

COMMERCIAL LOAN APPLICATION

Amount \$ _____
Date of Note: _____
Maturity Date: _____
Loan # _____

Loan Grade _____
Loan Officer # _____
Branch #: _____

Borrower Name(s): _____	Home Phone _____	Work Phone _____	Occupation _____	Date(s) of Birth: _____	Soc Sec /Tax ID #(s): _____
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Address (Primary) _____ City _____ State _____ ZIP _____

Address (Secondary) _____ City _____ State _____ ZIP _____

Type Entity: Individual Corporation Partnership DBA LLC Other

Guarantor Name: _____ Address: _____

Purpose of Loan: _____ Purpose Code: _____
 New Renewal - (Borrower Paid \$ _____ Principal \$ _____ Interest) Loan Type _____ Class _____ Coll Code _____

Source of Repayment: _____

Repayment Plan _____

Pricing: Variable, _____% Above _____
 Ceiling _____%, Floor _____% Fixed @ _____%

Credit Life Yes No, A&H Yes No, Other Insurance Requirements: _____

Fees:	Census Tract: _____	
Collateral Information:	Brief Description:	Value

LOAN TO COLLATERAL VALUE RATIO: _____ TOTAL COLLATERAL VALUE: _____

Credit References Creditor	Type of Debt	Name in Which Carried	High	Balance	Terms	Past Due

Comments: _____

Borrower Direct Debt to Us: \$ _____ Borrow Related Debt to Us \$ _____

Loan Number	Original Date	Original Amount	Current Balance	Purpose		
	Maturity Date	Terms	Rate	Collateral		Value

Deposit Information:	Total Deposits	\$	\$	\$
Account Type	Account No.	Current Balance	Average QTD	Average YTD

Financial Information Summary	
Name	
Statement Date	
Prepared by	
Statement Type	
Total Assets	
Total Liabilities	
Net Worth	
Debt:Worth	
Income:Revenues	
Profit After Tax	
Depreciation	
Cash Flow	

Loan Committee Action Date: _____ Approved - Second By: _____
 Denied- Reason for Denial _____

Everything I have stated in this Application is correct to the best of my knowledge. I understand that you will retain this Application whether or not it is approved. You are authorized to check my credit and employment history and to answer questions about the credit applied for and your credit experience with me. We intend to apply for joint credit. (Applicant) _____ (Co-Applicant) _____

Applicants Signature _____ Date _____ Other Signature (where applicable) _____ Date _____

LENDER

**Heritage Bank & Trust
Main Office
217 S. James Campbell Blvd.
Columbia, TN 38401**

CREDIT APPLICATION INSURANCE DISCLOSURE

Name of Applicant(s)

You have applied for a loan with Lender. In connection with your application, Lender may solicit, offer or sell you an insurance product or annuity. This notice is given to advise you of information related to any insurance product or annuity that is offered, solicited or sold in connection with your loan application and available on a voluntary basis through the Lender. **PLEASE READ CAREFULLY BEFORE SIGNING THIS NOTICE.**

THE PURCHASE OF ANY INSURANCE PRODUCT OR ANNUITY THROUGH THE LENDER IN CONNECTION WITH AN EXTENSION OF CREDIT IS NOT REQUIRED. IT IS STRICTLY VOLUNTARY AND IS NOT A FACTOR IN OBTAINING CREDIT. FOR EXAMPLE:

THE LENDER MAY NOT CONDITION A LOAN OR OTHER EXTENSION OF CREDIT ON EITHER:

- 1. YOUR PURCHASE OF AN INSURANCE PRODUCT OR ANNUITY FROM THE LENDER OR ANY OF ITS AFFILIATES, OR**
- 2. YOUR AGREEMENT NOT TO OBTAIN, OR PROHIBITION BY US AGAINST YOU OBTAINING AN INSURANCE PRODUCT OR ANNUITY FROM AN ENTITY NOT AFFILIATED WITH THE LENDER.**

BY SIGNING THIS DOCUMENT, YOU ACKNOWLEDGE THAT YOU HAVE RECEIVED AN ORAL DISCLOSURE OF THE DISCLOSURES CONTAINED IN THIS NOTICE AND THAT YOU HAVE BEEN FURNISHED WITH A COPY OF THIS NOTICE AND UNDERSTAND ITS TERMS.

_____ Date

_____ Date

_____ Date

_____ Date

_____ Date

_____ Date

For Telephone Applications Only:

As an authorized representative of Lender, I confirm that I have made the above Credit Application Insurance Disclosures orally to the Applicant(s) and that the receipt of the oral disclosures were acknowledged orally by the Applicant(s). I also confirm that I have mailed to the Applicant(s) the above Credit Application Insurance Disclosures within three (3) days beginning the first business day after the application is taken, excluding Sunday and federal public holidays.

Authorized Representative

Date: