NEW RIVER SA

Application To Establish Private-Member Relations

(New River SA herein known as NRSA Interchangeably)

Relationship Manager

A General Information

Name of Applicant Business:

Nature of Business Product or Service:

Full Street Address of Business | **City** | **State** | **Zipcode**

Mailing Address (If Diffrent Above) | **City** | **State** | **Zipcode**

Address of Proposed Collateral for this loan | **City** | **State** | **Zipcode**

Business Phone Number

Business Website

Primary Contact Name | **Primary Contact Phone Number** | **Primary Contact Email**

Tax I.D. Number

Date Business Established

How Long Under Current Management

B Business Organization

- ☐ Sole Proprietorship
- ☐ General Partnership
- ☐ Corporation
- ☐ State Organized
- ☐ Limited Liability Company
- ☐ Limited Partnership
- ☐ Trust

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B Business Organization cont.

Owners/Principals

	Name	Ownership %	Title
1.			
2.			
3.			
4.			
5.			

C Miscellaneous Information

		YES	NO
1.	Is the applicant an endorser, guarantor or co-maker for obligations (including anylease obligation, e.g. vehicle, equipment, etc.) not listed on financial statements	☐	☐
2.	Is the applicant party to any claim or lawsuit?	☐	☐
3.	Have you and/or the applicant ever filed for bankruptcy?	☐	☐
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 personalfinancial statements submitted?	☐	☐

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D Use of Proceeds

The following section relates to your planned use for assets from this loan request. Please be as specific as possible. In those instances where funds are expected to be used in different ways, it is important to be accurate in breaking out anticipated expenditures by category. If you are using the "other" category below, please provide a complete description of the planned use.

Project Costs		Applicant(s) Equity Injection (if applicable)	
Land Acquistion	$	Business Cash	$
Building Acquistion	$		
Building Construciton/ Improvements	$	Personal Cash	$
Contingency (10%)	$		
Machinery and Equipment	$	Proceeds from Sale of Assets	$
Furniture and Fixtures	$		
Inventory Purchase	$	Gift	$
Working Capital	$		
Acquisition of Existing Business	$	Personal Loan	$
Payoff Loan 1	$		
Payoff Loan 2	$	Other	$
Other Obligations	$		
Closing Costs	$		
Other	$	Other	$
Total:	$	Total	$

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E Project Overview

Total Loan Request $

Purpose of Loan Request

Collateral Description

F Business Profile

The following section relates to your planned use for assets from this loan request. Please be as specific as possible. In those instances where funds are expected to be used in different ways, it is important to be accurate in breaking out anticipated expenditures by category. If you are using the "other" category below, please provide a complete description of the planned use.

Type of Business including products and services offered.

Complete history of business including startup dates, analysis of industry to include trends and seasonality of the business, if applicable. Also discuss future plans for growth or expansion, if applicable.

Relationship Manager

F Business Profile cont.

Who are your top 5 Customers?

	Name	Customer Since	% of Sales	Comments
1.				
2.				
3.				
4.				
5.				

What is your target market?

What is the general geographic market served?

What is your marketing strategy? What activities generate sales?

Relationship Manager

F Business Profile cont.

Who are your major competitors?

	Name	Competing Product	Comments
1.			
2.			
3.			
4.			
5.			

What are your advantages over competitors?

Relationship Manager

F Business Profile cont.

Who are your major Suppliers?

	Name	General Terms	Comments
1.			
2.			
3.			
4.			
5.			

How will the proposed loan benefit your company?

How will the proposed loan faciliatate new employment opportunities, if applicable?

Relationship Manager

F Business Profile cont.

Hotels and Motels

	Year to Date	One Year Prior	Two Years Prior	Three Years Prior
ADR				
ADO				
RevPar				

G Management Resume

Proprietor or each partner,holding a 20% interest or more of common stockin the Small Business Concern, and/or key management, must complete this form.

	First	Middle	Last
Name of Applicant			

Drivers License #	Date of Birth	Place of Birth

U.S. Citizen? ☐ Yes ☐ No If no, pleaseattach a copy of your legal permanent resident card.

Full Street Address of Current Personal Residence	City	State	Zipcode

Full StreetAddress of Previous Personal Residence	City	State	Zipcode

Resided there from _____ to _____

Home Phone Number	Business Phone Number	Primary Contact Email

G Management Resume

Are you a U.S. government employee? ☐ Yes ☐ No **if yes,** **Agency** **Position**

If the answer to any of the following three questions is yes, provide a detailed exhibit explaining the incident(s).

Are you presently under indictment, paroleor probation? ☐ Yes ☐ No

Have you ever been charged with and/or arrested for any criminal offense other than a minor motor vehicle violation? This includes offenses which have been dismissed, discharged or not prosecuted ☐ Yes ☐ No

Have you ever been convicted, placed on pretrial diversion or on any form of probation, including adjudication without pending probation for any criminal offense other than a minor motor vehicle violation? ☐ Yes ☐ No

Education (College or Technical Training)

Name and Location	Dates Attended	Major	Degree / Certificate

Relationship Manager

G Management Resume cont.

List chronologically beginning with present employment for a minimum of 10 years. Add pages if necessary.

1. Name of Company/Business | Employed From | Employed To | Title Position

Full StreetAddress of Company/Business | City | State | Zipcode

Duties and Responsibilities

2. Name of Company/Business | Employed From | Employed To | Title Position

Full StreetAddress of Company/Business | City | State | Zipcode

Duties and Responsibilities

3. Name of Company/Business | Employed From | Employed To | Title Position

Full StreetAddress of Company/Business | City | State | Zipcode

Duties and Responsibilities

H Disclaimer

By completing and submitting this application, the applicant acknowledges and understands that this application does not constitute a solicitation, offer,recommendation, or guarantee of approval.

No advice, guidance, explanation, structuring, facilitation, negotiation, or representation is provided regarding any credit instrument, including but not limited to Standby Letters of Credit (SBLCs),Bank Guarantees (BGs),Medium-Term Notes (MTNs), or similar private credit instruments. Any advisory, brokerage, or representative role in connection with such instruments is expressly disclaimed.

All applications are subject to membership eligibility, review, verification, and approval. Submission of an application does not create any obligation to approve, arrange,or provide any product or service.

The applicant further acknowledges that application information may be shared with appropriate third parties, when necessary, for the purpose of reviewing, processing, or evaluating the application.

Signature: _____ Date: _____