

LONGVIEW COMMUNITY BANK
COMMERCIAL LOAN APPLICATION

AMOUNT REQUESTED:	PURPOSE OF LOAN:
TERM REQUESTED:	I/we intend to apply for <input type="checkbox"/> individual credit or <input type="checkbox"/> joint credit
COLLATERAL OFFERED:	

Borrower Information	Status: <input type="checkbox"/> Borrower <input type="checkbox"/> Guarantor <input type="checkbox"/> Cosigner <input type="checkbox"/> Grantor	
LAST NAME OR BUSINESS NAME:	FIRST NAME:	MIDDLE:

ADDRESS:

TAX IDENTIFICATION NUMBER:	DATE OF BIRTH:	MARITAL STATUS:
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PHONE NUMBER:	EMAIL ADDRESS:
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EMPLOYER:

APPLICANT IS AN <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> SOLE PROPRIETOR <input type="checkbox"/> CORPORATION <input type="checkbox"/> LLC <input type="checkbox"/> OTHER _____	STATE OF ORGANIZATION:
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EMPLOYER:

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I hereby apply for this loan described in this application on behalf of the applicant business. I certify that I have made no misrepresentation in this loan application or any related documents, and that all information is true and complete and that I did not omit any important information. I agree that the loan or the property securing the loan will not be used for any illegal or restricted purpose. The bank is authorized to verify with other parties and investigate my credit either directly or through any other agency employed for that purposes. Lender may disclose to any interested party as to the bank's experience or transactions with my account. I understand the lender will retain this application along with any other credit related information even if no loan or credit is granted. These representations extend to the Lender as well as any insurer of the loan or any investor who may participate in or purchase the loan. If further authorize the bank to share any information regarding my loan with any insurer or investor. I hereby authorized the bank to obtain a consumer credit report on me for the purpose of evaluating this application for credit.

X _____ Date: _____

X _____ Date: _____