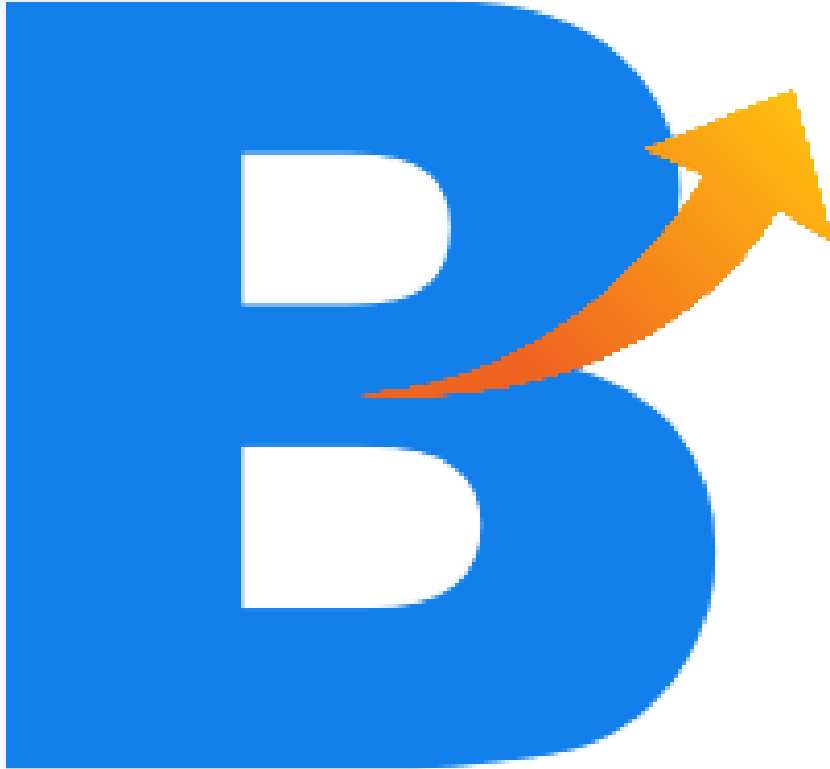


Borrower's Name: _____

Telephone: _____



A Pennsylvania Business Funding Source

BUSINESS INFORMATION

Will this business be a start up? Yes No

Is this an existing business? Yes No

This business have been operating full-time since _____ (if applicable)

This business has been operating part-time since _____ (if applicable)

This business will be a (check one):

Proprietorship or Partnership

Incorporation

Non-Profit

Limited Partnership

Co-op

This business will be operating in the primary sector of (check one):

Agriculture

Forestry

Manufacturing

Retail

Service

Tourism

Wholesale

Other: _____

Business EIN Number (if obtained) _____

Incorporation Number (if obtained) _____

Legal name of business is / will be: _____

Physical address of business: _____

City: _____ **Province:** _____ **Postal Code:** _____

Business Telephone: _____ **Business Fax:** _____

Email: _____

Website: _____

Mailing address of business (if different than above): _____

The business currently has _____ **full-time employees** _____ **part-time employees**

The loan dollars requested will create _____ **full-time employees** _____ **part-time employees**

List of names(s) and percentage of shares of all principal owner(s) of the business:

First Name	Last Name	Percentage of shares	Telephone
_____	_____	_____ %	_____
_____	_____	_____ %	_____
_____	_____	_____ %	_____

BORROWER'S INFORMATION

Last Name _____

First Name _____ Middle Name _____

Birth Date: MM ____ DD ____ YY ____ SIN #: _____ Driver's License #: _____

Home Telephone: _____ Cellular Phone: _____

Email: _____

Home Address: _____ Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Marital Status: Married Common Law Divorced Single No. of dependents _____

Previous address (if less than 3 years at current address): _____

Do you rent or own your home: Rent Own How long at this address? _____ years _____ months

If you own your home, please list names on the title:

Last Name	First Name
_____	_____
_____	_____

BORROWER'S EMPLOYMENT HISTORY

Current or most recent employer's name: _____

Employer's telephone: _____ Salary: _____

How long were you employed/have been employed here: _____

SPOUSE/COMMON LAW INFORMATION (if applicable)

Last Name _____

First Name _____ Middle Name _____

Birth Date: MM ____ DD ____ YY ____ SIN #: _____ Driver's License #: _____

Current or most recent employer's name: _____

Employer's telephone: _____ Salary: _____ Time employed here _____

PERSONAL FINANCIAL INFORMATION (HOUSEHOLD) (Continued)			
ASSETS		LIABILITIES	
Cash	\$	Mortgage(s)	\$
Term Deposits / GIC	\$	Property Taxes	\$
Mutual Funds	\$	Credit Cards	\$
Stocks	\$	Personal Line of Credit	\$
Canada Savings Bonds	\$	Department Stores	\$
RRSP's	\$	Loans	\$
Vehicle(s)	\$	Rent	\$
	\$	Support Payments	\$
	\$	Other (Specify)	\$
Real Estate	\$		\$
	\$		\$
Other	\$		\$
	\$		\$
TOTAL ASSETS		TOTAL LIABILITIES	
\$		\$	
Net Worth (Total Assets less Total Liabilities)			\$
MONTHLY INCOME		MONTHLY PAYMENTS	
Gross Monthly Income	\$	Mortgage(s)	\$
Spouse's Monthly Income	\$	Loans	\$
Other Income (specify)	\$	Personal Line of Credit	\$
	\$	Credit Cards	\$
	\$	Department Stores	\$
	\$	Rent	\$
	\$	Support Payments	\$
	\$	Other (specify)	\$
TOTAL INCOME		TOTAL PAYMENTS	
\$		\$	

Notes:

PERSONAL FINANCIAL INFORMATION (HOUSEHOLD) (Continued)

ASSETS

CASH HOLDINGS	Bank	Branch			Amount (\$)
OWNED REAL ESTATE	Physical Address	Year Purchased	Mortgage Holder	Purchase Price	Present Value
AUTOMOBILES	Year/Make/Model	Owner on Title		Purchase Price	Present Value
OTHER ASSETS (RV, BOAT, ETC)	Year/Make/Model	Owner on Title		Purchase Price	Present Value
TOTAL VALUE OF ASSETS					\$

LIABILITIES

BANK LOANS	Bank	Branch	Monthly Payment	Collateral Held by Bank	Interest Rate	Balance Owing
BALANCE ON MORTGAGES	Bank	Branch	Monthly Payment	Collateral Held by Bank	Interest Rate	Balance Owing
OTHER LIABILITIES (CREDIT or STORE CARDS, etc.)	Bank	Branch	Monthly Payment	Collateral Held by Bank	Interest Rate	Balance Owing
TOTAL VALUE OF LIABILITIES						\$

NET WORTH (ASSETS LESS LIABILITIES) \$

PERSONAL INFORMATION

You were referred to Biz Capital Resource by (check one):

Other lending institution SBA
 Word of mouth Internet / Biz Capital Resource Website
 Other (specify): _____

AUTHORIZATION TO OBTAIN INFORMATION We authorize Biz Capital Resource to obtain whatever information regarding employment, bank accounts, and/or outstanding credit (mortgage, auto, personal, home improvement, charge cards, credit unions, etc.) that BIZ CAPITAL RESOURCE deems to be necessary in connection with this application or in the course of review or collection, of any credit extended in reliance on this application. We authorize and instruct any consumer credit agency, commercial credit reporting agency, business or person to compile and furnish to BIZ CAPITAL RESOURCE any such information regarding us or our business(es) as may be requested by BIZ CAPITAL RESOURCE and agree that such information, along with this application, shall remain BIZ CAPITAL RESOURCE's property whether or not the application is approved. This authorization will be valid for a period of two years from the date below or as long as the applicant has an outstanding balance with BIZ CAPITAL RESOURCE. A photocopy of this authorization will be valid as the original. We authorize Biz Capital Resource to verify or check any of the information given, including credit references and employment and to obtain credit bureau reports as Biz Capital Resource deems necessary. We hereby authorize BIZ CAPITAL RESOURCE to record UCC1 financing statements in any jurisdiction which it deems appropriate. The statements made in and documents attached to this application are true and accurate. We sign this application under penalty of perjury. We acknowledge that BIZ CAPITAL RESOURCE will rely on this information to provide money to us. Each of the undersigned has read this application and the documents attached to it and are authorized to sign in their respective positions set forth below. If you have forwarded this application to us electronically, this will act as your signature and authorization to proceed with our analysis. If you wish to add your electronic signature, please proceed to the non- required signature fields below.

APPLICATION MUST BE SIGNED BEFORE IT CAN BE PROCESSED.

The foregoing information is submitted for the purpose of establishing or maintaining credit is a true, full and correct statement of my financial condition on the date shown. I hereby authorize Biz Capital Resource to obtain any information it deems necessary about me, including but not confined to, reports from credit bureaus, retail credit companies, or any other source that Biz Capital Resource deems appropriate.

I, the undersigned, declare that the statements made herein are for the purpose of obtaining business financing and are to the best of my knowledge complete and correct.

_____	_____	_____
Borrower's Signature	Borrower's Name (Print)	Date
_____	_____	_____
Borrower's Signature	Borrower's Name (Print)	Date
_____	_____	_____
Witness Signature	Witness Name (Print)	Date