



EMBASSY COMMUNITY REDEVELOPMENT LOAN

BORROWER AUTHORIZATION FORM

BORROWER'S BLANKET AUTHORIZATION					
BUSINESS INFORMATION					
Company Name / DBA:				Date:	
Type of Business:					
Business Address:				Daytime Phone:	
City:		State:	Zip:	Fax:	
Use of Proceeds Address (if different than above):			City:		State: Zip:
<input type="checkbox"/> Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Corporation	<input type="checkbox"/> LLC	<input type="checkbox"/> Trust	Business Tax ID: _____
<u>OWNERS / PRINCIPALS</u>					
NAME		TITLE		% OWNERSHIP	
How many employees do you have? _____			How many employees will you hire? _____		
Have you ever applied for government financing? If so, please provide the name of the agency, original balance, and whether the loan is current:					
Business Bank Name / Address:					
Use of Proposed Loan:					
APPLICANT / BORROWER INFORMATION					
Name 1:					
SSN 1:		Street Address 1:			
Email Address:			Phone Number:		In Bankruptcy: Y / N
Date of Birth:				Driver's License #:	
Name 2:					
SSN 2:		Street Address 2:			
Email Address:			Phone Number:		In Bankruptcy: Y / N
Date of Birth:				Driver's License #:	
City:		State:		ZIP Code:	
Current employer:				Position:	
Manager:				Phone:	
Address:		City:		State:	Zip:

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Start Date:	End Date:	Monthly Pay:
LOAN REQUEST INFORMATION		
Date:	Loan Number:	
Personal Reference 2 Name:		Relationship:
Automobile Make & Model:		
Additional Income Source:		Amount: \$
Verify with:		Phone:
COLLATERAL INFORMATION		
Type of collateral:		
Subject Address or Location- city, state, county, zip:		
1 st lien balance:	Date of Loan:	
2 nd lien balance:	Date of Loan:	
In Foreclosure?		
Purchase Price:	Year Purchase:	
Property Value:	How Determined:	
Loan Amount Requested:	LTV %:	
Refinance or Purchase?		
Property Type: <input type="checkbox"/> Office <input type="checkbox"/> Industrial <input type="checkbox"/> Apartment <input type="checkbox"/> Mixed Use <input type="checkbox"/> Retail <input type="checkbox"/> Other		
LENDER INFORMATION		
Name 1: Embassy National Bank		
Street address: 1817 North Brown Road		
City: Lawrenceville	State: GA	ZIP Code: 30043

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Notes / Reference:

BORROWER AUTHORIZATION

BORROWER AUTHORIZATION: I hereby authorize the Lender to verify my past and present employment earnings records, bank accounts, stock holdings, and any other balances that are needed to process my loan application. I further authorize the Lender to order a consumer credit report and verify other credit information, including past and present mortgage and landlord references. It is understood that a copy of this form will also serve as authorization.

Signature of borrower (1):

Date:

Signature of borrower (2):

Date:

I represent that the information provided in this application is true, complete and accurate to the best of my knowledge.

PRIVACY ACT NOTICE:

PRIVACY ACT NOTICE: This information is to be used by the agency collecting it or its assignees in determining whether you qualify as a prospective mortgagor or borrower under its program. It will not be disclosed outside the agency except as required by law. You do not have to provide this information, but if you do not your application for approval as a prospective mortgagor or borrower may be delayed or rejected. The information requested in this form is authorized by Title 38 USC, Chapter 37 (if VA); by 12 USC, Section 1701 et seq. (if HUD/FHA); by 42 USC, Section 1452b (if HUD/CPD); and Title 42 USC, 1471 et seq., or 7 USC, 1921 et seq. (if USDA/FMHA).