

Commercial Loan, Mortgage and Overdraft Application Form

Note: All Loan Applicants must have a Savings/Chequing Account with Clarien Bank that is fully compliant prior to any advance of funds.

Company Information

Company Name (Full Legal Name)

Operating Address

Parish

Postal Code

Mailing Address (if different from above)

Parish

Postal Code

Email Address

Business Telephone

Cell Number

Business Type

Industry

Business Start Date (DD/MM/YYYY)

Name of Contact

Telephone No.

Does the entity have:

Any outstanding debts with Bermuda Credit Association?

Yes No

Any outstanding judgements or are you a defendant in any suits or legal actions?

Yes No

Any obligations as an endorser, co-maker or guarantor?

Yes No

Loan Information

New Increase

Currency: BMD USD

\$

Amount Requested

Term Requested

Date (DD/MM/YYYY)

Purpose of Request

Overdraft Information

New Increase

Currency: BMD USD

\$

Amount Requested

Term Requested (3 month minimum)

Chequing Account Number

Purpose of Request

Required Documents

- Existing Business: 3 Years Financial Statements
- Start-Up: Business Plan
- Copy of Supporting Invoice(s) - If Applicable
- 12 Month Cash Flow Projections
- 12 Month Merchant Statements - If Applicable

CIF Number:	Commercial Loan Application Number:

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Corporate Loan Resolution

I, _____, Secretary of _____ (the "Company"), a company duly organised and existing under the laws of _____ and having its registered address at _____ hereby certify that the following is a true copy of a resolution duly adopted by the Board of Directors of the Company at a meeting thereof convened and held in accordance with the Memorandum of Association and the Bye-laws of the Company and held on _____ and that such a resolution is now in full force and effect and is in accordance with the Memorandum of Association and the Bye-laws of the Company.

RESOLVED that the Company apply for credit facility with the Clarien Bank Limited (the "Bank") for a total aggregate limit of \$_____.

"FURTHER RESOLVED that the person(s) listed below, [singly/jointly] (delete as appropriate), are authorised on behalf of the Company to apply for a [commercial loan/mortgage/overdraft] (delete as appropriate) facility with Clarien Bank Limited (the "Facility") and to specify applicable limits; and to sign any and all documents required by the Bank in order to issue the facility and make amendments thereto:

Print Name	Signature

FURTHER RESOLVED that as security for obligations of the Company in connection with the Facility, the above-listed individuals are authorized to pledge to Clarien Bank Limited, on terms and conditions as may be agreed from time to time by the above-listed individuals, any of the following of the Company's deposit(s), investments, securities or other asset(s): [detail assets that may be pledged]."

Witness my hand and seal of the Company, this _____ day of _____, 20 _____.

Secretary

I/We hereby declare that the information which I/We have provided to you in support of this application is true and complete in all material respects and that no information is omitted in relation to any of the items describing my/our liabilities. I/We authorise you to contact such persons as you think fit to verify the correctness and completeness of this information and authorise any such persons to release it to you.

I/We hereby authorize the Bank to communicate via email. Yes No

I/We authorise Clarien Bank Limited to debit the loan payment from my/our account number

I/we understand that should this application be successful, I/we may be required to obtain independent legal advice in connection with any legal documentation prepared pursuant to my/our application. I/we accept and acknowledge that I am/we are responsible for any legal fees or associated costs incurred in obtaining such independent legal advice, and that Clarien Bank Limited, nor any of its affiliates, will not be liable for any such fees or costs in any way whatsoever.

_____	_____	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
Authorised Signatory - Print Name	Signature	Date (DD/MM/YYYY)
_____	_____	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
Authorised Signatory - Print Name	Signature	Date (DD/MM/YYYY)
_____	_____	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
Lender/Relationship Manager	Signature	Date (DD/MM/YYYY)

Personal Financial Statement

Please complete all sections. (List Income\Expenses)

Income Statement	
Monthly Income	
Applicant's Salary (net)	<input type="text"/>
Co-Applicant's Salary (net)	<input type="text"/>
Child Maintenance Income	<input type="text"/>
Investment Income	<input type="text"/>
Rental Income	<input type="text"/>
Other Income _____	<input type="text"/>
Bonus _____	<input type="text"/>
Pension	<input type="text"/>
Total Monthly Income	\$ <input type="text"/>

Monthly Commitments	
Mortgage	<input type="text"/>
Rent	<input type="text"/>
Church Tithes	<input type="text"/>
Child Maintenance Payments	<input type="text"/>
Installment Payments/Loans:	
Vehicle	<input type="text"/>
Furniture	<input type="text"/>
Personal Loans	<input type="text"/>
Credit Cards	<input type="text"/>
Others Monthly Obligations	
Land Tax	<input type="text"/>
Home Insurance	<input type="text"/>
Life Insurance	<input type="text"/>
Miscellaneous	<input type="text"/>
Total Monthly Expenditures	\$ <input type="text"/>

I/We hereby declare that the information provided herein is true and complete in all material respects and that no information is omitted in relation to any of the items describing my/our income and expenses.

Signature of Main Applicant

Signature of Joint Applicant

Date (DD/MM/YYYY)

Date (DD/MM/YYYY)

For more than two applicants please fill in additional application forms.

Loan application checklist:

- Complete all sections of the application form
- Provide a quote for item(s) from supplier

Proof of:

- Employment and income (e.g. pay stub)
- Rent/Mortgage payments (e.g. receipt for payment)

For home purchases/mortgages:

- Details of insurance on existing home, if applicable
- Copy of the sales listing or the purchase & sales agreement

Statement of Net Worth	
Current Assets (what I own)	
Chequing and Savings Accounts	Balance
# _____	<input type="text"/>
# _____	<input type="text"/>
# _____	<input type="text"/>
Term Deposits	<input type="text"/>
Investments	<input type="text"/>
Stocks/Mutual Funds (provide statements)	<input type="text"/>
What I'm Owed _____	<input type="text"/>
Other _____	<input type="text"/>
_____	<input type="text"/>
Total Current Assets	\$ <input type="text"/>
Fixed Assets	
	Value
Home Fair Market Value	<input type="text"/>
Real Estate: <input type="checkbox"/> Local	<input type="text"/>
<input type="checkbox"/> Overseas	<input type="text"/>
Vehicle	<input type="text"/>
Household Effects	<input type="text"/>
Other _____	<input type="text"/>
Total Fixed Assets	\$ <input type="text"/>
Total Assets	\$ <input type="text"/>

Liabilities (What I Owe)	
Mortgage(s) (Disclose Bank)	Balance
_____	<input type="text"/>
_____	<input type="text"/>
Personal Loans (Disclose Bank)	<input type="text"/>
_____	<input type="text"/>
_____	<input type="text"/>
_____	<input type="text"/>
Credit Cards (Authorized Limit)	
Clarien Bank Limited	<input type="text"/>
Other	<input type="text"/>
_____	<input type="text"/>
Other Debts	<input type="text"/>
_____	<input type="text"/>
Total Liabilities	\$ <input type="text"/>
Net Worth	\$ <input type="text"/>
(Total Assets minus Total Liabilities)	