

# Falls City National Bank



## Builder Loan Application – For use with spec homes

**Important Information to Applicant(s).** 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 applies for a loan or opens an account. **What this means for you.** When you apply for a loan or 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. In some instances, we may use outside sources to confirm the information. The information you provide is protected by our privacy policy and federal law. Read each instruction carefully before completing this form.

### LOAN REQUEST INFORMATION

LOAN REQUEST: \$ \_\_\_\_\_ EXPECTED COST OF CONSTRUCTION \$ \_\_\_\_\_

BUILD LOCATION: \_\_\_\_\_  
STREET CITY STATE ZIP CODE

IS THE PROPERTY CURRENTLY OWNED  YES  NO IS THE PROPERTY FINANCED? BALANCE OWED \$ \_\_\_\_\_

EXPECTED COMPLETION DATE: \_\_\_\_\_ EXPECTED MARKET PRICE AT COMPLETION: \$ \_\_\_\_\_

### COMPANY INFORMATION

ENTITY TYPE  SOLE PROPRIETOR  LLC  C-CORP  S-CORP  GENERAL PARTNERSHIP  OTHER \_\_\_\_\_

LEGALLY REGISTERED COMPANY NAME \_\_\_\_\_

FEDERAL TAX ID# \_\_\_\_\_ DATE BUSINESS ESTABLISHED \_\_\_\_\_ STATE \_\_\_\_\_

PHYSICAL ADDRESS \_\_\_\_\_  
STREET CITY STATE ZIP

MAILING ADDRESS (IF DIFFERENT) \_\_\_\_\_  
CITY STATE ZIP

### OWNER INFORMATION

*For each individual with 25% or more ownership. If more than 2 individuals, copy form and complete for each.*

NAME \_\_\_\_\_

OWNERSHIP % \_\_\_\_\_ TITLE \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ SSN# \_\_\_\_\_

DRIVERS LICENSE # \_\_\_\_\_ EXP DATE \_\_\_\_\_

HOME STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PRIMARY CONTACT # \_\_\_\_\_ (H W C)

SECONDARY CONTACT # \_\_\_\_\_ (H W C)

May we contact you via email?  YES  NO

EMAIL \_\_\_\_\_

DO YOU HAVE OTHER INCOME SOURCES?  YES  NO

IF YES, PLEASE LIST \_\_\_\_\_

NAME \_\_\_\_\_

OWNERSHIP % \_\_\_\_\_ TITLE \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ SSN# \_\_\_\_\_

DRIVERS LICENSE # \_\_\_\_\_ EXP DATE \_\_\_\_\_

HOME STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PRIMARY CONTACT # \_\_\_\_\_ (H W C)

SECONDARY CONTACT # \_\_\_\_\_ (H W C)

May we contact you via email?  YES  NO

EMAIL \_\_\_\_\_

DO YOU HAVE OTHER INCOME SOURCES?  YES  NO

IF YES, PLEASE LIST \_\_\_\_\_

### DECLARATIONS

Have you ever been declared bankrupt?  YES  NO

Have you had property foreclosed on?  YES  NO

Are there any outstanding judgements against you?  YES  NO

Are you a party to a lawsuit?  YES  NO

Are you presently delinquent on any tax obligations?  YES  NO

If YES to any of the above, please give explanation \_\_\_\_\_

\_\_\_\_\_

### DECLARATIONS

Have you ever been declared bankrupt?  YES  NO

Have you had property foreclosed on?  YES  NO

Are there any outstanding judgements against you?  YES  NO

Are you a party to a lawsuit?  YES  NO

Are you presently delinquent on any tax obligations?  YES  NO

If YES to any of the above, please give explanation \_\_\_\_\_

\_\_\_\_\_

**QUESTIONNAIRE**

HAVE YOU WORKED WITH US PREVIOUSLY?  YES  NO

NUMBER OF YEARS EXPERIENCE IN RESIDENTIAL CONSTRUCTION \_\_\_\_\_ IF NONE, WHAT EXPERIENCE/QUALIFICATIONS DO YOU HAVE?

TYPICAL PRICE POINT PER PROJECT \$ \_\_\_\_\_ TO \$ \_\_\_\_\_

DO YOU BUILD CUSTOM HOMES?  YES  NO

HOW MANY CUSTOM HOME PROJECTS ARE YOU CURRENTLY BUILDING? \_\_\_\_\_

DO YOU BUILD SPEC HOMES?  YES  NO

IF YES, HOW MANY DO YOU HAVE IN PROGRESS NOW? \_\_\_\_\_

ARE ANY OF THEM FINANCED?  YES  NO

IF YES, PLEASE COMPLETE THE LIST OF PROJECTS IN PROGRESS BELOW:

**SPEC HOMES IN PROGRESS (DO NOT LIST CUSTOM HOMES UNLESS YOU ARE MAKING THE MONTHLY PAYMENT OR GUARANTYING THE LOAN)**

PROJECT NAME/ADDRESS	MAX AVAILABLE DRAW BALANCE	%COMPLETE	UNDER CONTRACT?
1) _____			
2) _____			
3) _____			
4) _____			
5) _____			

ATTACH ADDITIONAL LIST IF NEEDED

**SUPPLIER/VENDOR REFERENCES**

*Please list suppliers/vendors with whom you have a line of credit or established credit.*

SUPPLIER/VENDOR	CONTACT NAME	PHONE NUMBER	EMAIL ADDRESS
1) _____			
2) _____			
3) _____			
4) _____			

**SUBCONTRACTOR REFERENCES**

*Please list subcontractors whom you regularly work with.*

SUBCONTRACTOR	CONTACT NAME	PHONE NUMBER	EMAIL ADDRESS
1) _____			
2) _____			
3) _____			
4) _____			

**LENDER REFERENCES**

*Please list lenders/banks whom you have done recent business with.*

LENDER / BANK	CONTACT NAME	PHONE NUMBER	EMAIL ADDRESS
1) _____			
2) _____			
3) _____			
4) _____			

## CERTIFICATIONS, AUTHORIZATIONS, AND SIGNATURES

By signing this application below, each party named in the section titled "OWNER INFORMATION" certifies the following:

- 1) Everything I/We have stated in this application and on any other documents submitted to Falls City National Bank, furthermore described as "Lender" are true and correct to the best of my/our knowledge. The undersigned also agrees to notify the Lender immediately in writing of any significant adverse change in such financial condition.
- 2) The undersigned acknowledges that I/We have been advised that making false statements, or reports, or willfully overvaluing any land, property, or security for the purpose of influencing the credit to be extended will subject me/us to possible criminal liability under the law.
- 3) Authorization is hereby given to the Lender to verify any and all items indicated on this statement in any manner it deems appropriate including, but not limited to, obtaining one or more credit history reports, obtaining balance and payoff information on all accounts requiring payoff as a condition of granting credit, and providing account experience with the Lender to consumer reporting agencies and others.
- 4) The undersigned understands that this Commercial Loan Application and all documentation provided in support of the application become the property of the Lender and will not be returned.
- 5) I/We authorize the Lender to contact me/us using any of the phone numbers listed on this application or that I/we subsequently provide in connection with my/our credit account – regardless whether the number I/we use is assigned to a paging service, cellular telephone service, specialized mobile radio service, other radio common carrier service or any other service for which I/we may be charged for the call. I/We further authorize the Lender to contact me/us through use of voice, text and email and through the use of prerecorded/artificial voice messages or an automatic dialing device.
- 6) I/We understand and agree that the granting of the credit facility is subject to final credit approval by the Lender. Falls City National Bank may, at any time, request additional financial information as a condition for such credit. If any of the information should prove inaccurate or incomplete in any material respect, the Lender may declare any indebtedness of the undersigned or indebtedness guaranteed by the undersigned, granted by the Lender, as the case may be, immediately due and payable. Collateral may be required as a condition of granting credit.

---

OWNER SIGNATURE

DATE

---

OWNER SIGNATURE

DATE

**REFER TO NEXT PAGE FOR ADDITIONAL DOCUMENTATION REQUIRED**



## **ADDITIONAL REQUIRED DOCUMENTATION**

*USE THE CHECKLIST BELOW TO DETERMINE ADDITIONAL DOCUMENTATION THAT WILL BE REQUIRED*

### **ITEMS NEEDED FROM BUILDER WITH APPLICATION**

#### REQUIRED FOR DBA OR GENERAL PARTNERSHIP

- PERSONAL FINANCIAL STATEMENT
- 2 YEARS TAX RETURNS
- CURRENT PROFIT/LOSS STATEMENT
- CURRENT BALANCE SHEET

#### REQUIRED FOR LIMITED LIABILITY COMPANY

- PERSONAL FINANCIAL STATEMENT FOR EACH OWNER
- 2 YEARS TAX RETURNS
- CURRENT PROFIT/LOSS STATEMENT
- CURRENT BALANCE SHEET
- CERTIFICATE OF FORMATION (NEW CUSTOMERS ONLY)
- CERTIFICATE OF FILING (NEW CUSTOMERS ONLY)
- IRS EIN CERTIFICATE (NEW CUSTOMERS ONLY)
- OPERATING AGREEMENT OR COMPANY AGREEMENT (NEW CUSTOMERS ONLY)

#### REQUIRED FOR C-CORP OR S-CORP

- PERSONAL FINANCIAL STATEMENT FOR EACH OWNER
- 2 YEARS TAX RETURNS
- CURRENT PROFIT/LOSS STATEMENT
- CURRENT BALANCE SHEET
- CERTIFICATE OF FORMATION (NEW CUSTOMERS ONLY)
- ARTICLES OF INCORPORATION (NEW CUSTOMERS ONLY)
- IRS EIN CERTIFICATE (NEW CUSTOMERS ONLY)
- COMPANY BYLAWS OR ORGANIZATIONAL MINUTES (NEW BUSINESS ONLY)

### **ITEMS NEEDED FROM PRIOR TO CLOSING ON CONSTRUCTION LOAN (MAY BE SUPPLIED WITH THE APPLICATION IF AVAILABLE)**

- ITEMIZED COST BREAKDOWN FOR THE PROJECT
- PLANS & SPECS FOR CONSTRUCTION
- DEED TO LOT OR CONTRACT TO PURCHASE
- BUILDERS RISK POLICY

# PERSONAL BALANCE SHEET

(EACH OWNER SHOULD COMPLETE THIS FORM)

Use the section below to determine your overall PERSONAL net worth. We will ask you to itemize some of these items.

This section is required for anyone who will guarantee the loan. If owners are a married couple, you may complete the form jointly.

NAME OF GUARANTOR: \_\_\_\_\_

## PERSONAL ASSETS

### CASH ON HAND OR ON DEPOSIT

CHECKING ACCOUNTS	BANK NAME _____	\$ _____
CHECKING ACCOUNTS	BANK NAME _____	\$ _____
CHECKING ACCOUNTS	BANK NAME _____	\$ _____
SAVINGS ACCOUNTS	BANK NAME _____	\$ _____
SAVINGS ACCOUNTS	BANK NAME _____	\$ _____
CERTIFICATE OF DEPOSIT	BANK NAME _____	\$ _____
CERTIFICATE OF DEPOSIT	BANK NAME _____	\$ _____
OTHER CASH		\$ _____
<b>TOTAL CASH AVAILABLE</b>		<b>\$ _____</b>

### PERSONAL VEHICLES/RECREATIONAL VEHICLES (attach another sheet if you need more space)

YEAR _____	MAKE _____	MODEL _____	MARKET VALUE
YEAR _____	MAKE _____	MODEL _____	\$ _____
YEAR _____	MAKE _____	MODEL _____	\$ _____
<b>TOTAL VEHICLES</b>			<b>\$ _____</b>

### REAL ESTATE OWNED

ADDRESS (STREET, CITY, STATE, ZIP)	TYPE OF PROPERTY *	ANNUAL INSURANCE COST	ANNUAL PROPERTY TAXES	MARKET VALUE
_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	\$ _____
<b>TOTAL REAL ESTATE</b>				<b>\$ _____</b>

\*Primary residence, rental, land, 2nd home, investment

### EQUIPMENT

**TOTAL EQUIPMENT** \$ \_\_\_\_\_

### LIVESTOCK /FARM PRODUCTS

**TOTAL LIVESTOCK/FARM PRODUCTS** \$ \_\_\_\_\_

### NON-RETIREMENT INVESTMENTS

		MARKET VALUE
BROKERAGE ACCOUNTS (NON-RETIREMENT)		\$ _____
OTHER INVESTMENTS	DESCRIBE _____	\$ _____
<b>TOTAL INVESTMENTS (NON-RETIREMENT)</b>		<b>\$ _____</b>

### RETIREMENT

	MARKET VALUE	
RETIREMENT ACCOUNTS (IRA, Roth IRA, 401k, 403b)	\$ _____	
PENSION/ANNUITY	\$ _____	
<b>TOTAL RETIREMENT</b>		<b>\$ _____</b>

### PERSONAL PROPERTY / OTHER

		MARKET VALUE
GUNS/JEWELRY/COLLECTIBLES		\$ _____
NOTES RECEIVABLE		\$ _____
OTHER	DESCRIBE _____	\$ _____
OTHER	DESCRIBE _____	\$ _____
<b>TOTAL PERSONAL PROPERTY / OTHER</b>		<b>\$ _____</b>

**TOTAL ASSETS** (CASH, VEHICLES, EQUIPMENT, REAL ESTATE, LIVESTOCK, INVESTMENTS, PERSONAL PROPERTY) \$ \_\_\_\_\_

**LIABILITIES (PERSONAL DEBTS)**

MORTGAGES ON REAL ESTATE MORTGAGEE OR NOTE HOLDER	MONTHLY PAYMENT	TERM/MATURITY	ON ESCROW? <input type="checkbox"/> YES <input type="checkbox"/> NO	AMOUNT OF MORTGAGE
_____	_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO	\$ _____
_____	_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO	\$ _____
_____	_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO	\$ _____
_____	_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO	\$ _____
<b>TOTAL MORTGAGE BALANCES</b>				<b>\$ _____</b>

VEHICLE / RECREATIONAL VEHICLE / EQUIPMENT LOANS			
NOTE HOLDER	PAYMENT	TERM/MATURITY	BALANCE
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
<b>TOTAL AUTO / EQUIPMENT LOANS</b>			<b>\$ _____</b>

LIVESTOCK/AG LOANS			
NOTE HOLDER	PAYMENT	TERM/MATURITY	BALANCE
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
<b>TOTAL LIVESTOCK/AG LOANS</b>			<b>\$ _____</b>

OTHER DEBTS			
	PAYMENT	TERM/MATURITY	BALANCE
STUDENT LOANS	_____	_____	\$ _____
CREDIT CARDS	_____	_____	\$ _____
UNSECURED BANK LOANS	_____	_____	\$ _____
SECURED BANK LOANS	_____	_____	\$ _____
LINES OF CREDIT: DESCRIBE TERM/RATE _____			\$ _____
UNPAID TAXES: REAL ESTATE OR INCOME TAXES			\$ _____
OTHER _____			\$ _____

**TOTAL LIABILITIES** (MORTGAGES, VEHICLE LOANS, EQUIPMENT LOANS, LIVESTOCK/AG LOANS, OTHER DEBTS) \$ \_\_\_\_\_

**PERSONAL NET WORTH**

USE TOTALS FROM ABOVE TO CALCULATE NET WORTH (ASSETS LESS DEBTS = NET WORTH)

**TOTAL ASSET VALUES** \$ \_\_\_\_\_

**TOTAL LIABILITIES BALANCES (DEBTS)** \$ \_\_\_\_\_

**OVERALL NET WORTH** \$ \_\_\_\_\_

By signing below, each party named certifies that everything I/We have stated in this application and on any other documents submitted to Falls City National Bank, furthermore described as "Lender" are true and correct to the best of my/our knowledge. The undersigned also agrees to notify the Lender immediately in writing of any significant adverse change in such financial condition.

\_\_\_\_\_  
OWNER SIGNATURE DATE

\_\_\_\_\_  
OWNER SIGNATURE DATE