

Centris Federal Credit Union Commercial Loan Application

Important Information About Procedures for Opening a New Account. To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: when you open an account, we will ask you for your name, street address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

Business Information

Legal Name:			
Business Name (or DBA Name):			
Location Address (street address required-no P.O. Boxes)		Date Originally Established:	
Mailing Address (if different)		Federal Tax ID Number:	
City:		State:	
Business Phone Number:		Gross Annual Revenue:	
Business Bank Accounts Financial Institution #1 Name		Checking & Saving Combined Balance	
Type of Business:		Type of Product/Service:	
<p align="center">Type of Ownership (check one)</p> <p align="center"> <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Ltd. Liability Company <input type="checkbox"/> Ltd. Partnership <input type="checkbox"/> Nonprofit <input type="checkbox"/> Other: </p>			

*Personal Financial Statement and Business Financial Statements are required in addition to the loan application. Additional documents may be needed.

Loan Request

Loan Amount Requested:	New Loan:	Renew/Increase Existing loan:
Purpose:	Collateral Offered:	

Personal Information

Joint Credit: Each Applicant must individually complete the appropriate section below.

Owner #1 Name:

Social Security Number:	Date of Birth:	% Business Ownership:	
Home Address:	City:	State:	Zip:
Home Phone #:	Work Phone #:	Cell #:	
Gross Annual Household Income:			
Financial Institution #1 Name:	Checking & Saving Combined Balance:		
Financial Institution #2 Name:	Checking & Saving Combined Balance:		

Owner #2 Name:

Social Security Number:	Date of Birth:	% Business Ownership:	
Home Address:	City:	State:	Zip:
Home Phone #:	Work Phone #:	Cell #:	
Gross Annual Household Income:			
Financial Institution #1 Name:	Checking & Saving Combined Balance:		
Financial Institution #2 Name:	Checking & Saving Combined Balance:		

*Alimony, child support or separate maintenance income need not be reported if you do not wish to have it considered.

Notices

Notice: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (providing the applicant has the capacity to enter into a binding contract); because all or a part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act, the federal agency that administers compliance with this law concerning this credit is:

National Credit Union Administration
Office of Consumer Protection (OCP)
Division of Consumer Compliance and Outreach (DCCO)
1775 Duke Street
Alexandria, VA 22314

This information and the information provided on all accompanying financial statements and schedules is provided for the purpose of obtaining credit for the Applicant(s) or for the purpose of Applicant(s) guaranteeing credit for others. Applicant(s) acknowledge that representations made in this statement will be relied on by Creditor in its decision to grant such credit. This Statement is true and correct in every detail and accurately represents the financial condition of the Applicant(s) on the date given below. Creditor is authorized to make all inquiries it deems necessary, either directly or through any agency employed by Lender for that purpose, to verify the accuracy of the information contained herein and to determine the creditworthiness of the Applicant(s). Applicant(s) will promptly notify Creditor of any subsequent changes which would affect the accuracy of this statement. Creditor is further authorized to answer any questions about Creditor's credit experience with Applicant(s). Applicant(s) are aware that any knowing or willful false statements regarding the value of the above property for purposes of influencing the actions of Creditor can be a violation of federal law, 18 U.S.C. & 1014, and may result in fine or imprisonment or both.

By signing below, each Applicant declares that he/she has read and understands the Notice Section above and, if applicable, has received the Reg. B notification regarding denied credit and appraisal notice.

By:	By:
(Owner #1 Signature)	(Owner #2 Signature)
Date	Date

Centris Federal Credit Union Commercial Loan Application Addendum

Were your gross annual revenues in the previous fiscal year \$1,000,000.00 or less? Yes No

If you answered yes and your application is denied, you have the right to receive a written statement of the specific reasons for this denial to obtain the statement, please contact:

Centris Federal Credit Union
 Attention: Business Financial Services
 11718 M Circle
 Omaha, NE 68137

within 60 days from the date that you were notified of the decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request. The notice below describes additional protections extended to you.

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Appraisal Notice

Notice: If the collateral which will secure this loan is a 1-4 family residence, you have the right to a copy of the appraisal used in connection with your application for credit. If you wish to have a copy, please write to us at the following mailing address: **Centris Federal Credit Union, Attention: Business Financial Services, 11718 M Circle, Omaha, NE 68137** notify you about the action taken on your credit application or no later than ninety (90) days after you withdraw your application. Your written request must contain; Applicant's Name, Property Address, Branch Name where application was taken, Application Date and mailing instructions for the copy.