



Owner/Officer Profile

Legal Name:		Residential Address:	
DOB:	SSN:	City:	State:
Cell Phone:		County:	Zip:
Email Address:			
<input type="checkbox"/> Rent <input type="checkbox"/> Own		Monthly payment \$_____	
<input type="checkbox"/> Pay or <input type="checkbox"/> Receive alimony or child support?		Monthly payment \$_____	
<input type="checkbox"/> Co-Sign any other loans?		Monthly payment \$_____	
U.S. Citizen?:* <input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Woman <input type="checkbox"/> Minority <input type="checkbox"/> Veteran	
Ownership in any other businesses? <input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Yes <input type="checkbox"/> No	

**If no, contact your loan officer for further instructions.*

EXPERIENCE:

Fill out the information below **OR** attach a resume that includes the items below.

Education			
School Names	Dates Attended	Degree Attained or Certificates	
Work Experience			
Company Name	Position Title	Dates Position Held	Duties
Military Service			
Branch of Service	Rank at Discharge	Dates of Service	Grade

Other Accomplishments and Abilities

