



Thank you for choosing Frost for your business credit needs. We are committed to helping you determine the best financing option for your business. To assist us, we ask that you complete and submit the attached Business Banking application so we can begin processing your request. You will also need to submit entity documents. If your business is a:

- Corporation, a copy of the file stamped Articles or Certificate of Incorporation
- Partnership, a copy of the partnership agreement and if a Limited Partnership, a copy of the file stamped Certificate of Limited Partnership
- LLC, a copy of the file stamped Articles or Certificate of Organization and Regulations
- Sole Proprietorship or a General Partnership, a copy of the filed Assumed Name Certificate

Additionally, if you are purchasing equipment, we will need a copy of the invoice or bill of sale, a description and serial number.

We ask that you also provide the following:

1. Your business tax returns or fiscal year end financial statements for the last two years.
2. Your most recent business interim balance sheet and income statement.
3. A completed Personal Financial Statement and Cash Flow Statement for each principal or business owner.
4. Your personal tax returns for the last two years.
5. If you are requesting a line of credit then please provide the most recent listing/aging of your accounts receivable and payables.

Please bring the completed application and all other applicable information to a Frost financial center near you. After we have received all of your information we will call you to notify you of our decision or to obtain clarification.

Frost is a preferred Small Business Administration lender which may allow for approval of your package in one of their programs. If approved, we will work with you to select the Frost lending program that best fits your business needs. Please note that if your loan is approved and closed, a processing and/or origination fee may be applicable.

Thank you for allowing Frost to serve your banking needs.

Frost Business Banking Center

GENERAL BUSINESS INFORMATION

Legal Name: _____

 Business Structure:
 Sole Proprietorship
 General Partnership
 Limited Liability Partnership
 Not-For-Profit
 S Corporation
 Joint Venture
 Limited Partnership
 Professional Association
 C Corporation
 Limited Liability Company
 Foreign Entity
 Professional Corporation

Brief Business Description: _____

Physical Address (no P.O. Box): _____

City: _____ State & Zip: _____

Mailing Address (if different from above): _____

City: _____ State & Zip: _____

Main Business Phone: _____ Web Site Address: _____

Date Business Established: _____ Present Management Since: _____

Federal Tax I.D.: _____ Total Employees: _____

Entity Type: _____

 Type of ID (For Sole Proprietors or General Partners Only):
 Driver's License ID
 State ID
 Military ID
 Passport ID
 Government ID

ID#: _____ Expiration Date: _____

Place of Issuance: _____ Issue Date: _____

Primary Checking Location: _____

Avg Checking Balance: \$ _____

Annual Sales Revenue: \$ _____

This section must be complete before submitting.

 Fiscal Year End (FYE) Date: _____
 FYE Net Income: \$ _____
 Depreciation: \$ _____
 Interest Expense: \$ _____

 Has the business declared bankruptcy in the last ten (10) years? Yes No
 Has the business incurred a loss in any of the last three (3) years? Yes No
 Are there any delinquent state or federal taxes owed by the business? Yes No
 Is the business for sale or under agreement that would change the ownership? Yes No

If you answered "yes" to any of the above, provide details on an additional sheet.

CREDIT REQUEST

 Product Type:
 Unsecured Loan ≤ 50M
 Commercial Real Estate
 ACH Direct Deposit of Payroll
 Unsecured Loan > 50M
 Letter of Credit
 Term Xpress - Vehicle/Equipment ≤ 35M
 Secured Line of Credit
 Lease
 Secured Term Loan
 SBA Guaranteed Loan

Amount Requested: _____ Term Requested (months): _____

 Automatically deduct the payment from the following Frost Bank account: Account #: _____

 Purpose of Funds:
 Purchase Equipment
 Purchase Inventory
 Purchase Real Estate
 Lease
 Refinance
 Finance Receivables
 Improve Real Estate
 Purchase Vehicle
 Letter of Credit
 Other

Describe: _____

COLLATERAL

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

Description: _____

Market Value: _____ Existing Lien Amount: _____

 Is collateral owned by someone other than the business or owners of the business? Yes No If yes, enter owner's name & tax ID below.

 Is collateral on leased property? Yes No If yes, enter landlord's name and address below.

Description: _____

Market Value: _____ Existing Lien Amount: _____

 Is collateral owned by someone other than the business or owners of the business? Yes No If yes, enter owner's name & tax ID below.

 Is collateral on leased property? Yes No If yes, enter landlord's name and address below.

Additional Collateral Comments: _____

CURRENT BUSINESS DEBT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

Creditor	Type	Current Balance	Monthly Payment	Maturity	Payoff with Proceeds
	<input type="checkbox"/> Term Loan <input type="checkbox"/> Line of Credit	Orig. Bal.			<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Lease <input type="checkbox"/> Letter of Credit	Current Bal.			
	<input type="checkbox"/> Term Loan <input type="checkbox"/> Line of Credit	Orig. Bal.			<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Lease <input type="checkbox"/> Letter of Credit	Current Bal.			
	<input type="checkbox"/> Term Loan <input type="checkbox"/> Line of Credit	Orig. Bal.			<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Lease <input type="checkbox"/> Letter of Credit	Current Bal.			

PRINCIPALS (GUARANTORS)

(PERSON OR ENTITY THAT OWNS/CONTROLS AT LEAST 20% INTEREST GENERALLY MUST GUARANTEE THE LOAN*. ATTACH ADDITIONAL SHEETS IF NECESSARY.)

*MAY REQUIRE HOLDERS OF AT LEAST 5% OWNERSHIP OR KEY MANAGEMENT PERSONS IF DEEMED VITAL TO THE SUCCESS OF THE BUSINESS

Full Legal Name: _____
 Physical Address (no P.O. Box): _____
 City: _____ State & Zip: _____
 Mailing Address (if different from above): _____
 City: _____ State & Zip: _____
 Social Security/TIN #: _____ Date of Birth (mm/dd/yyyy): _____
 Checking Location: _____ License/ID State & #: _____
 Principal Type: Guarantor Guarantor/Signer Signer Co-Signer/Guarantor Co-Signer
 Title: _____
 Percent Ownership: _____ E-Mail Address: _____
 Salary (per month): \$ _____ Revolving Credit Pymts: \$ _____
 Other Income (per month): \$ _____ Mortgage/Rent Pymt: \$ _____
 Date of Birth (of individual): _____ Other Pymts: \$ _____
 Has this principal declared bankruptcy in the last ten (10) years? Yes No
 Is this principal a spouse to another principal on a joint personal financial statement? Yes No

If an entity:	Type:	<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> General Partnership	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Not-For-Profit
		<input type="checkbox"/> S Corporation	<input type="checkbox"/> Joint Venture	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Professional Association
		<input type="checkbox"/> C Corporation	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Foreign Entity	<input type="checkbox"/> Professional Corporation

Full Legal Name: _____
 Physical Address (no P.O. Box): _____
 City: _____ State & Zip: _____
 Mailing Address (if different from above): _____
 City: _____ State & Zip: _____
 Social Security/TIN #: _____ Date of Birth (mm/dd/yyyy): _____
 Checking Location: _____ License/ID State & #: _____
 Principal Type: Guarantor Guarantor/Signer Signer Co-Signer/Guarantor Co-Signer
 Title: _____
 Percent Ownership: _____ E-Mail Address: _____
 Salary (per month): \$ _____ Revolving Credit Pymts: \$ _____
 Other Income (per month): \$ _____ Mortgage/Rent Pymt: \$ _____
 Other Pymts: \$ _____
 Has this principal declared bankruptcy in the last ten (10) years? Yes No
 Is this principal a spouse to another principal on a joint personal financial statement? Yes No

If an entity:	Type:	<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> General Partnership	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Not-For-Profit
		<input type="checkbox"/> S Corporation	<input type="checkbox"/> Joint Venture	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Professional Association
		<input type="checkbox"/> C Corporation	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Foreign Entity	<input type="checkbox"/> Professional Corporation

Agreement: By signing below, I/Authorized Agent for applicant certify that the information on the applicant and its principals contained in this application and on any attachments, is representative of the current financial condition. Frost Bank may verify information contained in the application with any creditors and obtain credit information from any creditors and/or credit reporting agencies. I (we) hereby authorize Frost Bank to obtain a consumer credit bureau report on me (us) in connection with my (our) business loan request or application. This authorization will also extend to any additional or future business credit reviews as deemed necessary by Frost Bank. The application and any other information furnished will remain the property of Frost Bank.

 Borrower's Signature Date

 Borrower's Signature Date



as of _____
Marital Status: [] Married [] Unmarried [] Separated
Is this a joint financial statement? [] Yes [] No

Name Date of Birth Employer/Position Years
Street Address/City/State/Zip Social Security Number Home Phone Business Phone
Additional Party (if Joint Financial Statement) # of Deps. Soc. Sec. # Business Address/City/State/Zip

Table with columns: ASSETS (CASH, SECURITIES, NOTES AND ACCOUNTS RECEIVABLE, NET CASH VALUE OF INS. & ANNUITIES, REAL ESTATE, IRA'S, KEOGHS & RETIREMENT PLANS, PERSONAL PROPERTY & AUTOMOBILES, OTHER ASSETS, TOTAL ASSETS) and LIABILITIES (TAXES OWING, NOTES PAYABLE, ACCOUNTS PAYABLE, ESTIMATED CREDIT CARD BALANCES, MORTGAGES PAYABLE, OTHER LIABILITIES, TOTAL LIABILITIES, NET WORTH, TOTAL LIABILITIES & NET WORTH). Includes sub-rows for 'In this Bank', 'In Other Institutions', 'Publicly Traded', 'Privately Held', 'Homestead', 'Other Wholly Owned R/E', 'Partial Ownership in R/E'.

Table with columns: SOURCE OF INCOME (SALARY & WAGES, NET INVESTMENT INCOME, REAL ESTATE INCOME, OTHER INCOME) and CONTINGENT LIABILITIES (AS ENDORSER, CO-MAKER OR GUARANTOR, LEGAL CLAIMS & JUDGEMENTS, PROVISION FOR FEDERAL INCOME TAX, OTHER SPECIAL DEBT, ON LEASES OR CONTRACTS).

* Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

Description of Other Income:

Blank lines for describing other income.

The above financial information, which is submitted to you (Lender) for the purpose of obtaining credit from you, present a true, complete and correct statement of my financial condition as of the date show. I understand that misrepresenting information on this statement is a criminal offense under federal law punishable by a fine and/or imprisonment. I will notify you in writing of any material unfavorable change in my financial condition. In the absence of such notice, you may consider this a continuing statement and substantially correct. If I apply for further credit, this statement shall have the same force and effect as if delivered as an original statement of my financial condition at the time I request such further credit. You are authorized to contact any appropriate third parties for the purpose of verifying any stated information herein or at any time by me to you, and obtaining credit information at any time from any of my creditors and/or credit reporting agencies. I authorize Frost Bank to obtain consumer credit reports on myself. This financial statement and any other information furnished to you shall be your property. You are authorized to answer questions about your credit experience with me.

Signature Date Spouse's Signature Date

Additional Information

SCHEDULE 1 – STOCKS, BONDS AND MUTUAL FUNDS								
Name of Issuer	Where Traded	No. of Shares	Market Per Share	Market Value	Cost	Pledged? Yes or No?	Restricted? Yes or No?	Registered in the Name Of
TOTAL PUBLICLY TRADED				TOTAL PRIVATELY HELD				

* Restricted means trading of this security is subject to limitations due to letter, legend or control.

SCHEDULE 2 – LIFE INSURANCE AND ANNUITIES (Includes employer provided)							
Company	Face Amount	Beneficiary	Cash Value	Policy Loan	Net Cash Value	Insured	Pledged? Yes or No
TOTAL TO PAGE 1							

SCHEDULE 3 – IRA’S, KEOGHS & RETIREMENT PLANS *							
Trustee or Plan Administrator	Type of Account	Beneficiary	Balance Value	Plan Loan	Net Plan Value	In Name Of	Access Date
TOTAL TO PAGE 1							

* Includes IRA Accounts, KEOGH, 401(k), Fully Vested Benefit Plans, etc.

SCHEDULE 4 – NOTES PAYABLE							
Due To	Original Amount	Present Balance	Rate	Maturity	Payment Terms	Current? Yes or No?	Collateral *
TOTAL TO PAGE 1							

* If you are comaker, list the loan in this schedule and state the borrower’s name in the column.

SCHEDULE 5 – REAL ESTATE (If partially owned, give total property information, not your share)							
Description & Location	Owned %	Date Acquired	Cost	Value	Mortgage Balance	Monthly Payment	Net Yearly Cash Flow *
			\$	\$	\$	\$	\$

* Defined as total cash income less debt service, taxes and other cash expenses.



NAME: _____

INCOME:

Net Monthly Income (after taxes) \$ _____

Bonus and Commission _____

Interest and Dividends _____

Rents _____

Royalties _____

Total Other (detail on a separate page if necessary) _____

TOTAL INCOME \$ _____

EXPENSE:

Mortgage Payment (P&I)/Rent \$ _____

Other Loan Payments _____

Credit Card Payments _____

Food _____

Utilities _____

Telephone _____

Gasoline _____

Car Maintenance _____

Insurance (i.e., Life, Car, Property) _____

Charitable Contributions _____

Travel Expenses _____

School Expenses _____

Clothing Expenses _____

Child Care _____

Entertainment _____

Child Support _____

Savings _____

Business Expenses _____

Total Other (detail on a separate page if necessary) _____

TOTAL EXPENSES \$ _____

CASH FLOW SURPLUS (Deficit) \$ _____

I am the Co-Maker, endorser, or guarantor on the following loans and obligations:

Description of Contingent Loans	Balance/Payment	To Whom Owed
_____	_____	_____
_____	_____	_____

I/We certify that the information contained herein is true, correct, and complete to the best of my/our knowledge.

SIGNED: _____ DATE: _____

JOINT APPLICATION INFORMATION

CHECK THE APPROPRIATE BOX BEFORE SUBMITTING WITH COMPLETED APPLICATION.

- I am applying for an individual account in my own name and relying on my own income or assets and not the income or assets of another person as the basis for repayment of the credit requested.
- I am applying for a joint account or an account that another person and I will use. We intend to apply for joint credit.

Applicant _____ Co-Applicant _____

- I am applying for an individual account, but are relying on income from alimony, child support or separate maintenance or income or assets of another person as the bases for repayment of the credit requested.

Complete only if loan is for:

- Dwelling secured home purchase
- Home improvement or repair of a residential dwelling
- Refinance of a dwelling secured loan

HOME MORTGAGE DISCLOSURE DATA WORKSHEET

Borrower: _____ Application Date: _____
 Property Address: _____ Loan Amount: _____
 City, State, & Zip: _____
 Gross Annual Income (Sole Proprietors Only): _____

The following information is requested by the federal government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. You may select one or more designations for "race." The law provides that a lender may not discriminate on the basis of this information, or on whether you choose to furnish it. However, if you choose not to furnish the information and you made this application in person, under federal regulations the lender is required to note ethnicity, race and sex on the basis of visual observation or surname. If you do not wish to furnish the information, please check below.

A P P L I C A N T	C O - A P P L I C A N T
<input type="checkbox"/> Applicant does not wish to furnish this information	<input type="checkbox"/> Co-Applicant does not wish to furnish this information
Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> Information not provided by applicant in mail, Internet or phone application <input type="checkbox"/> Not applicable (Use for business entity)	Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> Information not provided by applicant in mail, Internet or phone application <input type="checkbox"/> Not applicable (Use for business entity) <input type="checkbox"/> No co-applicant
Race: <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Information not provided by applicant in mail, Internet or phone application <input type="checkbox"/> Not applicable (Use for business entity)	Race: <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Information not provided by applicant in mail, Internet or phone application <input type="checkbox"/> Not applicable (Use for business entity) <input type="checkbox"/> No co-applicant
Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Information not provided by applicant in mail, Internet or phone application <input type="checkbox"/> Not applicable (Use for business entity)	Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Information not provided by applicant in mail, Internet or phone application <input type="checkbox"/> Not applicable (Use for business entity) <input type="checkbox"/> No co-applicant

F O R B A N K U S E O N L Y
Loan Type: Conventional
Purpose of Loan: <input type="checkbox"/> Home Purchase <input type="checkbox"/> Home Improvement <input type="checkbox"/> Refinance
Property Type: <input type="checkbox"/> 1-4 Family <input type="checkbox"/> Manufactured Housing <input type="checkbox"/> Multi-Family
Occupancy Code: <input type="checkbox"/> Owner-occupied as a principal dwelling <input type="checkbox"/> Not owner-occupied <input type="checkbox"/> Not applicable (Use for business entity)
Lien Status: _____
APR: _____

1. Prepare a written description of the business you plan to establish.
2. Describe your experience and management capabilities in writing (personal resumes are acceptable).
3. Prepare an estimate of the **total** amount of money that you will need and break it down to show amounts estimated for land, buildings, leasehold improvements, machinery, equipment, inventory, operating expenses, etc.
4. Prepare a written statement showing how much you have available to invest in the business **and** the form of the investment (cash, equipment other than personally owned vehicle, etc.), and how much you need to borrow in addition to your investment. SBA recommends that owners inject **one-third** to **one-half** of the total start-up costs.
5. Prepare a current financial statement listing all personal assets and all liabilities.
6. Prepare a detailed projection of earnings and expenses for the first year the business will operate, to include a narrative explanation or basis for the projections.
7. Prepare a list of collateral to be offered as security for the loan, indicating your estimate of the present value of each item. Also, include an itemized list of equipment as to serial number, model, and cost value.

For more information or if you have questions, please call us at 1-866-FrostTX (1-866-376-7889) or e-mail us at webhelp@frostbank.com and we'll connect you with a local small business lending representative in your area.