

Please fill electronically or print in ink.

BUSINESS PROFILE -	LOAN REQUEST
	I/We, individually and/or on behalf of the business, hereby apply to The PrivateBank for the following extension of Commercial Credit.
Business Legal Name	
	\$
	Amount Requested
Business Tax ID Number	B
	Purpose
Physical Location Address (No PO Boxes)	Working Capital
Thysical Escation Hautess (110 T & Dokes)	Real Estate Acquisition Refinance
City State Zip	Equipment Purchase
City State Zip	Vehicle Purchase
	Other
Business Telephone Number	
Email Address	BACKGROUND INFORMATION —————
	Are you or your business a party to any claim or lawsuit?
\$	_
Annual Sales / Revenues	Yes No
	Are you or your business in arrears or in dispute of any tax payment?
In what month and year did you start the business?	Yes No
	If yes, please explain on a separate sheet of paper.
Type of business entity:	
Sole Proprietorship Partnership	Do you or the business own or lease the business property?
Sole Proprietorship Partnership	Own Lease
Limited Liability Co. Corporation	
Other	\$
	What is the business' monthly rent/mortgage payment?
	When does the lease expire or mortgage mature?
BANK ACCOUNTS	
List information about bank accounts held by the business.	
1 - Name of Bank	2 - Name of Bank
	_
Address	Address
Account Number	Account Number
Monthly Average Balance Date Opened	Monthly Average Balance Date Opened
List other assets in the name of the husiness on a senerate sheet or provide a halance she	et.

BUSINESS I								
List all business debt	including lines of credit, equipn	nent leases or loans, mortgag	ges or sharehol	lder loans and othe	r liabilities. Attach ac	lditional pages if ne	ecessary or pr	ovide a balance sheet.
1 - Description of	Debt							
	\$	\$	\$					
Date Incurred	Original Amount	Present Balance	Month	ly Payment	Lessor/Credit	or Name		
2 - Description of	Debt							
	\$	\$	\$					
Date Incurred	Original Amount	Present Balance	Month	ly Payment	Lessor/Credit	or Name		
3 - Description of	Debt							
	\$	\$	\$					
Date Incurred	Original Amount	Present Balance	Month	ly Payment	Lessor/Credit	or Name		
ADDITIONA	L REQUIRED SUF	PPORT DOCUM	ENTATIO	ON				
Last tw	vo years of personal and b	usiness tax returns		One	month DDA state	ment		
Income tax return	ns filed through (date): _		Are any	returns currentl	y being Audited o	or contested?	Yes	No
If yes, what year(s	s)?							
Have you or any fi	irm in which you were a n	najor owner ever declar	ed bankrup	tcy?			Yes	No
If yes, when and p	olease provide details:							
Are you or your b	usiness in any legal action	s, have judgements, tax	liens, or ga	rnishments agai	nst you or your co	ompany?	Yes	No
If yes, please expla	ain on a separate sheet of j	paper.						
APPLICANT	INFORMATION			JOINT A	PPLICANT I	NFORMATI	ION —	
Name				Name				
Marital Status	Married S	Separated Uni	married	Marital Statu	ıs Marri	ed Sep	arated	Unmarried
						1		
Home Address (Street Address, City, State, Zip)			Home Address (Street Address, City, State, Zip)					
Personal Phone Number Personal Email			Personal Phone Number Personal Email					
Business Phone Number Business Email Address			Business Phone Number Business Email Address					
Employer and Address (Street Address, City, State, Zip)			Employer and Address (Street Address, City, State, Zip)					
Occupation / Title Self-Employed			Occupation / Title Self-Employed					
Length of Service			Length of Service					

PERSONAL ASSETS		AMOUNT	PERSONAL LIABILITIES	AMOUNT
CASH	at The PrivateBank		CREDIT CARD BALANCES	
	at Other		MORTGAGE LOANS Primary Residence	
SECURITIES	Marketable		Other Real Estate	
	Non-Marketable		OTHER BANK LOANS / INSTALLMENT DEBT	
REAL ESTATE	Primary Residence		OTHER PERSONAL LIABILITIES	
	Other Real Estate			
INVESTMENTS	Closely Held Companies			
	Partnership Interest			
	IRA/KEOGH/401k			
LIFE INSURAN	CE CASH VALUE			
OTHER PERSO	NAL ASSETS			
TOTAL ASSETS	3		TOTAL LIABILITIES	
ANNUAL INCO	OME		NET WORTH (total assets minus total liabilities)	

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OTHER PERSO	NAL ASSETS				
TOTAL ASSETS	3		TOTAL LIABILITIES		
ANNUAL INCO	OME		NET WORTH (total assets minus total liabilities)		

JOINT INTENT				
Intent to apply for joint credit.				
All loan applicants should complete the Sn credit or the extension of credit as a borrow person or entity other than the applicant w	wer, co-borrower or guar	antor. Co-Appli	cant information must be provided w	, 1
We intend to apply for joint credit Ye	es No			
REPRESENTATIONS AND Ware information contained in this statement is pundersigned. The undersigned acknowledge an accept a guarantee. Each of the undersigned ragrees to notify you immediately in writing of a this statement, (2) in the financial condition of a absence of this notice or a new and complete we you as required above, or if any of the information contained on this reporting agency to give you any information it is the undersigned. As long as any obligation or of the indepted in the statement. This personal and business	provided to induce you to exit dunderstand that you are represents and warrants that any change in name, addressiny of the undersigned or thuritten statement, this shall ination on this application in the undersigned, immediation and to determ may have on the undersigned guarantee of the undersigned.	relying on the info at the information ss, or employmen e business, or (3) be considered as is inaccurate or in ately due and pay ine credit worthined. Each of the une ed to you is outsta	rmation provided on this application in dec provided on this application is correct and and of any material adverse change (1) in the ability of any of the undersigned to pay a continuing statement and substantially concomplete in any material respect, you reable. You are authorized to make all inquivess of the undersigned. The undersigned dersigned authorizes you to answer questioneding, the undersigned shall supply annumers.	ciding to grant or continue credit or to do complete. Each of the udnersigned in any of the information contained in perform their obligations to you. In the correct. If the undersigned fail to notify may declare the indebtedness of the ries you deem necessary to verify the d authorize any person or consumer ons about your credit experience with lally an updated personal or business
Applicant name			Applicant signature	
Co-applicant name			Co-applicant signature	
Name of your Accountant	Phone Number		Name of your Attorney	Phone Number
Name of your Investment Advisor / Broke	Phone Number		Name of your Insurance Agent	Phone Number
Signature of Applicant		Printed Name		Date
Signature of Joint Applicant		Printed Name		Date
Signature on behalf of Business (if applicab	ole)	Print Name &	Title of Authorized Signer	Date
Notice of Right to Receive a Copy of Appraisal - receive a copy of the appraisal, please write to you about the action taken on your credit appl number, date of application, name(s) of loan ap	o us at The PrivateBank, 120 ication or you withdraw you	O S. LaSalle St., C ur application. In y	hicago, IL 60603. We must hear from you our letter, please provide us with the follo	uno later than 90 days after we notify
BANK USE ONLY				
Loa	n Officer Signature			Date Received

