Business Information and History

Applicant Business/Individual Information

Name	DBA (if applicable)			
Entity Type		Year Started		Franchise?
Physical Address				
City	State	7	ZIP	
Mailing Address (if different)				
City	State	Ž	ZIP	
Contact Name		Phone		
E-mail				
Business Website Address				

Applicant Business Ownership Structure (at time of application)

Principal Name	Title/Position	Guarantor?	% Ownership

Holding Company

Will you be forming a holding company for the purchase of commercial real estate?				Yes	No	
Has the entity been formed yet?	Yes	No	If yes, name of entity:			

Holding Company Ownership Structure

Principal Name	Title/Position	Guarantor?	% Ownership

Business Information and History (continued)

Business Background

Do you have a business bank account? Yes No
Number of employees at time of loan application:
Describe what the business does:
Describe services and/or products the business provides:
Who are the business's primary customers? Does any one customer make up more than 30% of annual revenue? Yes No If yes, please provide current customer list.
How does the company get paid? How many transactions are closed per year? What is the average transaction size? If company has A/Rs, what are the typical terms?
Who are your Vendors and/or Suppliers?
How do you market the business?
Who are the business's primary competitors? How does your company distinguish itself from the competition? What is the proximity of competitors to your business?
What are some of the inherent risks in this industry? What is the business doing to protect against these?

Business Information and History (continued)

Business Background (continued)

Explain the business's revenue/profit trends. Discuss reasons for fluctuations. Is there any seasonality in revenue generation? Provide support with year-over-year monthly financials, if appropriate, to support.
What are the business's plans for future growth? What capital expenditures are expected in the next 2-3 years? How will these be paid for?
List the key management within the company including name, job title, background, skills (can utilize attached Management Resumes).
Have there been any changes in management and/or ownership within the last two years? Yes No If yes, please describe.
Describe any affiliated companies; what do they do and what synergies exist? Do any of the business owners on this loan request own more than 20% of these companies?
Other Information

Has the applicant or any principles ever declared bankruptcy or had any judgments, repossessions, garnishments or other legal proceeding filed against them? Yes* No
Has the applicant or any principles ever obtained credit under another name? Yes* No
Are any tax obligations, including payroll or real estate taxes, past due? Yes* No
Is the applicant or any principles liable on debts not shown, including any contingent liabilities such as leases, endorsements, guarantees, etc.? Yes* No
Is the applicant or any principles currently a defendant in any suit or legal action? Yes* No

^{*}If you answered yes to any of the above questions, please provide an explanation on a separate sheet

Business Information and History (continued)

Certification And Signatures - Please Print And Sign

If the loan or credit accommodation applied for is a joint obligation, the undersigned acknowledges their intent to	apply for joint
credit.	

Signature (Guarantor)	Print Name Stella Armstrong	Date 3.4.18
Signature (Guarantor)	Print Name	Date

Project Specific Information

Use of Loan Proceeds

Purchase/Refinance Land	\$				
Purchase/Refinance Land & Building	\$				
Construction — Ground Up	\$				
Construction — Renovation/Expansion/Leasehold Improvements	\$				
Real Estate Soft Costs (Architect, Engineering/Permits, etc.)	\$				
Business Acquisition — Asset Purchase	\$				
Business Acquisition — Stock Purchase	\$				
Purchase Equipment	\$				
Purchase Inventory	\$				
Purchase Fixtures	\$				
Refinance Business Debt	\$				
Working Capital	\$				
Other	\$				
Total Project Cost	\$				
Borrower Down Payment	\$				
Total Loan Request	\$				
What is the source of down payment? Please include three months of bank or broker statements.					
Has any portion of the down payment been spent? Yes No If yes, please provide canceled check(s) or receipt(s).					

If Purchasing Land/Building Contract Expiration Date:

Address			
Property Type			Occupancy % of Subject Building
Approximate Land/Site Size	# of Buildings/Structures	Building Square Footage	Square Footage of Current Location
Distance from Current Location	Previous Use(s) of Property		
# of Buildings/Structures	# of Stories	Current Zoning Classification	
Contact Name		Phone	
Contact Name & Number for Access			Year Built
Any Existing Repair Issues			

Project Specific Information (continued)

Projects with Construction (Ground-Up, Renovation, Expansion, Leasehold Improvements)

Description of project:					
Have you selected a contractor? If yes, name of contractor/company:	Yes	No			
Status of contract:					
Have you selected an architect? If yes, name of architect/company:	Yes	No			
Status of drawings:					
Has any of the construction/site work	started?	Yes	No		
Status of Permits:					
What is the anticipated needed timef	rame to c	omplete the pi	roject?		

Chosen contractor will need to be qualified by SunTrust prior to any loan disbursements. A Contractor Qualification Checklist will be provided for items that will need to be submitted by contractor for this qualification.

Please note: An AIA Fixed Price Contract or Guaranteed Maximum Contract is preferred. 10% retainage (5% if TN) needs to be included in contract.

Why do you wish to buy this specific business or buy out partner(s)? What will the new ownership structure look like? Why does seller wish to sell or partner(s) wish to exit? If an asset purchase, what assets will be acquired? Will A/Rs and cash in business be a part of this sale? Provide asset allocation if not already detailed in the purchase agreement. Will you incur any debt of the seller? Will a non-compete be executed? If so, on what terms? What key employees will be staying with the business after the sale?

Project Specific Information (continued)

Equipment/Inventory Purchase/Working Capital

Describe equipment or inventory to be purchased:
Describe business need for equipment or inventory (increase revenues, realize supplier discount, etc.):
What is the life expectancy of the equipment or "shelf" life of the inventory?
If requesting working capital, explain specific intended use(s).



(Rev. January 2010)

Department of the Treasury Internal Revenue Service

Request for Transcript of Tax Return

▶ Request may be rejected if the form is incomplete or illegible.

OMB No. 1545-1872

1a Name shown on tax return. If a joint return, enter the name shown first. 1b First social security number on employer identification number 2a If a joint return, enter spouse's name shown on tax return. 2b Second social security number if 3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code 4 Previous address shown on the last return filed if different from line 3 5 If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, and telephone number. The IRS has no control over what the third party does with the tax information. Caution. If the transcript is being mailed to a third party, ensure that you have filled in line 6 and line 9 before signing. Sign and date have filled in these lines. Completing these steps helps to protect your privacy. 6 Transcript requested. Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter number per request. a Return Transcript, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript dechanges made to the account after the return is processed. Transcripts are only available for the following returns: For Form 1065, Form 1120, Form 1120H, Form 1120L, and Form 1120S. Return transcripts are available for the and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days. b Account Transcript, which contains information on the financial status of the account, such as payments made on the ac assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 30 cale of the account, such as payments and to items such and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 30 cale not fall a return	29-1040 to return.
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5 If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, and telephone number. The IRS has no control over what the third party does with the tax information. Caution. If the transcript is being mailed to a third party, ensure that you have filled in line 6 and line 9 before signing. Sign and date have filled in these lines. Completing these steps helps to protect your privacy. 6 Transcript requested. Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Ent number per request. ▶ a Return Transcript, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript do changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1065, Form 1120, Form 1120H, Form 1120L, and Form 1120S. Return transcripts are available for the and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days. b Account Transcript, which contains information on the financial status of the account, such as payments made on the account assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 30 cale c Record of Account, which is a combination of line item information and later adjustments to the account. Available for cu 3 prior tax years. Most requests will be processed within 30 calendar days	
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3 prior tax years. Most requests will be processed within 30 calendar days	as tax liability
	irrent year and
Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript. The IRS can provide a transcript that includes information returns. State or local information is not included with the Form W-2 information. The IRS may be ablest ranscript information for up to 10 years. Information for the current year is generally not available until the year after it is filed For example, W-2 information for 2007, filed in 2008, will not be available from the IRS until 2009. If you need W-2 information purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 45	to provide this d with the IRS. n for retirement
Caution. If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.	1099 filed
Year or period requested. Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are request years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 9 each quarter or tax period separately.	
Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorize information requested. If the request applies to a joint return, either husband or wife must sign. If signed by a corporate officer, p matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the a Form 4506-T on behalf of the taxpayer. Note. For transcripts being sent to a third party, this form must be received within 120 days	artner, guardian, tax uthority to execute
Signature (see instructions) Date	
Sign \	
Here Sds. Ayo 3.4.18	
For Privacy Act and Paperwork Reduction Act Notice, see page 2. Cat. No. 37667N Form 4.	506-T (Rev. 1-2010)

Page 2 Form 4506-T (Rev. 1-2010)

General Instructions

Purpose of form. Use Form 4506-T to request tax return information. You can also designate a third party to receive the information. See line 5.

Tip. Use Form 4506, Request for Copy of Tax Return, to request copies of tax

Where to file. Mail or fax Form 4506-T to the address below for the state you lived in, or the state your business was in, when that return was filed. There are two address charts: one for individual transcripts (Form 1040 series and Form W-2) and one for all other transcripts.

If you are requesting more than one transcript or other product and the chart below shows two different RAIVS teams, send your request to the team based on the address of your most recent return.

Automated transcript request. You can call 1-800-829-1040 to order a transcript through the automated self-help system. Follow prompts for "questions about your tax account" to order a tax return transcript.

Chart for individual transcripts (Form 1040 series and Form W-2)

and Form W-2)	
If you filed an individual return and lived in:	Mail or fax to the "Internal Revenue Service" at:
Florida, Georgia, North Carolina, South Carolina	RAIVS Team P.O. Box 47-421 Stop 91 Doraville, GA 30362
	770-455-2335
Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, a foreign country, or	RAIVS Team Stop 6716 AUSC Austin, TX 73301
A.P.O. or F.P.O. address	512-460-2272
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington,	RAIVS Team Stop 37106 Fresno, CA 93888
Wisconsin, Wyoming	559-456-5876
Arkansas, Connecticut, Delaware, District of Columbia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, Ohio, Pennsylvania, Rhode Island, Vermont,	RAIVS Team Stop 6705 P-6 Kansas City, MO 64999
Virginia, West Virginia	816-292-6102

Chart for all other transcripts

If you lived in Mail or fax to the "Internal Revenue or your business Service" at: was in: Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa. Kansas. Louisiana, Minnesota,

RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409

Tennessee, Texas, Utah. Washington. Wyoming, a foreign country, or A.P.O. or F.P.O. address

Mississippi,

New Mexico.

North Dakota.

South Dakota.

Missouri, Montana,

Nebraska, Nevada,

Oklahoma, Oregon,

801-620-6922

Connecticut. Delaware. District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts. Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont,

Virginia, West Virginia,

Wisconsin

RAIVS Team P.O. Box 145500 Stop 2800 F Cincinnati, OH 45250

859-669-3592

Line 1b. Enter your employer identification number (EIN) if your request relates to a business return. Otherwise, enter the first social security number (SSN) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

Line 6. Enter only one tax form number per

Signature and date. Form 4506-T must be signed and dated by the taxpayer listed on line 1a or 2a. If you completed line 5 requesting the information be sent to a third party, the IRS must receive Form 4506-T within 120 days of the date signed by the taxpayer or it will be rejected.

Individuals. Transcripts of jointly filed tax returns may be furnished to either spouse. Only one signature is required. Sign Form 4506-T exactly as your name appeared on the original return. If you changed your name, also sign your current

Corporations. Generally, Form 4506-T can be signed by: (1) an officer having legal authority to bind the corporation, (2) any person designated by the board of directors or other governing body, or (3) any officer or employee on written request by any principal officer and attested to by the secretary or other officer.

Partnerships. Generally, Form 4506-T can be signed by any person who was a member of the partnership during any part of the tax period requested on line 9.

All others. See Internal Revenue Code section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpayer.

Documentation. For entities other than individuals, you must attach the authorization document. For example, this could be the letter from the principal officer authorizing an employee of the corporation or the Letters Testamentary authorizing an individual to act for an estate.

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to establish your right to gain access to the requested tax information under the Internal Revenue Code. We need this information to properly identify the tax information and respond to your request. You are not required to request any transcript; if you do request a transcript, sections 6103 and 6109 and their regulations require you to provide this information, including your SSN or EIN. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, and the District of Columbia for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506-T will vary depending on individual circumstances. The estimated average time is: Learning about the law or the form, 10 min.; Preparing the form, 12 min.; and Copying, assembling, and sending the form to the IRS, 20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506-T simpler, we would be happy to hear from you. You can write to the Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:T:SP, 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224. Do not send the form to this address. Instead, see Where to file on this page.

SBA Form 413 REQUIRED

Open the attached SBA Form 413 provided. Save a copy of the Form 413 to your files, complete and return original signed copy along with this application.

SBA Form 912 REQUIRED

Open the attached SBA Form 912 provided. Save a copy of the Form 912 to your files, complete and return original signed copy along with this application.

MANAGEMENT RESUME

Please fill in all spaces. If an item is not applicable, please indicate as such. You may include additional relevant information on a separate exhibit. SIGN & DATE where indicated.

PERSONAL INFORMATION:

ame SS#							
Date of Birth Place of Birth Residence Telephone # Business Telephone # Zip Code From To present date.							
Residence Telephone #		Business Telephon	ne #				
Residence Address		City	State	Zip Code			
FromTo	present date.						
Previous Address: From Spouse's Name Are you employed by the U. S.		City	State	Zip Code_			
From	to						
Spouse's Name		SS# _					
Are you employed by the U. S.	Government?	Yes NO	Agency / Positi	on			
Are you a U.S. Citizen?	Yes N	o, If no, give Alien Regis	stration Number				
EDUCATION:							
High School/College/Technica		Dates Attended	-	Degree/Certificate			
MILTARY SERVICE BACK	KGROUND:						
Branch of Service		Dates of Service		to			
WORK EXPEREINCE: List	chronologically with	n present employer.					
Company Name / Location							
From	to	Title					
Duties							
Company Name / Location							
From							
Duties							
Company Name / Location							
From	to	Title					
Duties							
Company Name / Location							
From	to	Title					
Duties							
		Date					
Signatur	e						

SBA Form for Management Resume

Business Debt Schedule

Company Name

Signature

The schedule should include loans for contracts/notes payable and lines of credit, *not* accounts payable or accrued liabilities.

Date

				_			I		
CREDITOR	Name/Address	Original Date	Original Amount	Term or Maturity Date	Present Balance	Interest Rate	Monthly Payment	Collateral or Security	WHAT WAS LOAN FOR?
Stellaamato	3.4.	18	TOTAL PR	ESENT BALANCE:			1	1	

shown on Interim Balance Sheet.)

Date