OMB Approval No.: 3245-0348 Effective Date: Expiration Date:

SBAExpress/Patriot Express Guaranty Request (Eligibility Authorized)										
□ SBAExpress	(Revolv	ing - Yes		o 🗆	) (SBA	Expo	ort <i>Ex</i>	press - `	Yes □ No	
□ Patriot Exp.	(Revolv	ing - Yes		o 🗆	)					
Borrower Name:										
Trade Name (dba): (if no trade name, enter "NA")										
Borrower Contac	t: 🗆 1	Mr □ M	Is First				MI	Last		
Borrower Street:										
Borrower Zip Code: Borrower Phone #:										
Borrower SSN #: (must include SSN # for principal of borrower)										
Employer ID #:					(i		la)			
Borrower State: (2 letter abbreviation)										
Borrower County	:						Borı	rower C	City:	
Lender Name:										
Lender ID #:					Loan M	[aturi	ty:	(	in months)	
Loan Amount: \$ SBA Guaranty %: \( \)%										
Construction Amount: \$ \qquad \text{New Construction?}										
□ Variable Interest Rate? Variable Interest Rate: P+										
Exporter? Yes $\square$ No $\square$ If yes, amount in export sales applicant has projected loan will support										
\$										
New Business Rural										
T Evanchica? Evanchicar's Name:										
□ Sole Proprietorship? □ Partnership? □ Corporation? □ Other?										
Veteran/Patriot Express Status ** 1=Non-Veteran; 2=Veteran-Other; 3=Service-Disabled Vet.; 4=Not Disclosed. (Patriot Express codes are on the next page)										
Gender **	Gender ** M=Male; F=Female; N=Not Disclosed									
Race** 1=American Indian/Alaska Native; 2=Asian; 3=Black/African-American; 4=Native Hawaiian/Pacific Islander; 5=White/Caucasian; X=Not Disclosed										
Ethnicity** H=Hispanic/Latino; N=Not Hispanic/Latino; Y=Not Disclosed										
Owner # %	Owned *	Veteran Co	ode Gende	er Code	Race	Ethr	nicity		reference the above te this table for eac	
	complete this table for each 20% or greate owner of the primary business associated						ness associated			
	with the borrower. More than one race code may be selected.				tnan one race					
<u> </u>			SBA Loa	an #	SBA		L	oan	SBA	Term
Were any other SBA loans with Approval Date Amount Guaranty % (in maturities of more than 12 months made						(in months)				
to the horrower in the last 90 days?										

If so, please complete for each loan

## Supplemental Information for SBAExpress/Patriot Express Processing

Borrower Name:							
Use of Loan Proceeds	Amount						
Purchase Land	\$						
Purchase Land and Improvements	\$						
Purchase Improvements	\$						
Construct a Building	\$						
Add an Addition to a Building	\$						
Make Renovations to a Building	\$						
Pay Off Interim Construction Loan	\$						
Pay Off Lender's Interim Loan	\$						
Make Leasehold Improvements to a Building	\$						
Purchase Equipment	\$						
Purchase Fixtures	\$						
Purchase Inventory	\$						
Pay Trade or Accounts Payable	\$						
Pay Notes Payable	\$						
Pay Outstanding Debt	\$						
Purchase a Business	\$						
Purchase All Outstanding Stock	\$						
Pay SBA Loan	\$						
Working Capital	\$						
Pay the Guaranty Fee	\$						
Other	\$						
Total	\$						
** The gender/race/ethnicity/veteran data (except as described for Patriot Express) is collected for statistical purposes only; disclosure is voluntary and has no bearing on the credit decision.							
Eligibility Categories for Patriot Express loans only (Mandatory for eligibility purposes):							
2=Veteran other than service-disabled							
3=Service-disabled Veteran 5=Active Duty military eligible for the Transition Assistance Program							
6=Reservist or National Guard member							
7=Current spouse of any of the four groups listed above							
8=Widowed spouse of a service member or veteran who died of a service-connected disability							
* For Patriot Express loans, Patriot Express eligible owners <u>must equal at least 51 percent</u> of the total ownership in the "Owner" block on Page 1							
Lender Contact: ☐ Mr ☐ Ms First	M	II Last					
Lender Contact Phone #: Lender Contact Fax #:							
I certify that this applicant and this loan meet SBA's eligibility requirements and acknowledge complete liability for the loan if it later comes to the attention of SBA that the applicant or loan was ineligible.							
Signature:							
Name & Title:		Date:					

The estimated burden for completing this form is 30 minutes. You will not be required to respond to any collection of information unless it displays a currently valid OMB Control Number. Comments on the burden should be sent to U. S. Small Business Administration (SBA), Chief, AIB, 409 3rd Street, SW, Washington, DC 20416 and Desk Officer for SBA, Office of Management and Budget, New Executive Office Building, Rom 10202, Washington, DC 20503. OMB Control Number 3245-0348. PLEASE DO NOT SEND FORMS TO OMB.