best of my/our knowledge.

Signature _____ Date _____

Signature _____ Date _____

Signature _____ Date _____

Signature _____ Date _____

OWNER / MANAGEMENT RESUME

(Please copy if additional forms are required)

Please fill in all spaces. Use full first, middle, last and maiden names, no initials. If an item is not applicable, please indicate so. You may include additional relevant information on a separate exhibit. Sign and date where indicated.

Name _____ SS# _____
First Middle Maiden Last

Date of Birth _____ Place of Birth _____

Residence Phone _____ Business Phone _____ Fax _____

Residence Address _____
Street City State Zip

Previous Address _____
Street City State Zip

Lived there from _____ to _____
Month and Year Month and Year

Spouse's Name _____ SS# _____
First Middle Maiden Last

Are you a U. S. Citizen? Yes ☐ No ☐ If no, give Alien Registration Number _____

Have you ever been charged with or convicted of any criminal offense other than a misdemeanor involving a motor vehicle violation? Yes ☐ No ☐ If yes, furnish details in a separate exhibit.

Are you involved in any lawsuit at this time or have you ever filed for personal bankruptcy protection? Yes ☐ No ☐ If yes, furnish details in a separate exhibit.

Have you ever obtained credit under any other name(s)? Yes ☐ No ☐ If yes, furnish details in a separate exhibit.

EDUCATION:

College or Technical Training. Name and Location	Dates Attended From/To	Major	Degree or Certificate
_____	_____	_____	_____
_____	_____	_____	_____

WORK EXPERIENCE: (List chronologically, beginning with present employment)

Company Name/Location _____
From _____ To _____ Title _____
Duties _____

Company Name/Location _____
From _____ To _____ Title _____
Duties _____

Company Name/Location _____
From _____ To _____ Title _____
Duties _____

Signature _____ Date _____

BUSINESS DEBT SCHEDULE

COMPANY NAME _____

DATE: _____

(Same as Interim Balance Sheet.)

This schedule should include loans for contracts/notes payable and lines of credit, ***not*** accounts payable or accrued liabilities.

CREDITOR Name/Address	ORIGINAL DATE	ORIGINAL AMOUNT	TERM OR MATURITY DATE	PRESENT BALANCE	INTEREST RATE	MONTHLY PAYMENT	COLLATERAL OR SECURITY	WHAT WAS LOAN FOR?
TOTAL PRESENT BALANCE (Total must agree with balance shown on Interim Balance Sheet.)								

Signature _____ Date _____

Three Year Projection

	Year One	Year Two	Year Three
Sales			
COGS			
Gross Profit			
Expenses:			
Owner Withdrawals			
Employee Wages			
Accounting & Legal Fees			
Advertising			
Rent			
Supplies			
Utilities/Phone/Internet			
Taxes/Licenses			
Interest			
Repairs & Maintenance			
Insurance			
Software/Subscriptions			
Miscellaneous			
Total Expenses			
Net Profit			

OFFICE OF MANAGEMENT AND TECHNICAL ASSISTANCE

7(J) ASSISTANCE ELIGIBILITY

SELF-CERTIFICATION FORM

A. Client small business must sign the following statement:

I hereby certify that my business meets the size standards established for small businesses as set forth in the regulations at 13 C.F.R. Part 121.

Client Signature

Date

Client Name (Printed in Full)

B. Client small business/individuals must elect one of the following four eligibility criteria and sign below:

For the purposes of receiving assistance under the U.S. Small Business Administration's 7(j) grant program, I hereby certify in good faith that I and/or my firm meet one of the following eligibility criteria. [*Please designate the applicable criteria with a check mark*]:

_____ My firm is a participant in SBA's 8(a) Business Development Program;

OR

_____ I am/my firm is located in a HUBZone. Refer to the following link to determine qualifying locations: <http://map.sba.gov/hubzone/maps/>;

OR

_____ My firm is an Economically Disadvantaged Women-Owned Small Business;

OR

_____ I am/my firm is located in an area of high unemployment, meaning that my county's OR metropolitan area's annualized unemployment rate exceeds the national annualized unemployment rate. Refer to the following three Department of Labor Data maps to determine qualifying locations:

- <http://data.bls.gov/map/MapToolServlet?survey=la&map=county&seasonal=u> (locate the county's current annualized unemployment rates)
- <http://data.bls.gov/map/MapToolServlet?survey=la&map=msa&seasonal=u> (locate the metro area's current annualized unemployment rates)
- <http://data.bls.gov/timeseries/LNU04000000> (locate the current national annualized unemployment rate);

OR

_____ I am an individual with a low income, or my firm is majority-owned by one or more individuals each with a low income. "Low income" means an individual whose income does not exceed the following levels, as reflected in last year's tax return:

- ☐ \$ 42,400 for metropolitan areas
- ☐ \$ 31,300 for non-metropolitan areas

Date

Client Signature

Name (Printed in full)

C. Individual is self-certifying as Native:

_____ I am Native American or Alaska Native

Please fill out the following information:

Business Name: _____

Address (Street, City, State, Zip Code): _____

Phone: _____ Email: _____



PERSONAL FINANCIAL STATEMENT

U.S. SMALL BUSINESS ADMINISTRATION

The purpose of this form is to collect information about the Business Applicant and its owners' financial condition. SBA uses the information required by this Form 413 as one of a number of data sources in analyzing the repayment ability and creditworthiness of an applicant for an SBA loan or, with respect to a surety bond, to assist in recovery in the event that the contractor defaults on the contract. SBA also uses the information to assess whether an individual meets the economic disadvantage threshold for the Women-Owned Small Business (WOSB) Program and the 8(a) Business Development (BD) Program. Submission of this information is required as part of your application for assistance. Failure to provide the information would impact the agency's decision on your application.

To complete this form

- 1) Check all that apply.
- 2) Complete the form in its entirety (attached a separate sheet, if necessary)
- 3) Review the applicable certifications and sign (spousal signature, if required)

<input type="checkbox"/> 7(a) loan / 504 loan / Surety Bonds
Complete this form for: (1) each proprietor; (2) general partner; (3) managing member of a limited liability company (LLC); (4) each owner of 20% or more of the equity of the Applicant; and (5) any person providing a guaranty on the loan (including the assets and liabilities of the owner's spouse and any minor children).
Return completed form to: For 7(a) loans: the Lender processing the application for SBA guaranty For 504 loans: the Certified Development Company (CDC) processing the application for SBA guaranty For Surety Bonds: the Surety Company or Agent processing the application for surety bond guarantee

<input type="checkbox"/> Disaster Business Loan Application (Excluding Sole Proprietorships)
Complete this form for: (1) each applicant; (2) each general partner; (3) each managing member of a limited liability company (LLC); (4) each owner of 20% or more of the equity of the Applicant business; and (5) any person providing an unlimited guaranty on the loan.
Return completed form to: Disaster Processing and Disbursement Center at 14925 Kingsport Road, Fort Worth, TX 76155-2243 or FAX to 1-202-481-1505 or disasterloans@sba.gov

<input type="checkbox"/> Women Owned Small Business (WOSB) Federal Contracting Program
This form must be completed by each individual claiming economic disadvantage in connection with the SBA's Women-Owned Small Business (WOSB) Federal Contracting Program. A separate form must be completed by the individual's spouse, unless the individual and the spouse are legally separated. Use attachments if necessary. Each attachment must be identified as a part of this statement and signed. In addition, each individual claiming economic disadvantage must update the form as changes arise, but at least annually, to ensure the information is current, accurate and complete.
SBA's regulations state that to be considered economically disadvantaged for purposes of the WOSB Program, a woman must have an adjusted gross income averaged over the three prior fiscal years of \$350,000 or less; less than \$6 million in the fair market value of all her assets (to include her primary residence and value of the business concern); and less than \$750,000 in personal net worth (excluding equity interest in her personal residence and ownership interest in the business, and funds invested in a retirement account that are unavailable until retirement age). 13 C.F.R. §127.203. The information contained in this form must be submitted and certified through beta.certify.sba.gov

<input type="checkbox"/> 8(a) Business Development Program
8(a) applicants must show that 51% of the firm is owned by one or more individuals determined by the SBA to be socially and economically disadvantaged. The information contained in this form must be submitted by each socially and economically disadvantaged individual using their one time 8(a) eligibility to qualify this firm for 8(a) certification. If married, the spouse must complete a separate SBA Form 413, except when the individual and the spouse are legally separated. If separated, provide copy of separation document.
SBA's regulations state that to be considered economically disadvantaged for purposes of the 8(a) Business Development Program, an individual must have an adjusted gross income averaged over the three prior fiscal years of \$350,000 or less; less than \$6 million in the fair market value of all assets (to include primary residence and value of the business concern); and less than \$750,000 in personal net worth (excluding equity interest in the personal residence and ownership interest in the business, and funds invested in a retirement account that are unavailable until retirement age). 13 C.F.R. §124.104.
Note: Please complete this form with Personal Information not Business Information and divide all jointly owned assets and liabilities, as appropriate with spouse or others. The information contained in this form must be submitted and certified through certify.sba.gov . For additional information go to: http://www.sba.gov/8abd

Name	Business Phone (xxx-xxx-xxxx)
Home Address	Home Phone (xxx-xxx-xxxx)
City, State, & Zip Code	
Business Name of Applicant/Borrower	
Business Address (if different than home address)	
Business Type: <input type="checkbox"/> Corporation <input type="checkbox"/> S-Corp. <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor (does not apply to ODA applicant)	
This information is current as of [month/day/year] (within 90 days of submission for 7(a)/504/SBG/ODA/WOSB or within 30 days of submission for 8(a) BD)	
WOSB applicant only, Married <input type="checkbox"/> Yes <input type="checkbox"/> No	

ASSETS (Omit Cents)	LIABILITIES (Omit Cents)
Cash on Hand & in banks.....	Accounts Payable.....
Savings Accounts.....	Notes Payable to Banks and Others..... (Describe in Section 2)
IRA or Other Retirement Account..... (Describe in Section 5)	Installment Account (Auto)..... Mo. Payments
Accounts & Notes Receivable..... (Describe in Section 5)	Installment Account (Other)..... Mo. Payments
Life Insurance – Cash Surrender Value Only..... (Describe in Section 8)	Loan(s) Against Life Insurance.....
Stocks and Bonds..... (Describe in Section 3)	Mortgages on Real Estate..... (Describe in Section 4)
Real Estate..... (Describe in Section 4)	Unpaid Taxes..... (Describe in Section 6)
Automobiles..... (Describe in Section 5, and include Year/Make/Model)	Other Liabilities..... (Describe in Section 7)
Other Personal Property..... (Describe in Section 5)	Total Liabilities.....
Other Assets..... (Describe in Section 5)	Net Worth.....
Total	Total Must equal total in assets column.

Section 1. Source of Income.	Contingent Liabilities
Salary.....	As Endorser or Co-Maker.....
Net Investment Income.....	Legal Claims & Judgments.....
Real Estate Income.....	Provision for Federal Income Tax.....
Other Income (Describe below).....	Other Special Debt.....

Description of Other Income in Section 1 (Alimony or child support payments should not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income)

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.)

I authorize the SBA/Lender/Surety Company to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness.

CERTIFICATION: (to be completed by each person submitting the information requested on this form and the spouse of any 20% or more owner when spousal assets are included)

By signing this form, I certify under penalty of criminal prosecution that all information on this form and any additional supporting information submitted with this form is true and complete to the best of my knowledge. I understand that SBA or its participating Lenders or Certified Development Companies or Surety Companies will rely on this information when making decisions regarding an application for a loan, surety bond, or participation in the WOSB or 8(a) BD program. I further certify that I have read the attached statements required by law and executive order.-

Signature _____

Date _____

Print Name _____

Social Security No. _____

Signature _____

Date _____

Print Name _____

Social Security No. _____

NOTICE TO 7(a) LOAN, 504 LOAN AND SURETY BOND APPLICANTS: CRIMINAL PENALTIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:

Knowingly making a false statement on this form is a violation of Federal law and could result in criminal prosecution, significant civil penalties, and a denial of your loan or surety bond application. A false statement is punishable under 18 U.S.C. §§ 1001 and 3571 by imprisonment of not more than five years and/or a fine of up to \$250,000; under 15 U.S.C. § 645 by imprisonment of not more than two years and/or a fine of not more than \$5,000; and, if submitted to a Federally-insured institution, a false statement is punishable under 18 U.S.C. § 1014 by imprisonment of not more than thirty years and/or a fine of not more than \$1,000,000. Additionally, false statements can lead to treble damages and civil penalties under the False Claims Act, 31 U.S.C. § 3729, and other administrative remedies including suspension and debarment.

NOTICE TO DISASTER BUSINESS LOAN APPLICANTS: CRIMINAL PENALTIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:

Whoever wrongfully misapplies the proceeds of an SBA disaster loan shall be civilly liable to the Administrator in an amount equal to one-and-one half times the original principal amount of the loan under 15 U.S.C. § 636(b). In addition, any false statement or misrepresentation to SBA may result in criminal, civil or administrative sanctions including, but not limited to: 1) fines and imprisonment, or both, under 15 U.S.C. § 645, 18 U.S.C. § 1001, 18 U.S.C. § 1014, 18 U.S.C. § 1040, 18 U.S.C. § 3571, and any other applicable laws; 2) treble damages and civil penalties under the False Claims Act, 31 U.S.C. § 3729; 3) double damages and civil penalties under the Program Fraud Civil Remedies Act, 31 U.S.C. § 3802; and 4) suspension and/or debarment from all Federal procurement and non-procurement transactions. Statutory fines may increase if amended by the Federal Civil Penalties Inflation Adjustment Act Improvements Act of 2015.

NOTICE TO APPLICANTS OR PARTICIPANTS IN THE WOSB FEDERAL CONTRACTING PROGRAM: CRIMINAL PENALTIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:

Any person who misrepresents a business concern's status as a WOSB or EDWOSB, or makes any other false statement in order to influence the WOSB Program eligibility determination or other review process in any way (e.g., protest), shall be: (1) subject to fines and imprisonment of up to 5 years, or both, as stated in Title 18 U.S.C. § 1001; (2) subject to fines of up to \$500,000 or imprisonment of up to 10 years, or both, as stated in Title 15 U.S.C. § 645; (3) subject to civil and administrative remedies, including suspension and debarment; and (4) ineligible for participation in programs conducted under the authority of the Small Business Act.

NOTICE TO APPLICANTS OR PARTICIPANTS IN THE 8(a) BUSINESS DEVELOPMENT PROGRAM: CRIMINAL PENALTIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:

Any person who misrepresents a business concern's status as an 8(a) BD Program participant or SDB concern, or makes any other false statement in order to influence the 8(a) certification or other review process in any way (e.g., annual review, eligibility review), shall be: (1) subject to fines and imprisonment of up to 5 years, or both, as stated in Title 18 U.S.C. § 1001; (2) subject to fines of up to \$500,000 or imprisonment of up to 10 years, or both, as stated in Title 15 U.S.C. § 645; (3) subject to treble damages and civil penalties under the False Claims Act, 31 U.S.C. § 3729; (4) subject to administrative remedies, including suspension and debarment; and (5) ineligible for participation in programs conducted under the authority of the Small Business Act.

PLEASE NOTE: According to the Paperwork Reduction Act, you are not required to respond to this request for information unless it displays a valid OMB Control Number. The estimated average burden hours for the completion of this form is 1.5 hour per response. If you have questions or comments concerning this estimate or any other aspect of this information collection, please contact: Director, Records Management Division, Small Business Administration, 409 Third Street SW, Washington, D.C. 20416, and SBA Desk Officer, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, D.C. 20503. PLEASE DO NOT SEND COMPLETED FORMS TO OMB.

PLEASE READ, DETACH, AND RETAIN FOR YOUR RECORDS

Privacy Act (5 U.S.C. 552a) and Debt Collection Improvement Act (31 U.S.C. 7701)

Authorities and Purpose for Collecting Information: SBA is collecting the information on this form, including social security numbers and other personal information, to make a character and credit or other eligibility decision in connection with you or your company's application for SBA assistance. SBA may also use social security numbers for the purpose of collecting and reporting on any delinquent fees or other amounts owed SBA, where applicable.

For purposes of SBA's financial assistance programs, 31 U.S.C. 7701 requires loan applicants and guarantors, or any indemnitor of a surety bond to provide their social security numbers, or other taxpayer identification numbers. Failure to provide this information would affect your ability to obtain an SBA loan or bond. For other individuals signing this form, the submission of the social security number is voluntary and failure to provide your social security number may not affect any right, benefit or privilege to which you are entitled. However, your social security number or other taxpayer identification number helps SBA to distinguish you from other individuals with the same or similar name or other personal identifier. This use is permitted under Executive Order 9397. Personal information collected is protected to the extent permitted by law, including the Freedom Information Act, 5 U.S.C. 552, and the Privacy Act 5 U.S.C. 552. Such information is maintained pursuant to SBA's Privacy Act System of Records at

<https://www.sba.gov/sites/default/files/2020-01/sba-sorns.pdf>.

Right to Financial Privacy Act of 1978 (12 U.S.C. 3401) -- This is notice to you as required by the Right to Financial Privacy Act of 1978, of SBA's access rights to financial records held by financial institutions that are or have been doing business with you or your business, including any financial institutions participating in a loan or loan guaranty. The law provides that SBA shall have a right of access to your financial records in connection with its consideration or administration of assistance to you in the form of a Government guaranteed loan or guaranteed bond. SBA is required to provide a certificate of its compliance with the Act to a financial institution in connection with its first request for access to your financial records, after which no further certification is required for subsequent accesses. The law also provides that SBA's access rights continue for the term of any approved loan guaranty agreement or any approved bond agreement. No further notice to you of SBA's access rights is required during the term of any such agreement. The law also authorizes SBA to transfer to another Government authority any financial records included in an application for a loan or bond guarantee, or concerning an approved loan or loan guarantee or bond guarantee, as necessary to process, service or foreclose on a loan guaranty or collect on a defaulted loan guaranty, or to process or service the bond guarantee. No other transfer of your financial records to another Government authority will be permitted by SBA except as required or permitted by law.

Freedom of Information Act (5 U.S.C. 552)

This law provides, with some exceptions, that SBA must supply information contained in agency files and records to a person requesting it. Information about approved loans that will be automatically released includes, among other things, statistics on our loan programs (individual borrowers are not identified in the statistics), and other information such as the names of the borrowers (and their officers, directors, stockholders or partners), the collateral pledged to secure the loan, the amount of the loan, its purpose in general terms, and the maturity. With respect to SBA's bond guarantee program, SBA will release, among other things, statistics on the Surety Bond Guarantee (SBG) programs and other information such as the names of small businesses (and their officers, directors, stockholders or partners) and the amount of the bond guarantees. Proprietary data on a borrower would not routinely be made available to third parties. All requests under this Act are to be addressed to the nearest SBA office and be identified as a Freedom of Information request.

Please Read Carefully and Fully Complete: SBA uses Form 912 as one part of its assessment of program eligibility. Please reference SBA Regulations and Standard Operating Procedures if you have any questions about who must submit this form and where to submit it. For further information, please call SBA's Answer Desk at 1-800-U-ASK-SBA (1-800-827-5722), or check SBA's website at www.sba.gov. **DO NOT SEND COMPLETED FORMS TO OMB as this will delay the processing of your application; send forms to the address provided by your lender or SBA representative.**

1a. Name and Address of Applicant (Firm Name)(Street, City, State, ZIP Code and E-mail)		SBA District/Disaster Area Office	
		Amount Applied for (when applicable)	File No. (if known)
1b. Personal Statement of: (State name in full, if no middle name, state (NMN), or if initial only, indicate initial.) List all former names used, and dates each name was used. Use separate sheet if necessary. FirstMiddleLast	2. Give the percentage of ownership in the small business		Social Security No.
	3. Date of Birth (Month, day, and year)		
	4. Place of Birth: (City & State or Foreign Country)		
	5. U.S. Citizen? <input type="checkbox"/> YES <input type="checkbox"/> NO INITIALS: _____ If no, are you a Lawful Permanent resident alien? <input type="checkbox"/> YES <input type="checkbox"/> NO Alien Registration number _____ If no, country of citizenship: _____		
6. Present residence address: From: To: Address: Home Telephone No. (Include Area Code): Business Telephone No. (Include Area Code):		Most recent prior address (omit if over 10 years ago): From: To: Address:	
PLEASE SEE REVERSE SIDE FOR EXPLANATION REGARDING DISCLOSURE OF INFORMATION AND THE USES OF SUCH INFORMATION. YOU MUST INITIAL YOUR RESPONSES TO QUESTIONS 5,7,8 AND 9. IF YOU ANSWER "YES" TO 7, 8, OR 9, YOU MUST FURNISH DETAILS ON A SEPARATE SHEET. INCLUDE DATES, LOCATION, FINES, SENTENCES, MISDEMEANOR OR FELONY, DATES OF PAROLE/PROBATION, UNPAID FINES OR PENALTIES, NAME(S) UNDER WHICH CHARGED, AND ANY OTHER PERTINENT INFORMATION. AN ARREST OR CONVICTION 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.			
7. 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: _____			
8. Have you <u>been</u> arrested in the past six months for any criminal offense? <input type="checkbox"/> Yes <input type="checkbox"/> No INITIALS: _____			
9. For any <u>criminal</u> offense – other than a minor vehicle violation – have you ever:1) been convicted; 2) pleaded guilty; 3) pleaded 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: _____			
10. I authorize the Small Business Administration to request criminal record information about me from criminal justice agencies for the purpose of determining my eligibility for programs authorized by the Small Business Act and the Small Business Investment Act.			
CAUTION - PENALTIES FOR FALSE STATEMENTS: Knowingly making a false statement on this form is a violation of Federal law and could result in criminal prosecution, significant civil penalties, and a denial of your loan, surety bond, or other program participation. A false statement is punishable under 18 USC 1001 and 3571 by imprisonment of not more than five years and/or a fine of up to \$250,000; under 15 USC 645 by imprisonment of not more than two years and/or a fine of not more than \$5,000; and, if submitted to a Federally insured institution, under 18 USC 1014 by imprisonment of not more than thirty years and/or a fine of not more than \$1,000,000.			
Signature		Title	Date
Agency Use Only			
11. <input type="checkbox"/> Fingerprints Waived <input type="checkbox"/> Fingerprints Required Date Sent to OPS _____		12. <input type="checkbox"/> Cleared for Processing 13. <input type="checkbox"/> Request a Character Evaluation (Required whenever 7, 8 or 9 are answered "yes" even if cleared for processing.)	
Date _____		Date _____	
Approving Authority _____		Approving Authority _____	

CAIVRS Disclosure Form

I have received financial support from REI Oklahoma and/or US Small Business Administration. I understand that a report will be acquired prior to approval of the SBA loan to determine eligibility for SBA financing. This report is the Credit Alert Verification Reporting System (CAIVRS) to determine if any of the individuals or businesses have outstanding Delinquent Federal Debt or Prior Loss caused to the federal government. I also understand that if the small business defaults on the SBA-guaranteed loan and SBA suffers a loss, the names of the small business and the guarantors of the SBA-guaranteed loan will be referred for listing in the CAIVRS database, which may affect their eligibility for further financial assistance.

Borrower: _____

Signature: _____

Borrower: _____

Signature: _____

Borrower: _____

Signature: _____

Borrower: _____

Signature: _____

Borrower: _____

Signature: _____