

## Pacific Islands Development Bank COMMERCIAL LOAN APPLICATION FORM

Amount Requested:	Loan Term Requested:	Years
Purpose of Loan:		

	PART A: BUSINESS INFORMA	TION
Business Name:		
TIN/EIN		
If Sole Proprietorship, Name of Applicant		Gender: Female Male
Doing Business As		
Owner's Social Security#	Citizenship:	Marital Status:  Married Single
Business Address		Rent #Years Own
Mailing Address (if different from above)		
Business Phone	Email	

PART B: DECLARATIONS  Please check mark either Yes or No to answer the following questions:				
Is the business, or you as the principal, a guarantor/co-maker/endorser for any other outstanding debt?	Yes	No		
Have there ever been any lawsuits or judgments against you or, if applicable, your business?	Yes	No		
Have you or, if applicable, your business ever been a party to any lawsuit?	Yes	No		
Have you or, if applicable, any business you have owned, ever filed for bankruptcy?	Yes	No		
Have you ever had any property foreclosed upon or repossessed?	Yes	No		
Are you currently in default/delinquent on any outstanding debt, loan guarantee, or other obligation?	Yes	No		
Are you obligated to pay child support or alimony?	Yes	No		

## **PART C: INFORMATION ON ASSETS**

Please tell us the value of assets owned and, for each, whether or not the asset is mortgaged or pledged as security for another loan or obligation. Check mark next to the asset that may secure the loan requested. For checking, savings, and TCD accounts, please indicated the financial institution at which you have the account. For automobiles and boats/marine vessels, please indicate its year, make and model. For real estate assets, please indicate the date the property was acquired and the location of the property.

Туре		Value (\$)	Mortgaged/Pledged?				
Cash						Yes	No
Checking ac	ct #s		@			Yes	No
Savings acc	t #s		@			Yes	No
TCD acct #s			@			Yes	No
Automobile(s):							
Year: VINs/ID#s:	Make:	Model:				Yes	No
Year: VINs/IDs#:	Make:	Model:				Yes	No

	PART C: INFO	RMATION	ON ASSETS				
Real Estate:			<u> </u>				
	Location:				Yes	No	
	Location:				Yes	No	
Marketable Securities							
Stocks					Yes	No	
Bonds					Yes	No	
Insurance							
Cash Value of Life Insura	ance				Yes	No	
Others (specify):			I.				
					Yes	No	
	_				Yes	No	
					Yes	No	
			TOTAL:				
			1011121				
	PART D: INFORMATION ON	CUDDENT	EINANCIAL ODI	ICATIONS			
	ancial obligations. Provide the origi				ne required		
payment each month.	ancial obligations. I fortue the origi	nai amount oi	tile debt, tile alliot	int outstanding, and th	ie requireu		
Complete Name of Creditor			Original Amount	Outstanding Amount	Monthly P	ayment	
			-	_			
	PART F	CERTIFICA	ATION				
The information contained in	this application is provided for the pur			edit with Pacific Islands	Develonme	nt Rank	
	ividual(s) understand(s) that PIDB is re						
The undersigned individual(s	s) represent(s) and warrant(s) that the	information p	provided is true and	complete and that PIDE	B may consi	ider this	
	be true and correct until a written not						
	ssors, and/or assigns, are hereby author						
	this application, at any time, or obtain						
	this application or consumer reporting evidenced by my/our signature(s) below		to determine credity	ortniness. The undersig	gned have re	eau anu	
understood this disclosure as	evidenced by my/our signature(s) being	OW.					
A Hart al Danis at the Dat				D.(			
Authorized Representative of the Business			Date				
	Representative of the Business						