

Thank you for your interest in our *Small Business Loan Program*. At MutualOne, we think small businesses deserve a break. Our *Small Business Loan Program* does just that by reducing the cost and hassle of getting the financing you need. It also cuts down on the paperwork.

You qualify for this special program if:

- Your business is at least two years old
- Your annual gross revenues do not exceed \$1,000,000
- Your loan request does not exceed \$150,000

More help for local businesses

You will qualify for preferred pricing and fees if your business is located in Framingham, Natick, Ashland, Dover, Holliston, Hopkinton, Marlborough, Needham, Sherborn, Southborough, Sudbury, Wayland, Wellesley, or Weston.

Submit your application

Please send your completed **Small Business Loan Application** and supporting financial information to:

MutualOne Bank

ATTN: Small Business Loans 160 Cochituate Road Framingham, MA 01701

Or, you may bring your application to any of our banking offices.

For further assistance

If you have any questions – or would like assistance in completing your application – please call 508.820.4000, or visit any of our offices.

We look forward to receiving your application.



Small Business Loan Application



BUSINESS PROFI	LE						
.egal Name			Phone	j			
treet Address			Cell Pl	hone			
county			Email	Address			
ity	State	Zip	Type o	of Busine	ess		
rganizational Struc	cture (Check one)*		Date B	Establish	ed		
\square C Corporation \square :	S Corporation 🗌 Sole Prop	prietorship	Taxpa	yer ID #			
Not for Profit Part	tnership \square Trust \square Other $_$		# of E	mployee	es		
*Please provide copie ncomplete.)	es of organizational documen	ts with applicatio	on. Failure	may ren	der the	application/re	equest for credit
LOAN REQUEST							
urpose of Loan(s)						/// В.А М.	
oan Request	Amount Requested	Requested Te				rm (# Month	5)
ine of Credit	\$			Dema	-	+h.c	
erm Loan ime Note	\$			•	84 mor 12 mor		
otal Loans Request	\$ ed \$			Op to	12 11101	11115	
Name 	or GUARANTORS Address	City		State 	Zip 	SSN 	Date of Birth
Name	'NER (Principals, Officers, Direc	ctors, Stockholders;	please incl	ude a resu		ach Principal) k Owned	
o apply for joint cre	EIRMATION E Equal Credit Opportunity edit before a credit decisio below. Failure to comple	n can be made.	This app	lies to ir	ndividua	als and guara	intors. Please
	o apply for joint credit. end to apply for joint cred	(lit((initials) _ (initials)		(ini	tials)	



Small Business Loan Application



 PERSONAL FINANCIAL STATE 	MENT FOR	AS O		
Assets	Amount (\$)	Liabilities	Amount (\$)	
Cash (including money market accounts,	\$	Notes payable to MutualOne Bank	\$	
CDs)				
Readily Marketable Securities		Notes payable to other Financial Institutions		
Accounts and Notes Receivable		Total Accounts Payable (including Credit Cards)		
Net Cash Surrender Value of Life Insurance		Life Insurance Loans		
Residential Real Estate		Mortgage Debt (Residential)		
Held in the Name of:		Lender:		
Real Estate Investments		Mortgage Debt (Investment):		
Partnerships / PC Interests		Notes Due: Partnerships / PC Interests		
IRA, Keogh, Profit Sharing & Other Vested		Taxes Payable		
Retirement Accounts				
Deferred Income (# of yrs deferred)		Other Liabilities (List):		
Personal Property (including autos)				
Other Assets (List):				
Total Assets	\$	Total Liabilities	\$	
		Net Worth	\$	

FINANCIAL INFORMATION

1. Proof of Income (Most recent Business and Personal Fe	ederal Tax Returns)
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۷.	have you, any officers of your company or any guarantors been involved in a bankruptcy? If yes, please provide the		
	details as an attachment to this application.	Yes	☐ No
3.	Is your business involved in any lawsuits or pending litigation? If yes, please provide the details as an attachment to		
	this application.	Yes	☐ No
4.	Are all of your business' tax obligations current? If no, please provide the details as an attachment to this application.	Yes	☐ No

EQUAL CREDIT OPPORTUNITY NOTICE

Notice: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of ethnicity, race, color, religion, national origin, sex, marital status, age (provided that the applicant has the capacity to enter into a binding contract); or because 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.

Massachusetts law prohibits creditors from discriminating against credit applicants on the basis of race, ethnicity, color, religion, national origin, ancestry, sex, gender identity, sexual orientation (not where minor children are the sex object), marital status, children, handicap, age (provided that the applicant has attained the age of majority), genetic information, or because all or part of the applicant's income derives from any public assistance program. The Federal agency that administers compliance with the Federal law concerning this creditor is:

Federal Deposit Insurance Corporation FDIC Consumer Response Center 1100 Walnut St., Box # 11 Kansas City, MO 64106

The State agency that administers compliance with the State law is:

The Massachusetts Commission Against Discrimination One Ashburton Place, Boston, MA 02108



Small Business Loan Application



REPRESENTATIONS AND WARRANTIES

The information contained in this statement is provided to induce you to extend or to continue the extension of credit to the undersigned or to others upon the guarantee of the undersigned. The undersigned acknowledge and understand that you are relying on the information herein is true, correct and complete. Each of the undersigned agrees to notify you immediately and in writing of any change in name, address, or employment and of any material adverse change (1) in any of the information contained in this statement or (2) in the financial condition of any of the undersigned or (3) in the ability of any of the undersigned to perform its (or their) obligations to you. In the absence of such notice or a new and full written statement, this should be considered as a continuing statement and substantially correct. If the undersigned fail to notify you as required above, or if any of the information herein should prove to be inaccurate or incomplete in any material respect, you may declare the indebtedness of the undersigned or the indebtedness guaranteed by the undersigned, as the case may be, immediately due and payable. You are authorized to make all inquiries you deem necessary to verify the accuracy of the information herein and to determine the credit-worthiness of the undersigned. The undersigned authorize any person or consumer reporting agency to give you any information it may have on the undersigned. Each of the undersigned authorizes you to answer questions about your credit experience with the undersigned. As long as any obligation or guarantee of the undersigned to you is outstanding, the undersigned shall, at the Bank's discretion, supply annually an updated financial statement. This personal financial statement and any other financial or other information that the undersigned give you shall be your property.

Date	Applicant or Guarantor Signature	
Date	Applicant or Guarantor Signature	
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