



**ALBINA COMMUNITY BANK
BUSINESS CREDIT CARD AGREEMENT AND AUTHORIZATION**

The undersigned, an authorized representative of _____ (“Company”), hereby requests and authorizes Albina Community Bank to:

Issue credit cards to the following individual(s)

Name	Credit Limit	Contact Phone Number	SSN	Date of Birth

Close cards issued to the following individual(s):

Change credit limit issued to the following individual(s):

Name	Card Number	New Credit Limit	Credit Card Returned? Y/N

I understand that additional cards may be requested, from time to time, only by written request from an authorized officer of the Company. The Bank must approve the aggregate amount of credit requested.

The Company agrees to assume sole responsibility for the use and indebtedness incurred on any and all of the credit cards issued under Company name, regardless of whether the use or indebtedness was authorized by the Company. The Bank shall have no duty to investigate the use of the credit cards or ascertain the genuineness of any signature. Further, Company agrees to immediately notify Bank of any change in employment status for those employees who have been issued a card.

The Company agrees to be bound by all Terms and Conditions of the Credit Card program into which it is entering with the Bank. The Bank is authorized to investigate the credit history of the Company and of the listed principals. The undersigned officer:

1. Represents that the information provided to the Bank is true and accurate as of the date below.
2. Agrees to immediately notify the Bank of any material change in the information.
3. Represents that the authority exists to enter into this Agreement.

Customer Name: _____ Date: _____

Customer Signature: _____ Title: _____

Bank Use Only		
Approved by: _____	Experian and/or OFAC completed by: _____	Date: _____
Operations Administration:		
<input type="checkbox"/> Card(s) ordered By: _____	Date: _____	
<input type="checkbox"/> Card(s) closed By: _____	Date: _____	



Albina Community Bank
 2002 NE MLK, Jr. Blvd.
 Portland, OR 97212
 Phone (503) 331-3782 | Fax: (503) 287-0197

BUSINESS LOAN APPLICATION

AS OF DATE:

BUSINESS ADDRESS / OWNERSHIP						
Name				Company Tax I.D. No. or Personal Social Security No.		
Address						
			Telephone No.			No. of Employees
Type of Ownership	<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Sub-S <input type="checkbox"/> LLC					
No. of Years in Operation						

LOAN REQUEST								
Amount Requested			Term Requested			Loan Purpose		
Sources of Repayment								
Collateral – (List collateral, show evaluation and attach supporting documentation):								

BUSINESS INFORMATION			
What product or service does your business offer?			
What geographic area does your business		Will your current facility be adequate for the next 5 yrs? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Address of principal place of business:			
Please list your major customers	NAME(S)	ADDRESS	% OF SALES
Are all your business taxes current? <input type="checkbox"/> Yes <input type="checkbox"/> No If NO , please explain:			
Have you ever filed bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES , please explain:			
Please list your major trade suppliers	NAME	ADDRESS	% OF SALES

FINANCIAL INFORMATION SUMMARY					
Balance Sheet Date	Current Assets	Total Assets	Current Liabilities	Total Liabilities	Net Worth
Statement Period & Date:					
Sales					

Profit			
GENERAL INFORMATION			
Who owns the business?	NAME(S)	TITLE(S)	PERCENT OF OWNERSHIP
Your Attorney's Name	Address		Phone Number:
Your Accountant's Name	Address		Phone Number
Your Current Banker's Name	Address		Phone Number
Your Insurance Company Name	Amount of Insurance		Beneficiary
Your Insurance Agent's Name	Address		Phone Number
Do You Have Key Person Insurance? <input type="checkbox"/> YES <input type="checkbox"/> NO	Name(s) of Insured:		

FINANCIAL INFORMATION REQUIRED	
TO ALLOW US TO CONSIDER YOUR REQUEST, THE FOLLOWING INFORMATION IS REQUIRED:	
<ul style="list-style-type: none"> ■ All Owners' Personal Financial Statements ■ All Owners' Full Federal Tax Returns for the Last Three Years ■ Company's Financial Statements for the Last Three Years ■ Company's Full Federal Tax Returns for the Last Three Years ■ Company's Current Interim Financial Statements 	<ul style="list-style-type: none"> ■ Partnership Agreement/Articles of Incorporation ■ Current Accounts Receivable Aging ■ Financial projections ■ Business Plan
PLEASE SEND THE ABOVE INFORMATION WITH A COMPLETED APPLICATION TO:	Albina Community Bank, 2002 NE MLK, Jr. Blvd., Portland, OR 97212

APPLICANT DISCLOSURES
USA PATRIOT ACT: IN ACCORDANCE WITH SECTION 326 OF THE USA PATRIOT ACT, ALL PERSONS AND BUSINESS ENTITIES ARE SUBJECT TO IDENTITY VERIFICATION REQUIREMENTS. IF YOU REQUEST TO OPEN AN ACCOUNT (ANY FORMAL BANKING RELATIONSHIP, INCLUDING DEPOSITS, LOANS, SAFE DEPOSITS, TRUSTS, ETC), THE BANK WILL REQUEST DOCUMENTARY VERIFICATION ON YOUR IDENTITY AND WILL PERFORM APPROPRIATE BACKGROUND CHECKS IN COMPLIANCE WITH THE ACT.
REGULATION B -- RIGHT TO APPRAISALS: THE EQUAL CREDIT OPPORTUNITY ACT (REG B) AFFORDS APPLICANTS THE RIGHT TO RECEIVE COPY OF AN APPRAISAL REPORT IF ONE IS OBTAINED BY THE BANK FOR ANY LOAN REQUEST WHICH IS SECURED BY A 1-4 UNIT DWELLING. SHOULD YOUR LOAN REQUEST BE SO SECURED, THE BANK WILL PROVIDE YOU A COPY OF ANY SUCH APPRAISAL REPORT WITHIN 30 DAYS OF RECEIVING YOUR REQUEST FOR A COPY AND WILL DO SO IN FULL COMPLIANCE WITH THE PROVISIONS OF REG B.

The information provided by the applicant in this application and in any supplements thereto is submitted voluntarily and in confidence to Albina Community Bank.	
The bank is authorized to respond to credit inquiries in accordance with customary banking practice.	
Print Name of Applicant:	
Applicant's Signature	Date:
Title:	

FOR ACB USE

Received By:

Date:



Documents Required for a Business Loan

Business or Organization

- Business Loan Application (Albina Community Bank form)
- Business Plan that includes at least one year of financial projections
(required for a start-up business or major expansion)
- Business Tax Returns 2014 (or copy of extension) 2013 2012
(CPA Audited or Reviewed statements may be substituted)
- Company prepared financial statement for the last year if the most recent calendar year tax return is not yet complete.
- Copy of invoice or earnest money agreement if loan is used to purchase equipment or real estate.

Entity Documentation:

- Corporation
 - Articles of Incorporation
 - By Laws that includes an authorization to borrow and designates signers
- Limited Liability Company (LLC)
 - Articles of Organization
 - Operating Agreement that includes an authorization to borrow and designates signers
- Partnership
 - Partnership Agreement that includes an authorization to borrow and designates signers
- Limited Liability Partnership (LLP)
 - Articles of Organization
 - Operating Agreement that includes an authorization to borrow and designates signers
- Non Profit Organization
 - Articles of Organization
 - Meeting Minutes that includes an authorization to borrow from Albina designates signers for loan and the amount of the loan
 - Current Board Roster with titles

Guarantors/Owners

- Personal Financial Statement (Albina Bank form)
- Signed complete copies of personal tax returns: 2014 (or copy of extension) 2013 2012
(include all K-1 statements identified on Schedule E and all supporting statements attached to the return)

If the company is a sole proprietorship, we will also need a business balance sheet corresponding to the tax year since there is not one included on the Schedule C of the tax return.

Documents specific to the loan request

<input type="checkbox"/> Other:	
<input type="checkbox"/> Other:	
<input type="checkbox"/> Other:	
<input type="checkbox"/> Other:	