



FIRST  
INDEPENDENT  
BANK *Est. 1903*

www.fibmn.com

# COMMERCIAL/AG LOAN APPLICATION

*Important Applicant Information: Federal law requires financial institutions to obtain sufficient information to verify your identity. You may be asked several questions and to provide one or more forms of identification to fulfill this requirement. 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.*

Email Application to:

Lender: Matt Ust

Financing Application:	Finance	Lease	Credit Purpose:	Agricultural	Commercial/Business
Dealership:	_____		Salesperson:	_____	
City:	_____	State:	_____		

Business Entity:	LLC	Corporation	LLP	General Partnership	Trust	Sole Proprietor/DBA	If Sole Proprietor	Date of Birth:	_____
Business Name/Full Legal Name:	_____				Entity Formation Date:	_____	NAICS Code:	_____	(If Known)
TIN:	_____	Primary Phone:	_____	Cell Phone:	_____				
Address:	_____				Email:	_____			
City:	_____	State:	_____	Zip:	_____	County:	_____		
State of Incorporation (if different from above): _____									
Signer Type:	Individual	Entity	Signer Name:	_____			Signer Title:	_____	

Is applicant a U.S. Citizen or foreign U.S. formed legal entity?	Yes	No								
Gross Income:	\$0 – \$25,000	\$25,001 – \$100,000	\$101,000 – \$500,000	\$500,001 – 1,000,000	> \$1,000,000					
Net Worth:	\$0 – \$25,000	\$25,001 – \$100,000	\$101,000 – \$500,000	\$500,001 – 1,000,000	> \$1,000,000					
Total Assets:	_____		Total Liabilities:	_____						
Loan request over 100,000 should include a copy of a balance sheet and two years of tax returns										

Joint Applicant	Guarantor								
First:	_____	Middle:	_____	Last:	_____	Date of Birth:	_____		
SSN:	_____	Primary Phone:	_____	Cell Phone:	_____				
Address:	_____				Email:	_____			
City:	_____	State:	_____	Zip:	_____	County:	_____		

**CREDIT DENIAL NOTICE.** If your gross revenues were \$1,000,000 or less in your previous fiscal year, or you are requesting trade credit, a factoring agreement, or similar types of business credit in this Commercial Loan Application, and 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 First Independent Bank 300 Front St. Russell, MN 56169 (507) 823 4391 within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement. The notice that follows describes additional protections extended to you.

**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 this creditor is:

Federal Deposit Insurance Corporation  
CONSUMER RESPONSE CENTER  
1100 WALNUT ST. BOX 11  
KANSAS CITY, Missouri 64106-

**SIGNATURES.** By signing below, Loan Applicant submits this application and the information provided on all accompanying financial statements and schedules for the purpose of obtaining credit and represents that the information submitted is accurate and complete. Loan Applicant acknowledges that representations made in this application will be relied on by Lender in evaluating this application and, if approved, in extending credit. Loan Applicant represents that none of the parties named in this application have relied on advice from the Lender in applying for or receiving any credit. Loan Applicant acknowledges that Lender has not made any commitment to approve this application and extend credit, unless otherwise agreed to in writing. Lender is authorized to conduct any inquiries it decides are necessary to verify the accuracy of the information contained in this application and to use any reasonable method to determine the creditworthiness of the Loan Applicant. Lender is also authorized to answer any questions from others about Lender's credit experience with the parties in this application. Loan Applicant will promptly notify Lender of any subsequent changes which would affect the accuracy of this application, and will provide all documents and information that Lender decides are necessary to complete this application. Loan Applicant authorizes Lender to retain this application, whether or not Lender approves any extension of credit. Any intentional misrepresentation of the information contained herein could result in criminal action under federal law.

In addition, each individual signing below authorizes the Creditor to check their individual credit account and employment history and have a credit reporting agency prepare a consumer credit report on them.

_____	_____	_____
APPLICANT	DATE	TITLE
_____	_____	_____
APPLICANT	DATE	TITLE