



Monte Vista: 901 1st Ave, Monte Vista, CO 81144
(719) 852-5933

Alamosa: 3416 Mariposa Street, Alamosa, CO 81101
(719) 589-2536

Pagosa Springs: 80 Co Rd 600, Pagosa Springs, CO 81147
(970) 731-4701

Commercial and Agricultural Loan Application

APPLICATION CHECKLIST

Business Entity:

1. Company Operating Agreement or Partnership Agreement
2. Corporate Tax Returns (with all pages and schedules) for the past three years
3. Profit & Loss statement for the current year
4. Current Balance Sheet (less than 30 days old)

Individual(s): (all individuals with 10% or more ownership of the business)

1. Tax Returns for the past three years for each individual (include all pages, schedules, W-2s and K-1s, as applicable)
2. Current Personal Financial Statement (less than 30 days old)
3. A copy of the driver's license for each individual on the application

All applicable information listed above must be submitted to make this a complete application. Your specific loan request may require additional information.

A. APPLICANT/BUSINESS ENTITY INFORMATION

NAME OF NATURAL PERSON APPLYING FOR CREDIT		TITLE OF NATURAL PERSON APPLYING FOR CREDIT	
LEGAL ENTITY NAME FOR WHICH CREDIT IS BEING APPLIED		COMPANY NAME (dba name if different)	FEDERAL TAX ID or EIN
BUSINESS STREET ADDRESS (no P.O. Box)		CITY	STATE ZIP CODE
BUSINESS MAILING ADDRESS (if different)		CITY	STATE ZIP CODE
BUSINESS TYPE <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> C-Corporation <input type="checkbox"/> S-Corporation <input type="checkbox"/> Other		STATE ORGANIZED IN	DATE BUSINESS ESTABLISHED CURRENT OWNERSHIP SINCE
NATURE OF BUSINESS	NUMBER OF EMPLOYEES	BUSINESS PHONE	WEBSITE
INDIVIDUAL RESPONSIBLE FOR THE MANAGEMENT OF THE LEGAL ENTITY:	TITLE	BEST PHONE	EMAIL

B. LOAN REQUEST INFORMATION

TYPE OF LOAN (list up to 3)	LOAN/LINE AMOUNT	LOAN PURPOSE
1.	\$	
2.	\$	
3.	\$	

C. COLLATERAL OFFERED TO SECURE LOAN (check all applicable)

<input type="checkbox"/> REAL ESTATE	<input type="checkbox"/> EQUIPMENT	<input type="checkbox"/> VEHICLES	<input type="checkbox"/> CROPS	<input type="checkbox"/> INVENTORY	<input type="checkbox"/> LIVESTOCK	<input type="checkbox"/> OTHER
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DETAILED DESCRIPTION OF COLLATERAL

INSURANCE AGENT: (name, address and phone number)

D. SIGNATURES OF PERSONS AUTHORIZED TO INCUR DEBT ON BEHALF OF THE BUSINESS

Authorized Signer Signature #1	Date	Authorized Signer Signature #2
		Date
		Authorized Signer Signature #3
		Date

E. IMPORTANT DISCLOSURES

Equal Credit Opportunity 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 RG Bank is the Federal Deposit Insurance Corporation.

Credit Denial Notice: If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement please contact RG Bank at 901 1st Ave., Monte Vista, CO 81140 within 60 days from the date you are notified of our decision. We will send you a written statement of the reasons for the denial within 30 days of receiving your request for the statement.

Applicant Certification/Authorization: Each owner/officer of the business signing below certifies that: (1) the information provided in this Application with respect to the Business (including any attachments) is true, correct, and complete in all material respects; (2) the personal information provided in this Application with respect to such Owner/Officer is true and correct; (3) the undersigned are authorized to submit this Application on behalf of the Business; and (4) RG Bank is hereby authorized, from time to time at its discretion, to check the credit history of the Business and the personal credit and employment history of each person signing this Application. The undersigned as an individual hereby knowingly consents to the use of such credit report consistent with the Federal Fair Credit Reporting Act as contained in 15 U.S.C. @ 1681 et seq.

Notice of right to receive copy of Appraisal: We may order an appraisal in connection with your loan. You have the right to a copy of the appraisal report. We will promptly give you a copy of any appraisal ordered, even if your loan does not close. The undersigned acknowledges the receipt of this disclosure.

Federal Regulation B requires the institution to obtain evidence of applicant's intention to apply for joint credit or provide a joint guaranty. Please check the box to evidence the intent of each signor. Applicants are required to give Notice of Intent to apply for credit and sign the 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 for your name, 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. The undersigned acknowledges they have read and understand this disclosure.

F. PERSONAL INFORMATION ON ALL BENEFICIAL OWNERS AND GUARANTORS

Individual information is required for all officers/members/partners with 10% or more ownership of the business.

#1-NAME: FIRST, MI AND LAST (as it appears on identification)		TITLE		% OWNERSHIP
PHYSICAL ADDRESS	CITY, STATE, ZIP CODE		SOCIAL SECURITY NUMBER	DATE OF BIRTH
MAILING ADDRESS (if different)	CITY, STATE, ZIP CODE		HOME PHONE	CELL PHONE
I INTEND TO APPLY FOR <input type="checkbox"/> INDIVIDUAL CREDIT OR _____ INITIAL IF JOINT CREDIT/GUARANTEE			PLACE OF BIRTH (city, state)	
_____			MOTHER'S MAIDEN NAME	
Applicant or Guarantor Signature #1		Date		

#2-NAME: FIRST, MI AND LAST (as it appears on identification)		TITLE		% OWNERSHIP
PHYSICAL ADDRESS	CITY, STATE, ZIP CODE		SOCIAL SECURITY NUMBER	DATE OF BIRTH
MAILING ADDRESS (if different)	CITY, STATE, ZIP CODE		HOME PHONE	CELL PHONE
I INTEND TO APPLY FOR <input type="checkbox"/> INDIVIDUAL CREDIT OR _____ INITIAL IF JOINT CREDIT/GUARANTEE			PLACE OF BIRTH (city, state)	
_____			MOTHER'S MAIDEN NAME	
Applicant or Guarantor Signature #2		Date		

#3-NAME: FIRST, MI AND LAST (as it appears on identification)		TITLE		% OWNERSHIP
PHYSICAL ADDRESS	CITY, STATE, ZIP CODE		SOCIAL SECURITY NUMBER	DATE OF BIRTH
MAILING ADDRESS (if different)	CITY, STATE, ZIP CODE		HOME PHONE	CELL PHONE
I INTEND TO APPLY FOR <input type="checkbox"/> INDIVIDUAL CREDIT OR _____ INITIAL IF JOINT CREDIT/GUARANTEE			PLACE OF BIRTH (city, state)	
_____			MOTHER'S MAIDEN NAME	
Applicant or Guarantor Signature #3		Date		

FOR BANK USE ONLY

CUSTOMER IDENTIFICATION VERIFICATION: Type of Document: Driver's License State ID Card Passport Military ID

OFAC CHECKED AND CLEARED ON BUSINESS OFAC CHECKED AND CLEARED ON ALL INDIVIDUALS

VERIFICATION CONDUCTED BY: