

Serial No.:



BUSINESS CREDIT APPLICATION FORM

Please fill the form in **CAPITAL/BLOCK** letters using blue pen and tick boxes wherever applicable.

If the Applicant is a company the company seal **MUST** be affixed.

1. General information about the Business (Applicant details)

Existing Business:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	New Business:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Company Composition:	<input type="checkbox"/> Individual	<input type="checkbox"/> Partnership	<input type="checkbox"/> LLC	<input type="checkbox"/> Corporation	
	<input type="checkbox"/> GmbH	<input type="checkbox"/> KG	<input type="checkbox"/> AG	<input type="checkbox"/> Foundation	
	<input type="checkbox"/> Other, please specify: _____				
Full Business Legal Name:	<input type="text"/>				
	<input type="text"/>				
Trade (d/b/a) Name (if different):	<input type="text"/>				
	<input type="text"/>				
License/Registration Number:	<input type="text"/>				
Head Office Physical Address:	<input type="text"/>				
	<input type="text"/>				
City:	<input type="text"/>	Postal / ZIP Code:	<input type="text"/>		
Country:	<input type="text"/>	Province / State:	<input type="text"/>		
Phone Number:	(<input type="text"/>) STD Code	2 nd Phone Number:	(<input type="text"/>) STD Code		
Fax Number:	(<input type="text"/>) STD Code	Mobile Phone:	(<input type="text"/>)		
E-mail Address:	<input type="text"/>	Web Site Address:	<input type="text"/>		
Head Office Postal Address:	<input type="text"/>				
	<input type="text"/>				
	<input type="text"/>				
Name of Contact Person:	<input type="text"/>				
Title of Contact Person:	<input type="text"/>				
Direct Phone No. with country code:	<input type="text"/>				
General Phone No. with country code:	<input type="text"/>				
Mobil Phone No. with country code:	<input type="text"/>				
E-mail Address of Contact Person:	<input type="text"/>				

Serial No.:



BUSINESS CREDIT APPLICATION FORM

Type of industry/business	<input type="checkbox"/> IT/Telecom	<input type="checkbox"/> Government	<input type="checkbox"/> Transport	<input type="checkbox"/> Construction/Real estate
	<input type="checkbox"/> Consumer goods	<input type="checkbox"/> Textiles	<input type="checkbox"/> Export-Import	<input type="checkbox"/> Manufacturing
	<input type="checkbox"/> Hotel/Restaurant	<input type="checkbox"/> Entertainment	<input type="checkbox"/> Medical	<input type="checkbox"/> Agriculture
	<input type="checkbox"/> Advertising	<input type="checkbox"/> Banking&Finance	<input type="checkbox"/> Law	<input type="checkbox"/> Travel/Tourism
	<input type="checkbox"/> Other, please specify _____			

(check here if this is a **startup** business with no employees yet)

Total/Gross Revenues (last 12 months)	€
Current # employees before this financing	#
Employees lost without this financing	#
Employees added with this financing	#

2. Banking details of Applicant

Bank Name:	
Bank Address:	
Branch:	
Account Type:	
Account Holders Name:	
SWIFT / ABA Code:	
Bank Phone Number:	
Bank Fax Number:	
Bank E-mail:	
Bank Officer:	

NB. DOCUMENTARY PROOF OF BANKING INSTITUTION MUST BE SUPPLIED (Stamp confirmation letter from Bank / Bank Statement)

3. Information about the Principal Owners/Partners (List the four largest shareholders of the Business)

	1 st Principal Owner	2 nd Principal Owner	3 rd Principal Owner	4 th Principal Owner
Full Legal Name of Principal Owner				
Full Address (street)				
City (zip code)				
Country				
Phone Number/Mobil				
Title/Position with Business				
Years with company				
Percentage of Business Owned	%	%	%	%
German Citizen?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Annual Household Income from this Business	€	€	€	€

Serial No.:



BUSINESS CREDIT APPLICATION FORM

4. Credit requirement

We hereby apply for a credit/funding as follows:

Credit amount required:	€ <input type="text"/>
Credit repayment term:	<input type="checkbox"/> <input type="checkbox"/> years <input type="checkbox"/> <input type="checkbox"/> months
Purpose of credit:	<input type="checkbox"/> Establishment <input type="checkbox"/> Expansion <input type="checkbox"/> Purchase of professional equipment <input type="checkbox"/> Consumer durables <input type="checkbox"/> Other, please specify _____

5. Other credits details

If you have credits with any other financier, fill the following details

CREDIT 1

Nature of credit:	<input type="text"/>
Credit amount:	<input type="text"/>
Credit term:	<input type="checkbox"/> <input type="checkbox"/> years <input type="checkbox"/> <input type="checkbox"/> months
Credit taken since:	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> D D M M Y Y Y Y

CREDIT 2

Nature of credit:	<input type="text"/>
Credit amount:	<input type="text"/>
Credit term:	<input type="checkbox"/> <input type="checkbox"/> years <input type="checkbox"/> <input type="checkbox"/> months
Credit taken since:	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> D D M M Y Y Y Y

6. Project

a) Business Plan

Where is the project located (country)?	<input type="text"/>
Do you have a Business Plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a Feasibility Study?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the Business Plan in „Investor format“?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the Business Plan in English?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is planning permission required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If YES, who is the Planning Authority?	<input type="text"/>
Date applied for	<input type="text"/>
Date approved	<input type="text"/>
Project description	<i>must be also attached as a separate document</i>

Serial No.:



BUSINESS CREDIT APPLICATION FORM

b) Project Costs

Item	Description	Amount
Land Purchase		€
Share Purchase		€
Plant & Equipment		€
Working Capital		€
Other Costs (describe)		€
Goodwill Creation		€
TOTAL PROJECT COSTS		€

c) Forecasts

Proposed Project Start Date					
Completion Date					
Required funding schedule (amount required during)	Year 1	Year 2	Year 3	Year 4	Year 5
	€	€	€	€	€
Incom Forecast from Start Date					
Income	Year 1	Year 2	Year 3	Year 4	Year 5
	€	€	€	€	€
Net Profit / Loss	Year 1	Year 2	Year 3	Year 4	Year 5
	€	€	€	€	€

7. Security/Collateral details (Business and/or personal assets available as collateral to secure proposed financing)

a)

Description of Assets	Ownership Titled in Name(s) of	Current Market Value	Date & Source of Market Value	Existing Lien Amounts
		€		€
		€		€
		€		€
		€		€
		€		€
		€		€
		€		€

Serial No.: 

BUSINESS CREDIT APPLICATION FORM

b) Buildings

	Building 1	Building 2	Building 3	Building 4
Legal status				
Value	€	€	€	€
Place				
Monthly Rental	€	€	€	€
Hypotecation				
unencumbered property	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
real estate mortgage	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
mortgage payable	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
construction mortgage	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
maximum mortgage	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
other	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

c) Land

	Land 1	Land 2	Land 3	Land 4
Legal status				
Value	€	€	€	€
Area				
Monthly Rental	€	€	€	€

d) Vehicles

	Vehicle 1	Vehicle 2	Vehicle 3	Vehicle 4
Type				
Model				
Year of registration				
Price / Value	€	€	€	€

e) Shares

	Shares 1	Shares 2	Shares 3	Shares 4
Company name				
Face value	€	€	€	€
Total value	€	€	€	€

f) Other, please specify _____

Serial No.:



BUSINESS CREDIT APPLICATION FORM

8. Declaration

I / We certify that the information provided by us in this application is true, correct and complete and shall form the basis of any credit that the Lender/Bank may decide to grant us. Signing this Application Form we authorize the Lender/Bank to seek any information from any source or to give any information and/or to assign any work to any third party at this sole discretion and give our acceptance and approval to make any and all inquiries necessary to process this Business Credit Application Form. We further agree that the facility that may be provided to us shall be governed by the rules of the Lender/Bank and general business conditions that may be in force from time to time. We confirm that the funds shall be used for the stated purpose only and shall not be used for speculative/anti-social purposes. We undertake to inform the bank of any change in address of our company.

We hereby agree and give consent for the disclosure by the Lender/Bank of all or any: information and/or data relating to us; information and/or data relating to any credit facility availed of/or to be availed by us; and default, if any, committed by us, in discharge of our such obligation, as the bank may deem appropriate and necessary, to disclose and furnish to the Credit Information Bureau and/or any other agency authorized in this behalf by the Lender/Bank. We confirm that no insolvency proceedings have been instituted or threatened against us nor have we ever been adjudged insolvent. We also confirm that no litigation has been filed or is pending against us for recovery of any amount from us by any bank, financial institution, Non Banking Financial Corporation or any other entity.

9. Checklist for information needed

- | | |
|--|--|
| <input type="checkbox"/> Business Credit Application Form | this form completed, signed & dated |
| <input type="checkbox"/> Business Plan | |
| <input type="checkbox"/> Business Financial Projections | Profit & Loss, Cash Flow Statement for each of the next 3 years, monthly with annual totals & supporting assumption |
| <input type="checkbox"/> Business Current Year Financial Statement | year-to-date income statement & balance sheet, current within past 2 months |
| <input type="checkbox"/> Business Income Tax Returns | for each of the past 3 year, including all schedules |
| <input type="checkbox"/> Personal Financial Statement | from each business owner, current within past 3 months |
| <input type="checkbox"/> Company Registration Documents | Certified colour copies of Certificate of Incorporation, Memorandum of Association, Articles of Association, Statement of the First Directors, Secretary and registered Office, Declaration of Compliance with the Requirements of the Companies Act, Proof of Shareholding Documents, Proof of Banking Documents, VAT Registration Document |
| <input type="checkbox"/> Colour copy of ID Card | |
| <input type="checkbox"/> Colour copy of 2 nd Identity Document (passport, driving license, other) + 2 latest passport size colour photographs | |
| <input type="checkbox"/> Colour copy of valid Insurance Policy of the buildings / vehicles | |

This Form should be signed by Authorised Signatories, e.g. Managing Director and Finance Director

For and on behalf of the named Applicant

Applicant's Signature *(sign within the box & use blue pen for signature)*

Name: _____

Name: _____

Job Title: _____

Job Title: _____

Location: _____

Location: _____

Date:
D D M M Y Y Y Y

Date:
D D M M Y Y Y Y

AFFIX
LEGAL STAMP

Serial No.:



BUSINESS CREDIT APPLICATION FORM

Agent's stamp (to be completed by the Agent if appropriate)	Please tick if cancellation rights do not apply <input type="checkbox"/>
	Agency ref: _____ FSA reference number _____ UK Regulated By _____ EU Regulated
Name _____ Date _____	

For the - International ABU Development Foundation use only

Number of AOA attachments Sales Reference Number: Promotion Code: Application received on: Complete supporting document set received on: Submitted completed application documents to bank on:

The Applicant satisfies the criteria for participation in the cooperating banks. I hereby accept this application on behalf of the *International ABU Development Foundation*, to be governed by the Business Customer Agreement. I am proposing this case for Credit approval.

Operating/Channel Manager's Signature

Name _____

Date _____