

LOAN APPLICATION INSTRUCTIONS

- 1. Complete and sign the attached Business Credit Application (2 pages).
- 2. Complete and sign the attached Personal Financial Statement (2 pages).
- 3. Fax both documents to Mountain Capital, Attn: Lee Carney, at (509) 448-0483. A fax cover has been provided for your convenience.

OR

Scan and email the documents to lee.carney@mountaincapital-llc.com



BUSINESS CREDIT APPLICATION FAX TO (509) 448-0483

A. General information						
Applicant/business name:	Email address:		Business Phone Number:			
Physical street address including city, state, and zip (no	P.O. Boxes):			Marital Status	:	
	,			□ Never Ma	rried	
Mailing address (if different):				□ Divorced		
,				☐ Married:	Please provide	your
Nature of business product or service:				spouse's	full name and S	ocial
Date business established:	How long under current management:			_ Coodiny i	idilibor.	
Number of employees:	Tax ID Number:					
B. Credit Request						
Amount requested:		Use of proceed	eds:			
Source of income for repayment:		Secondary so	urce:			
Callatanal offered.		D		de d.		
Collateral offered:	collateral offered: Repayment structure reques			sted:		
C. Business Organization						
☐ Proprietorship ☐ General	l Partnership	☐ S-Corpora	ation	☐ Other:	State in which	organized:
□ Limited Liability Company □ Limited	Partnership	☐ C-Corpora	ation			
Principals/Guarantors (list additional	principals/g	uarantors	on separa	te sheet):		
1. Name, title, and position: ☐ Sole 0		Percent of Ov	-	Social Securit	ty number:	
Home street address including city, state, and zip (no	o P.O. Boxes):			Home phone	number:	
					I	
Valid driver's license or ID number:	Date of issua	nce: Expiration dat		te: Date of birth:		
2. Name, title, and position:		Percent of Ov	vnership:	Social Securit	ty number:	
Home street address including city, state, and zip (no	o P.O. Boxes):			Home phone	number:	
Valid driver's license or ID number:	Date of issua	nce: Expiration dat		te: Date of birth:		
3. Name, title, and position:	nd position: Percent of Ownership		vnership:	Social Security number:		
Home street address including city, state, and zip (no P.O. Boxes):			Home phone number:			
Valid driver's license or ID number:	Date of issua	nce:	Expiration dat	te:	Date of birth:	
D. Miscellaneous Information					YES	NO
Is the Applicant an endorser, guarantor, or co-maker	for obligations (ir	ncluding anv lea	ase obligation.			
	• ,	• •	•			
e.g. vehicle, equipment, business location) not listed on financial statements submitted? 2. Is the Applicant party to any claim or lawsuit?						
3. Have you and/or the Applicant ever filed for bankruptcy?						
CHAPTER: FILING DATE:						
4. Does the Applicant's business activity involve the generation, use, transportation, storage, or						
disposal of any hazardous material?						
5. Does the Applicant owe any taxes that are past due?						
AMOUNT: OWED TO: 6. Are any assets pledged or mortgaged other than stated on business and personal financial						
statements submitted?						

BUSINESS CREDIT APPLICATION

Name and Phone Number of Insurance Agent:						
Collateral Address:						
The federal Equal Credit Opportunity Act prohiborigin, sex, marital status, age (provided the app derives from any public assistance program or both the federal agency that administers compliance Grand Boulevard, Suite 100, Kansas City, Misson REPORTING INFORMATION TO	licant has the capacity to enter into a bindir ecause the applicant has in good faith exer with this law is the Federal Deposit Insurar buri 64108. CREDIT BUREAUS: Bank may	ng contract), because all or part of the reised any right under the Consumer nee Corporation, FDIC Consumer Re	e applicant's income Credit Protection Act. sponse Center, 2345			
Late payments, missed payments, or other defau	uits on your account may be reflected in you	ur credit report.				
ORAL AGREEMENTS: OREGON: Under Oregon law, most agreemen which are not for personal, family or household pronsideration and be signed to be enforceable. To extend credit or to forbear from enforcing reparend money or to grant or extend credit in an origing engaged in the business of lending money or extend creable. MONTANA: Under Montana law, extend or otherwise modify an existing promise, accommodation for a loan in excess of one hunds undertaking to loan money or to grant or extend personal, family or household purposes, made be extending credit, are invalid unless in writing and signed by lender. The properties of the properties of the properties of the formation of the formation of the funding of terror excercing information that identifies each person where and address, date of birth and other information documents.	purposes or secured solely by the borrower WASHINGTON: Under Washington law, ayment of a debt are not enforceable. IDAN inal principal amount of fifty thousand dollatending credit, such as beneficiary, must be a promise, commitment or agreement to lend money of the district of the dist	It's residence must be in writing, expresoral agreements or oral commitments or oral agreements or oral commitments or oral agreements or oral commitments or oral agreements or oral agreements or oral commitments or oral agreements or oral commitments or extend signed by beneficiary or extend credit, to alter, and or extend credit or to make a financial or primarily for commercial or business of the oral commitments or or oral commitments or oral commi	ss s to loan money, commitment to son or entity to be mend, renew s purposes promise or orimarily for oney or sto obtain, verify and will ask you for your			
			P. 6			
APPLICANT'S STATEMENT: By somplete and correct and that I am authorized palance and payoff information on all accounts recredit record and any statements made by me. I decision. I further authorize Lender to provide of Applicant. I agree to promptly notify Lender of a calculate some statements as Lender or its counsel deem appropriate to connection with this request for credit, and an appropriate to connection with a credit transaction involved the second or additional credit reports at any time in petween Lender and myself, whether or not I am which Lender delivers a copy of this authorization.	I to execute this form on behalf of the Applicequiring payoff as a condition of approving give permission to all my creditors to give redit reporting agencies and other creditors my material changes that would affect the a cause such UCC financing statements to be repriate in their sole and absolute discretion DRT: By signing below, I authorize Mountary modifications, renewals or extensions of solving myself, whether or not I am an obligoformation. I acknowledge that this authorized connection with the renewal, extension or an obligor, guarantor, principal or officer or	cant. I authorize Mountain Capital, LI this application. I understand that Le Lender any information it needs to make information relating to any credit Lendercuracy of these statements. All information such form and in such jurisdim. In Capital, LLC ("Lender") to obtain a such credit. I acknowledge that Lendor, guarantor, principal or officer of the cation is continuing in nature, and that other modification of any loan or other	LC ("Lender") to obtain ander my check my ake a credit granting der might grant to the armation is as of this date actions and encumbering copy of my credit report for shall use the credit applicant, and that a Lender may obtain ar credit accommodation			
By signing be	low, I declare that I have read and unde	erstand the statement above.				
SIGNATURE	PRINT NAME	TITLE	DATE			
SIGNATURE	PRINT NAME	TITLE	DATE			

PRINT NAME

TITLE

DATE

SIGNATURE



PERSONAL FINANCIAL STATEMENT FAX TO (509) 448-0483

As of

						Date	
Complete this form for: (1) each proprietor, or (2) e				erest and each	general partner, or (3	3) each stockholder owni	ng 20%
or more of voting stock, or (4) any person or entity p	roviding a guarant	ty on the loan.					
Name:					Business Phone:		
Residence Address:					Residence Phone:		
residence Address.					residence i none.		
City, State, and Zip Code:							
Business Name of Applicant/Borrower:							
ASSETS	i	(Omit Cents)		LIABILIT	TIES	(Omi	t Cents)
Cash on hand and in Banks	\$		Accounts Pay	/able		\$	
Savings Accounts	\$		Notes Payable	e To Banks and	d Others	\$	
RA or Other Retirement Account	\$		(Describe	in Section 2)			
Accounts and Notes Receivable	\$		Installment Ad	ccount (Auto)		\$	
ife Insurance-Cash Surrender Value Only.	\$		Mo. Payme		\$		
(Complete Section 8)			Installment Ad	count (Other).		\$	
Stocks and Bonds	\$		Mo. Payme	ents	\$	· ·	
(Describe in Section 3)	· -				·····	\$	
Real Estate	\$	l				\$	
(Describe in Section 4)				in Section 4)		·	
Automobile-Present Value	\$	l	,	,		\$	
Other Personal Property	\$		1	in Section 6)			
(Describe in Section 5)	· -		Other Liabilitie	es		\$	
Other Assets	\$	l	(Describe	in Section 7)			
(Describe in Section 5)			Total Liabilitie	s		\$	
			Net Worth			\$	
Total	\$				Total	\$	
Pastian 4. Payres of Income			Continuont I	ichilitica			
Section 1. Source of Income	<u>¢</u>		Contingent L			<u>•</u>	
Salary	\$					\$	
Net Investment Income	ф				S	ф	
Real Estate Income	ф				:Tax	ф	
Other Income (Describe below)*	»		Other Special	Debt		Φ	
Description of Other Income in Section 1.							
· A line and a second s	alaaadia IOthaal			-			
Alimony or child support payments need not be dis Section 2. Notes Payable to Banks and Others.							2d /
Name and Address	Original Original	Current	Payment	Frequency		Secured or Endorsed	.,
of Noteholder(s)	Balance	Balance	Amount	(monthly, etc.)		ype of Collateral	
of Noteriolaer(s)	Dalance	Dalarice	Amount	(monthly, etc.)	1;	ype or Collateral	
				1	1		

Section 3. Stocks and Bon	ds. (Use attachments if necess	ary. Each attac	chment must be identified as a par	rt of this statement and signed).	
	,		Market Value	Date of	Total
Number of Shares	Name of Securities	Cost	Quotation/Exchange	Quotation/Exchange	Value
Section 4. Real Estate Own	ned. (List each parcel separatel	y. Use attachm	nents if necessary. Each attachme	ent must be identified as a part o	of this statement and signed).
	Property A		Property B		Property C
Type of Property:					
Address:					
Date Purchased:					
Original Cost:					
Present Market Value:					
Name and Address					
of Mortgage Holder:					
Mortgage Account Number:					
Mortgage Balance:					
Amount of Payment					
per Month/Year:					
Status of Mortgage:					
Section 5. Other Personal	Property and Other Assets.		(Describe, and if any is pledged	as security, state name and ad	dress of lien holder, amount
Section 6. Unpaid Taxes.	(Describe in det	ail, as to type, t	to whom payable, when due, amou	unt, and to what property, if any,	a tax lien attaches.)
Section 7. Other Liabilities	(Describe in det	ail.)			
Section 8. Life Insurance F	leld. (Give face amou	ınt and cash su	ırrender value of policies - name o	f insurance company and benef	iciaries.)
I authorize Mountain Capital, LLC ("Lender") to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. I understand FALSE statements may result in forfeiture of benefits and possible prosecution by the U.S. Attorney General.					
Signature:		Date:		Social Security Number:	
Signature:		Date:		Social Security Number:	





To: Mountain Capital Attn: Lee J. Carney

Fax Number: (509) 448-0483

From:	
Fax Number:	
Pages:	, including fax cover.
Comments:	

Please verify receipt of documents by calling (509) 999-5694.

DISCLAIMER:

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