SMALL BUSINESS CREDIT APPLICATION



Please complete all information on this application for the type of credit you're requesting. Be sure to sign it in the space provided. Refer to the checklist on the last page for any additional documents you may be required to submit.

INFORMATION ABOUT YOUR BUSINESS

Borrower				
DBA, if applicable				
Business Address _				
City	Sta	ate Zip	County	
Street Address Rec	quired in Addition to P.O			
Do you rent or owr	n business property? ${\cal O}$ Rent (O Own If owned: are tax	tes current? O Yes O No	
If leased: Annual H	Rent I	lease expiration	Renew	al term
Business Phone		Business Fax	7	Fax ID#
Email Address			Website	
Type of Business: O	Proprietorship O Partnership	• • • • • • • • • • • • • • • • • • •	rofit Organization O LLC	COLLPOOther
Please describe the	major products/services of yo	our business		
Industry Type		Year Established	# of Employees	Fiscal Year End
Insurance Agent _				
Owners and Guar Name	rantors (include all owners, office Home Address	-		Title % Ownership
Ivame	nome Address	Social Security	#	Title % Ownership
The following information executive officer or set		th significant responsibility to	o control, manage or direct	a legal entity customer, including an
Name		Address		
Title	SSN	DOB		-
Borrower Deposi	t Accounts (List all savings, chec	Ling innorthe ant / watir and a co	counts and practice plane)	
Bank Name	Account Type	king, investment/retirement acc	Account Number	Current Balance
	71			

Borrower Debts (List all liabilities, including loans, installment debt and leas	ses, lines of credit. If none, state N	ONE
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Borrower Debts (Lis	st all liabilities, includi	ng loans, installment de	bt and leases, lines of c	redit. If none, state NO	NE)	
Bank Name/Other	Purpose	Original Amt.	Opening Date	Unpaid Balance	Maturity Date	Monthly Payment
TYPE OF LOAN R	EQUESTED					
Term Loan (to invest i	n major purchases, such	as plant or office equipm	ent, computer systems o	r machinery)		
Purpose						
Amount Requested	\$		Term Reque	ested		
Collateral (Accounts re	ceivable, inventory, equi	pment, vehicle, deposit acc	count, investment accour	nt)		
		· · · · ·				
Line of Credit (To ac	cess funds immediately j	or working capital, accou	nts receivable and inver	<i>tory</i> . Interest only)		
Purpose						
Amount Requested	l \$					
Collateral (Accounts red	ceivable, inventory, equi	oment, deposit account, in	vestment account)			
Optional: O To estab	blish overdraft protect	tion for the Chemung (Canal or Capital Ban	k deposit account nun	ıber indicated below	
Chemung	Canal or Capital	Bank Deposit Acc	ount #			

Commercial Mortgage (to purchase, construct, expand or renovate commercial and multifamily property)

Purpose	
Amount Requested \$	Term Requested (maximum 15 years)
Collateral Address	Estimated Value
Commercial Equity Line of Credit (Working c	capital, purchases, additions, renovations and improvements to property—commercial and multifamily)
Purpose	Amount Requested \$
Collateral Address	Estimated Value

DIRECT DEBIT

The monthly payments will be automatically deducted directly from your Chemung Canal or Capital Bank deposit account.

Chemung Canal or Capital Bank Deposit Account # _____

ADDITIONAL INFORMATION

- A. Is your business an endorser or guarantor for any debts not listed on this application or on your financial statements? O Yes O No
- B. Is your business party to any claim or lawsuit? O Yes O No
- C. Have you ever owned a business that has declared bankruptcy? O Yes O No
- D. Does your business owe taxes for other than the current year? O Yes \circ No

If "yes" to any question, please explain:

SIGNATURE

The information in this application was prepared by me (the Applicant) or at my request. I certify that all statements above are true and agree to contact the Bank immediately if any information changes above. I authorize the bank to verify all information deemed appropriate, now and in the future, about the business named herein, to extend credit to me. I authorize the bank to obtain a credit report on me in connection with this application, and any update, renewal or extension thereof. Upon request, the bank will notify me, if a credit report was requested and, if so, the name and address of the credit reporting agency furnishing the report. I also authorize the bank to fulfill the account options I have requested in this application.

Please print:		
Business Name		
Authorized Officer (Name and Title)		
Signature		Date
Authorized Officer (Name and Title)		
Signature		Date
Please make sure all enclosed forms have been signed and dated.		
If this is an application for joint credit, Borrowe to apply for joint credit.	r and Co-Borro	wer each agree that we intend
Initial Date	Initial	Date
Loan Officer	Date receiv	ved

We are your partner in success. We're standing ready to help you realize your vision of growth, innovation, commerce and renovation. Let us be your first choice in business banking.

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DOCUMENTS REQUIRED TO BE SUBMITTED WITH APPLICATION

Please help us speed your application process. We've included the chart below to show you which documents we need from you in order to complete your application.

Essential Documents	Term Loan	Line of Credit	Commercial Mortgage	Commercial Equity Line of Credit
1. Completed and signed personal financial statement for borrower and/or guarantor.	0	Ο	0	Ο
2. Two years of tax returns OR financial statements for the borrower, including all schedules.	Ο	Ο	Ο	Ο
3. Interim statements required if year- end statements are more than six months old.	Ο	Ο	Ο	Ο
4. Two years of tax returns for the guarantor, including all schedules.	0	Ο	0	0
5. Copy of vehicle or equipment invoice (if applicable).	0			
6. Purchase offer (if applicable).			0	0
 Current rent roll or rent roll for property being purchased. 			0	0
8. Copy of signed leases.			0	0
9. Projected expenses for property being purchased (if applicable).			0	0

PERSONAL FINANCIAL STATEMENT

As of	
Name	Name
Date of Birth	Date of Birth
SSN	SSN
Home Address	Home Address
City, State, Zip	City, State, Zip
Res. Phone	Res. Phone
Employer Name	Employer Name
Business Address	Business Address
City, State, Zip	City, State, Zip
Bus. Phone	Bus. Phone
Position	Position
Driver's License #	
Issue Date Exp. Date	Issue Date Exp. Date

For the purpose of obtaining credit from Chemung Canal Trust Company of Elmira, New York, the undersigned submits the following complete statement of his/her financial position on the date indicated for the CONFIDENTIAL use of Chemung Canal Trust Company only.

The information contained in this statement is provided for the purpose of obtaining or maintaining credit with you on behalf of the undersigned or persons, firms or corporations in whose behalf of the undersigned may either severally or jointly with others, execute a guaranty in your favor. Each undersigned understands that you are relying on the information provided herein in deciding to grant or continue credit. Each undersigned represents and warrants that the information provided is true and complete and that you may consider this statement as continuing herein. I am/we are hereby notified that a consumer report may be requested in connection with this credit application. If I/we request, I/we will be informed whether or not a consumer report was requested, and if such report was requested, I/ we will be informed of the name and address of the consumer reporting agency that furnished the report. Subsequent consumer reports may be requested or utilized in connection with an update, renewal or extension of any credit with you.

Signature	Date
Signature	Date

On the form below, please list any assets or debts in your personal names. Exclude assets/debts in a business name.

SCHEDULE	1 – CASH – PERSONAL; NOTES OR AC	COUNTS RECEIVABLE		
Type (checking, sav- ings, CD, IMMA)	Institution	In Name of	Are these Pledged	Current Balance

SCHEDULE	2 – RETIREMENT A	CCOUNTS	SCHEDULE	3 – LIFE INSUR	ANCE	
Type (401k, 403b, IRA)	In Name of	Market Value	Name of Insurance Co.	Owner of Policy	Policy Amount	Cash Surrender Value

SCHEDULE 4 – INVESTMENTS			SCHEDULE 5 – PERSONAL PROPERTY		
Type (stocks, bonds, money market, savings bonds)	In Name of	Market Value	Type (belongings, artwork, jewelry, automobiles, RV, tools)	Value	

SCHEDULE 6 – REAL ESTATE OWNED								
Name of Lender	Address & Type of Property	Title in Name of	Market Value	Loan Balance	Monthly payment of principal, inter- est, taxes, insurance	Escrowed Y/N?		

SCHEDULE 7 – LOANS/TAXES DUE						
Name of Lender or note holder	Credit in the Name of	Secured/ Unsecured	Type/purpose (include credit cards, auto loans, student loans, personal loans, RE/income taxes)	Monthly Payment	Credit Limit or N/A	Current Balance





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