Falls City National Bank

Builder Application



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.

	COMPANY	NFORMATION			
ENTITY TYPE ☐ SOLE PROPRIETOR ☐ LLC ☐ C-CORP	□ S-CORP □	GENERAL PARTNERSHIP OTHER			
LEGALLY REGISTERED COMPANY NAME					
FEDERAL TAX ID#	DATE BUSIN	NESS ESTABLISHED	STATE		
PHYSICAL ADDRESS					
STREET		CITY	STATE	ZIP	•
MAILING ADDRESS (IF DIFFERENT)		CITY	STATE	ZIP	
CONTACT PERSON (IF DIFFERENT FROM OWNER)					
	QUEST	ONNAIRE			
HAVE YOU WORKED WITH US PREVIOUSLY? □YES □NO)				
NUMBER OF YEARS EXPERIENCE IN RESIDENTIAL CONSTI	RUCTION	IF NONE, WHAT EXPER	RIENCE/QUALIFICATIONS I	DO YOU	HAVE?
TYPICAL PRICE POINT PER PROJECT \$	TO \$				
HOW MANY CUSTOM HOMES DO YOU TYPICALLY BUILD	AT ONE TIME?				
THESE QUESTIONS ARE REGARDING SPEC HOMES: DO Y	OU ALSO BUILD	SPEC HOMES? □YES □NO			
IF YES, HOW MANY DO YOU HAVE IN PROGRESS NOW?					
ARE ANY OF THEM FINANCED?	ASE ATTACH A L	IST OF PROJECTS IN PROGRESS. GIV	/E LOAN BALANCES WITH	% COM	PLETE
	OWNER IN	FORMATION			
For each individual with 25% or more ov	vnership. If m	ore than 2 individuals, copy fo	orm and complete for o	each.	
NAME		NAME			
OWNERSHIP %TITLE		OWNERSHIP %TIT	'LE		
DATE OF BIRTHSSN#	 	DATE OF BIRTH	SSN#		
DRIVERS LICENSE # EXP DATE		DRIVERS LICENSE #	EXP DATE		
HOME STREET ADDRESS		HOME STREET ADDRESS			
CITYSTATE	_ZIP	CITY	STATE	_ZIP	
PRIMARY CONTACT #	(H W C)	PRIMARY CONTACT #		(HWC)
SECONDARY CONTACT #	(H W C)	SECONDARY CONTACT #		(H W C)
May we contact you via email?	□YES □NO	May we contact you via email?		□YES	□NO
EMAIL		EMAIL			
PERSONAL DECLARATIONS		PERSONAL	DECLARATIONS	;	
Have you been convicted of a felony in the last 7 years?	□YES □NO	Have you been convicted of a f	felony in the last 7 years?	□YES	□NO
Have you ever been declared bankrupt?	□YES □NO	Have you ever been declared b	pankrupt?	□YES	□NO
Have you had property foreclosed on?	□YES □NO	Have you had property foreclo	sed on?	□YES	□NO
Are there any outstanding judgements against you?	□YES □NO	Are there any outstanding judg	gements against you?	□YES	□NO
Are you a party to a lawsuit?	□YES □NO	Are you a party to a lawsuit?			□NO
Are you presently delinquent on any tax obligations?	□YES □NO	Are you presently delinquent of	on any tax obligations?	□YES	□NO
If YES to any of the above, please give explanation		If YES to any of the above, plea	ase give explanation		

BUILDER APPLICATION PAGE 2

		ENDOR REFERENC		
SUPPLIER/VENDOR	Please list suppliers/vendors with wh	om you have a line of cre PHONE NUMBER	edit or established cred EMAIL ADDRESS	it.
			LIVIAIL ADDITESS	
4)	CURCONTR			
		ACTOR REFERENC tors whom you regularly		
SUBCONTRACTOR	CONTACT NAME	PHONE NUMBER	EMAIL ADDRESS	
1)				
2)				
3)				
4)				
	LENDE	R REFERENCES		
	Please list lenders/banks wh	•		
LENDER / BANK	CONTACT NAME	PHONE NUMBER	EMAIL ADDRESS	
3)				
4)				
	CERTIFICATIONS, AUTH	IORIZATIONS, AND	SIGNATURES	
Everything I/We have state correct to the best of my/c condition. The undersigned acknowle subject me/us to possible of the undersigned understannot be returned. I/We authorize the Lender credit account – regardless common carrier service or	below, each party named in the section titled "Over this application and on any other documents our knowledge. The undersigned also agrees to not dges that I/We have been advised that making factiminal liability under the law. Indicate this Builder Application and all document to contact me/us using any of the phone number whether the number I/we use is assigned to a parany other service for which I/we may be charged in the use of prerecorded/artificial voice messages.	s submitted to Falls City Nation otify the Lender immediately in lise statements or reports for the tation provided in support of the results of the tation on this application or the ging service, cellular telephon for the call. I/We further authorities of the call.	nal Bank, furthermore describ n writing of any significant ac- the purpose of influencing the he application become the paths of the subsequently proving that I/we subsequently proving service, specialized mobile provize the Lender to contact	dverse change in such financial e credit to be extended will roperty of the Lender and will de in connection with my/our radio service, other radio
OWNER SIGNATURE	DATE	OWNER SIGNATU	JRE	DATE
	AUTHORIZATION 1	O PULL A CREDIT	REPORT	
this need is that the builde	rictly speaking, applying for credit, it is necessarer will be advanced significant sums of money in it to determine that the builder has a history of n	order to pay subcontractors a	and to purchase materials fo	
	en to Falls City National Bank to verify any and a r more credit history reports and/or contacting m		ment in any manner it deem	is appropriate including, but not
OWNER SIGNATURE	DATE	OWNER SIGNATU	JRE	DATE

1)

2)3)4)

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 (CREATE YOUR OWN OR USE OURS)
- □ LAST FILED TAX RETURN

REQUIRED FOR LIMITED LIABILITY COMPANY

- ☐ IF SINGLE MEMBER LLC PERSONAL FINANCIAL STATEMENT (CREATE YOUR OWN OR USE OURS)
- ☐ COMPANY BALANCE SHEET IF AVAILABLE
- ☐ RECENT PROFIT/LOSS STATEMENT
- □ LAST FILED TAX RETURN
- □ CERTIFICATE OF FORMATION (NEW BUSINESS ONLY)
- □ CERTIFICATE OF FILING (NEW BUSINESS ONLY)
- ☐ IRS EIN CERTIFICATE (NEW BUSINESS ONLY)
- □ OPERATING AGREEMENT OR COMPANY AGREEMENT (NEW BUSINESS ONLY)

REQUIRED FOR C-CORP OR S-CORP

- ☐ IF SINGLE MEMBER LLC PERSONAL FINANCIAL STATEMENT (CREATE YOUR OWN OR USE OURS)
- ☐ COMPANY BALANCE SHEET IF AVAILABLE
- ☐ RECENT PROFIT/LOSS STATEMENT
- □ LAST FILED TAX RETURN
- □ CERTIFICATE OF FORMATION (NEW BUSINESS ONLY)
- ☐ ARTICLES OF INCORPORATION (NEW BUSINESS ONLY)
- ☐ IRS EIN CERTIFICATE (NEW BUSINESS 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)

- □ COST BREAKDOWN FOR THE PROJECT
- □ EXECUTED CONSTRUCTION CONTRACT / PLANS & SPECS FOR CONSTRUCTION
- □ BUILDERS RISK POLICY TO BE SUPPLIED BY BUILDER OR HOMEOWNER PRIOR TO FRAME CONSTRUCTION







Personal Financial Statement

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.

If assets are jointly owned, both parties must complete and sign this financial statement.

PERSONAL INFORMATION

If this is an application for joint credit, Applican	nt and Co-Ap	oplicant each agree that	we intend to apply for joint credit (initial here	APPLICANT	JOINT-APPLICANT
NAME			NAME		
DATE OF BIRTHSSN#_			DATE OF BIRTH		
DRIVERS LICENSE #	EXP DATE_		DRIVERS LICENSE #	EXP DATE	
STREET ADDRESS			STREET ADDRESS		
CITY			CITY		
(If Different) MAILING ADDRESS			(If Different) MAILING ADDRESS		
CITY	STATE	ZIP	CITY	STATE	ZIP
PRIMARY CONTACT #		(H W C)	PRIMARY CONTACT #		(H W C)
SECONDARY CONTACT #		(H W C)	SECONDARY CONTACT #		(H W C)
May we contact you via email? EMAIL		□YES □NO	May we contact you via email? EMAIL		□YES □NO
OCCUPATION			OCCUPATION		
EMPLOYER			EMPLOYER		
POSITION#			POSITION		
		Have you previously received credi			
	SOURC	ES OF INCOME	E / ANNUAL EXPENSES		
W2 INCOME/ANNUAL SALARY - Applicant	\$		LINE OF CREDIT DUE IN 1 YEAR	\$	
W2 INCOME/ANNUAL SALARY - Joint	\$		MORTGAGE OR RENT PAYMENTS		
RETIREMENT/PENSION INCOME			PROPERTY TAXES	\$	
PROFIT FROM BUSINESS	\$		INCOME TAXES	\$	
RENTAL INCOME	\$		INSURANCE PREMIUMS	\$	
ROYALTY INCOME	\$		BUSINESS OPERATING EXPENSES	\$	
FARMING/RANCHING INCOME	\$		FARMING/RANCHING EXPENSES	\$	
INTEREST/DIVIDEND INCOME	\$		OTHER (DESCRIBE)		
OTHER (DESCRIBE)			OTHER (DESCRIBE)		
TOTAL ANNUAL INCOME	\$		TOTAL ANNUAL EXPENSES	\$	
		DECLA	RATIONS	ARRIGANIT	LOUNT ARRUSAN
Are you obligated to make alimony o Have you ever been declared bankru Have had property foreclosed on? If	pt? If Yes,	when	Yes, Amount \$	APPLICANT YES NO YES NO	O GYES GNO
Are there any outstanding judgemen	ts against	you?		□YES □NC	
Are you a party to a lawsuit?				□YES □NC	
Are you presently delinquent on any	□YES □NC	O □YES □NO			

PERSONAL FINANCIAL STATEMENT PAGE 2

PERSONAL BALANCE SHEET

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

ASSETS							
CASH ON HAND OR O	N DEPOSIT						
	CHECKING ACCOUN	TS	BANK NAME_			\$	
	CHECKING ACCOUN	TS				\$	
	SAVINGS ACCOUNT	S	BANK NAME_	····		\$	
	SAVINGS ACCOUNT	S	BANK NAME_			\$	
	CERTIFICATE OF DEI	POSIT	BANK NAME_	····		\$	
	CERTIFICATE OF DEI	POSIT	BANK NAME_			\$	
	OTHER CASH					\$	
				TOTAL CASH AVA	ILABLE	\$	
PERSONAL VEHICLES/	RECREATIONAL VEHICLE	S (attach and	other sheet if you nee	d more space)			MARKET VALUE
	YEAR N	1AKE		MODEL		\$	
	YEAR N	1AKE		MODEL		\$	
	YEAR N	1AKE		MODEL		\$	
	YEAR N	1AKE		MODEL		\$	
	YEAR N	1AKE		MODEL		\$	
				TOTAL VEHICLES		\$	
REAL ESTATE OWNED	•		TYPE OF	ANNUAL	ANNUAL		
ADDRESS (STREET, CITY, S	STATE, ZIP)		PROPERTY *	INSURANCE COST	PROPERTY TAXES		MARKET VALUE
						\$	
						\$	
						\$	
						\$	
						\$	
*Primary residence, rent	al, land, 2nd home, investm	ent		TOTAL REAL ESTA	ATE	\$	
EQUIPMENT (attach an	other sheet if you need mor	e space)					MARKET VALUE
	DESCRIPTION			S/N		\$	
	DESCRIPTION			S/N		\$	
	DESCRIPTION			S/N		\$	
	DESCRIPTION					\$	
	DESCRIPTION			S/N		\$	
	DESCRIPTION			S/N		\$	
				TOTAL EQUIPME	NT	\$	
LIVESTOCK				TOTAL LIVESTOCE	<	\$	
FARM PRODUCTS				TOTAL FARM PRO	DDUCTS	\$	
NON-RETIREMENT IN							MARKET VALUE
TOTAL NETWENT III	BROKERAGE ACCOL	INTS (NON-R	RETIREMENT)			\$	
	OTHER INVESTMEN		DESCRIBE				
	OTTEN	13	DESCRIBE	TOTAL INVESTME			
DETIDEMACNIT				. STAL HAVESTIVIL	(HON KEIKEMENI)	Ÿ	
RETIREMENT	DETIDENATAL ACCOU	INITC (ISS =				Ļ	MARKET VALUE
	RETIREMENT ACCOU	JINIS (IKA, R	otn IKA, 401k, 403b)			۶ <u> </u>	
	PENSION/ANNUITY	-				ې	
	OTHER RETIREMEN	I	DESCRIBE			\$	
				TOTAL RETIREME	NI	S	

PERSONAL FINANCIAL STATEMENT PAGE 3

PERSONAL PRO	PERTY / OTHER				MARKET VALUE
	GUNS/JEWELRY/COLLECTIB	LES			\$
	NOTES RECEIVABLE				\$
	OTHER	DESCRIBE			\$
	OTHER	DESCRIBE			\$
			TOTAL PERSONAL	PROPERTY / OTHER	\$
TOTAL ASS	SETS (CASH, VEHICLES, EQUIPMENT, REA	L ESTATE, LIVESTOCK	, INVESTMENTS, PERSONA	L PROPERTY)	\$
LIABILITIES (DEBTS)				
MORTGAGES OF MORTGAGEE OR N		MONTHLY PAYMENT	TERM/MATURITY	ON ESCROW?	AMOUNT OF MORTGAGE
				□YES □NO	\$
				□YES □NO	\$
				□YES □NO	\$
				□YES □NO	\$
			TOTAL MORTGAG	E BALANCES	\$
VEHICLE / RECR	EATIONAL VEHICLE / EQUIPMENT LOA	NS			
NOTE HOLDER		PAYMENT	TERM/MATURITY		BALANCE \$
					\$
					\$
					\$
					\$
					٠ د
				LUDBAENT LOANC	\$
LIVESTOCK /AC	LOANS		TOTAL AUTO / EQ	UIPIVIENT LUANS	\$
NOTE HOLDER	LOANS	PAYMENT	TERM/MATURITY		BALANCE
NOTETIOLDER		TATIVILINI	TERMINIMATORITI		\$
					\$
					\$
OT!!!!			TOTAL LIVESTOCK	/AG LOANS	\$
OTHER DEBTS		PAYMENT	TERM/MATURITY		
	STUDENT LOANS				\$
	CREDIT CARDS	 -			\$
	UNSECURED BANK LOANS				\$
	SECURED BANK LOANS				\$
	LINES OF CREDIT: DESCRIBE TERM/	RATE			\$
	UNPAID TAXES: REAL ESTATE OR IN	ICOME TAXES			\$
	OTHER				\$
TOTAL LIA	BILITIES (MORTGAGES, VEHICLE LOAI	NS, EQUIPMENT LOAN	NS, LIVESTOCK/AG LOANS,	OTHER DEBTS)	\$
NET WORTH					
USE TOTALS FROM	A ABOVE TO CALCULATE NET WORTH (ASSET	TS LESS DEBTS = NEW	WORTH)		
TOTAL ASS	SET VALUES	\$			
TOTAL LIA	BILITIES BALANCES (DEB	TS) \$			
OVERALL I	NET WORTH	\$			

PERSONAL FINANCIAL STATEMENT PAGE 4

CERTIFICATIONS, AUTHORIZATIONS, AND SIGNATURES

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

Everything I/We have stated in this statement 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 PERSONAL FINANCIAL STATEMENT 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.

APPLICANT SIGNATURE	DATE	JOINT APPLICANT SIGNATURE	DATE

If the above financial statement is being submitted for new credit or loan renewal:

USE THE FOLLOWING TABLE TO DETERMINE ADDITIONAL DOCUMENTATION THAT WILL BE REQUIRED TO CONSIDER YOUR REQUEST

Credit Request	Minimum Information Required			
Up to \$50,000	Current Personal Financial Statement			
	Nost recent personal tax return			
	Recent Paystubs (2 months)			
	Bank statements verifying cash on deposit			
	Additional information may be required			
\$50,000 and above	Current Personal Financial Statement			
	2 years recent personal tax returns			
	Recent Paystubs (2 months)			
	Bank statements verifying cash on deposit			
	Additional information may be required			
	*Updates of financials will be required annually or more often			

