



**SUBMITTING YOUR LOAN APPLICATION AND SUPPORTING DOCUMENTS IS EASY –
SEND THROUGH ANY OF THE FOLLOWING WAYS:**

SECURE EMAIL

Email our Business Services department at BusinessServices@itcu.org asking to be sent a link providing instructions for setting up a SECURE email. Once received from us, set up the SECURE portal and then scan and save your completed, signed and dated documents, and attach them to your email to us. Send the email directly to the person you are working with in our Business Services department. Your email and attached documents will be transmitted safely and securely, protecting your confidential data.

FAX

Fax your documents to (214) 291-1310–ATTN: BUSINESS SERVICES (or to the individual you are working with)

DROP-OFF

Deliver your application and supporting documents to the nearest InTouch branch. Branch staff will email the documents to Business Services, or have the package delivered by inter-office courier.

U.S. MAIL

Send your application and supporting documents to:

InTouch Credit Union
Attention: Business Services (or to the individual you are working with)
P.O. Box 250169
Plano, TX 75025-0169

FEDEX or UPS

Send your overnight deliveries to:

InTouch Credit Union
Attention: Business Services (or to the individual you are working with)
5640 Democracy Drive
Plano, TX 75024



P.O. Box 250169 Plano, TX 75025-0169
 Email: BusinessServices@itcu.org
 Phone: 800-337-3328, Option 5
 Fax: 214-291-1310
 www.itcu.org

BUSINESS MEMBER NUMBER:

MEMBER BUSINESS LOAN APPLICATION

Applicant Information			
Name (Business or Individual)		Tax ID #	
Address		City	State Zip
Mailing Address		City	State Zip
Email Address		Applicant's Telephone	

***See page 3 for additional applicants**

INFORMATION REGARDING YOUR BUSINESS

Description of Business _____

Time in Business (Years): _____ Annual Revenue (\$): _____

Type of Organization

- | | | | | |
|---|--|--|--|---|
| <input type="checkbox"/> Profit C-Corporation | <input type="checkbox"/> Professional Corporation | <input type="checkbox"/> Limited Liability Partnership | <input type="checkbox"/> Individual | <input type="checkbox"/> Joint Venture |
| <input type="checkbox"/> Profit S-Corporation | <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> General Partnership | <input type="checkbox"/> Sole Proprietorship | <input type="checkbox"/> Other. Please Specify: _____ |
| <input type="checkbox"/> Non-Profit Corporation | <input type="checkbox"/> Prof. Limited Liability Co. | <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Trust | |

BUSINESS LEGAL NAME: _____

DBA Name (if any): _____ **Previous Trade Names:** _____

STATE OF ORGANIZATION: _____ DATE REGISTERED: _____

QUALIFIED TO DO BUSINESS IN THE FOLLOWING STATES: _____

IF TYPE OF ORGANIZATION IS AN INDIVIDUAL, A SOLE PROPRIETORSHIP, OR A TRUST, NAME(S) AND ADDRESS(ES) OF OWNER(S) PRIMARY RESIDENCES:

Proposed Loan Terms	
Loan Amount \$ _____	Loan Term in Months or Years _____
Business Purpose of Loan _____	

Type of Loan			
<input type="checkbox"/> Commercial Real Estate	<input type="checkbox"/> Business Credit Card	<input type="checkbox"/> Equipment	<input type="checkbox"/> Other _____
<input type="checkbox"/> Vehicles	<input type="checkbox"/> Term Loan	<input type="checkbox"/> Line of Credit	
Collateral Available for Security _____			

APPLICANT SIGNATURES AND IMPORTANT DISCLOSURES:

I (we) hereby affirm that the foregoing information contained in this member business loan application is presented for the purpose of obtaining credit as of the date indicated and is true, complete and correct. I understand Credit Union is relying on this application in making loan(s) to me. Credit Union or its designee is authorized to make any investigation of the credit of the applicant(s), business owner(s) and/or guarantor(s) either directly or through any agency employed by Credit Union for that purpose now and in the future. Credit Union may disclose to any other interested parties Credit Union's experience with this account. I agree to inform the Credit Union immediately of any matter which will cause any material change to my financial condition. I understand that Credit Union will retain this member business loan application whether or not credit is granted. The undersigned certifies, acknowledges and agrees that: (i) each Applicant intends to apply for credit in the manner indicated in this application, (ii) all information provided in this application and in any attachment and supporting documentation is true and correct, (iii) each Applicant's intent is to apply for business purpose credit and such credit will not be used for personal, family, or household purposes, (iv) submission of this application does not create a commitment to lend.

Applicant (Business or Individual): _____

Signature: _____

Date: _____

Equal Housing Lender. This credit union is federally insured by the National Credit Union Administration.



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BUSINESS MEMBER NUMBER:

MEMBER BUSINESS LOAN APPLICATION

DOCUMENTATION NEEDED TO APPLY FOR AN ITCU MEMBER BUSINESS LOAN

- Completed Member Business Loan Application
- Photo ID, federal government or state issued
- Personal Financial Statements (PFS) on the owner(s) and guarantor(s)
- Balance Sheet and Profit & Loss Statement most recent period available in the current year.
- Business and Personal Tax Returns-past 3 years, Federal only, including all K-1s and supporting schedules and statement. Copy of extension in lieu of tax return (if applicable)
- Copy of Invoice or Sales Contract (when applicable)
- Recent accounts receivable and accounts payable aging reports
- Legal Documents (Business Registration, Resolutions, Open Agreements, Articles of Organization, etc.)
- Other Information may be needed

All Business Loans are subject to credit approval. All Authorized Signers must be available to sign. This Credit Union is federally insured by the National Credit Union Administration. Equal Housing Lender. Questions? Contact Business Services at 800-337-3328, Option 5 or businessservices@itcu.org.

Guarantor's Information			
Name	Tax ID #		
Address	City	State	Zip
Mailing Address	City	State	Zip
Email Address	Guarantor's Telephone		

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***See page 3 for additional guarantors**

Is the applicant engaged in Internet Gambling? Yes No

Is the business a Money Service Business? Yes No

Is the business involved in, directly or indirectly, marijuana-related business or the sale or distribution of drug paraphernalia? Yes No



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BUSINESS MEMBER NUMBER:

BUSINESS LOAN APPLICATION ADDENDUM

Applicant Information			
Name (Business or Individual)	Tax ID #		
Address	City	State	Zip
Mailing Address	City	State	Zip
Email Address	Applicant's Telephone		

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Applicant: _____ Applicant: _____

By: _____ By: _____

Date: _____ Date: _____

Guarantor's Information			
Name	Tax ID #		
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Mailing Address	City	State	Zip
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