

## **Six Bridges Capital Corporation**

### **504 Loan Program**

200 South Commerce, Suite 400  
Little Rock, Arkansas 72201  
501.374.9247  
800.216.7237

457 Southwest Drive  
Jonesboro, Arkansas 72401  
870.932.8002  
888.726.9229

535 West Research Center Blvd.  
Fayetteville, Arkansas 72701  
479.444.8881  
800.705.9295

1661 International Dive  
Memphis, TN 38120  
901.818.3306  
901.361.6396

[www.sixbridgescapital.com](http://www.sixbridgescapital.com)

# Six Bridges Capital Corporation

## MEMORANDUM

**To:** Prospective Applicant

**From:** Al Hodge, SVP, All Regions  
Itzel Meador, VP, Central/Southern Arkansas  
Bill Horne, VP, Central/Southern Arkansas  
Jake Haak, BDO, Northwestern Arkansas  
Michael Fasulo, VP, Northeastern Arkansas, Memphis, Tennessee  
and Northwestern Mississippi

**RE: A 504 Loan with Six Bridges Capital Corporation**

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Thank you for your interest in 6BCC's 504 Loan Program. We believe that this loan program is the best long-term financing vehicle available to small and medium-sized businesses desiring to own their commercial real estate. Our goal is to make this loan application process a quick and efficient one and, in that light, we have created a preliminary approval checklist to accommodate our clients' hectic schedules.

Once you have submitted this information, we will deliver to you a preliminary proposal letter within 48 hours, assuming qualification, along with a list of remaining information needed to submit your 504 loan application for final approval.

Please feel free to contact us regarding any questions concerning this pre-approval application or the 504 Loan Program in general. Again, thank you for your interest in our 504 Loan Program and we look forward to working with you in the near future.

# **Six Bridges Capital Corporation**

## **Preliminary Approval Document Checklist**

1. Authorization to Release Credit\* (form attached)
2. Personal Financial Statement\* (form attached)
3. Personal Income Tax Returns for past three years\*
4. Corporate Income Tax Returns for past three years\*\*
5. Interim Financial Statement (both Income Statement and Balance Sheet, along with AR & AP Ageing) \*\*
6. Aging Summary of Accounts Receivable and Accounts Payable (form attached) \*\*
7. Proposed Cost Breakdown (form attached)
8. Business Schedule of Debt (form attached)
9. Personal Resume\* (form attached)
10. Environmental Questionnaire (form attached)

\*Needed for all owners of 20% or more in the operating company and/or a real estate holding company.

\*\*Needed for the operating company, real estate holding company and any affiliated companies.

# Six Bridges Capital Corporation

## Authorization to Release Information

I/We hereby authorize the release to Six Bridges Capital Corporation (6BCC) and/or assigns any and all information 6BCC and/or assigns may require at any time for any purpose related to our credit application/loan transaction with 6BCC and/or assigns.

I/We hereby authorize 6BCC to release any and all information and/or data (including but not limited to personal and/or business financial statements, personal and/or business income tax returns, payment and/or credit history) to any entity 6BCC deems necessary for any purpose related to our credit application/loan transaction with 6BCC and/or assigns.

I/We hereby acknowledge that all loan approvals will be in writing and subject to the terms and conditions set forth in the loan authorization materials.

\_\_\_\_\_  
Authorized Signature, Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Signature, Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Signature, Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Signature, Title

\_\_\_\_\_  
Date

**NOTICES:** Intentional falsification of information, statements or values for any purpose including, but not limited to, the purpose of obtaining any loan, money, property or anything of value from ACC, the United States Small Business Administration and/or the United States Department of Agriculture may lead to the disqualification of the applicant and possible criminal prosecution.

To help the Federal Government fight the funding of terrorism and money laundering activities, Federal law requires all Government program lenders to obtain, verify and record information that identifies each person who applies for a loan under a Federal Government program. This means that when you apply for a loan under a Federal Government program, we will ask for your name, address, date of birth and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

# Six Bridges Capital Corporation

## Proposed Cost Breakdown

<u>Purpose</u>	<u>Amount (\$)</u>
Real Estate Purchase:	_____
New Construction:	_____
Machinery & Equipment:	_____
Furniture:	_____
Professional Fees:	_____
Other Expenses (describe below):	
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
<b>Total</b>	_____

\*Note: All cost estimates must eventually be verified through third party bids, contracts, invoices or cancelled checks submitted prior to 6BCC's final approval. Applicant's estimates may be used for initial pre-approval process.

## Aging Summary of Accounts Receivable (A/R) and Accounts Payable (A/P)

<u>Aging</u>	<u>Accounts Receivable</u>	<u>Accounts Payable</u>
Under 30 Days	_____	_____
30 – 59 Days	_____	_____
60 – 89 Days	_____	_____
Over 90 Days	_____	_____

### A/R Detail

List any customer concentrations that are greater than or equal to 10% of total A/R

Name	Percentage
_____	_____
_____	_____
_____	_____
_____	_____

List any customers with A/R over 90 days and indicate whether account is collectable:

Name	Collectable (Y/N)	Extended Terms
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

### A/P Detail

List any A/P over 90 days and indicate whether you have extended terms and list terms

Name	Extended Terms	Terms
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Applicant Signature**

**Date**



## Personal Resume Form

Name \_\_\_\_\_  
(Must include all First Full Middle Maiden Last  
other names and dates used – use page 3 if necessary)

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_ Race \_\_\_\_\_

Social Security Number \_\_\_\_\_ U. S. Citizen (Y/N) \_\_\_\_\_

Alien Registration Number \_\_\_\_\_  
Please attach a copy of your alien registration card

Home Address \_\_\_\_\_  
City State Zip

Immediate Past Address \_\_\_\_\_  
If less than 10 years at present address City State Zip  
Must include addresses and dates for the past 10 years)

Years at Immediate Past Address \_\_\_\_\_  
From To

Phone (Home) \_\_\_\_\_ Phone (Office) \_\_\_\_\_ Phone (Wireless) \_\_\_\_\_

Have you ever been involved in bankruptcy proceedings?	Yes	No	Briefly explain on Page 3
Have you ever had property foreclosed upon?	Yes	No	Briefly explain on Page 3
Any pending lawsuits or outstanding judgments?	Yes	No	Briefly explain on Page 3
Are any of your federal, state or local taxes delinquent?	Yes	No	Briefly explain on Page 3
Are you currently delinquent with any child support?	Yes	No	Briefly explain on Page 3

Employed by the U.S. Government (Y/N) \_\_\_\_\_ If so, Agency Name \_\_\_\_\_

Spouse's Name \_\_\_\_\_  
(Must include all other First Full Middle Maiden Last  
names and dates used – use page 3 if necessary)

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_ Race \_\_\_\_\_

Social Security Number \_\_\_\_\_

**Personal Information** – Be sure to answer the next three questions correctly as they are very important. The fact that you have an arrest or conviction record will not necessarily disqualify you; an incorrect answer will probably cause your application to be turned down.

Are you presently under indictment, on parole or probation? \_\_\_\_\_

Have you ever been charged with or arrested for any criminal offense other than a minor vehicle violation? Include offenses which have been dismissed, discharged, or not prosecuted.  
(All arrests and charges must be disclosed and explained on an attached sheet) \_\_\_\_\_

Have you ever been convicted, placed on pretrial diversion, or placed on any form of probation, including adjudication withheld pending probation, for any criminal offense other than a minor vehicle violation? \_\_\_\_\_

If yes to any of the above, furnish details in a separate exhibit. List name(s) under which held.

**Military Service Background** (Please provide certified copy of DD-214 or DOD Photo Card and DD 2648 for Reservist or Form 2648-1 for active duty)

Branch \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Rank at Discharge \_\_\_\_\_ Honorable Discharge (Y/N) \_\_\_\_\_

Job Description \_\_\_\_\_

**Work Experience** (List chronologically, beginning with present employment)

Name of Company \_\_\_\_\_ Percent Owned \_\_\_\_\_

Full Address \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Title \_\_\_\_\_

Duties \_\_\_\_\_

Name of Company \_\_\_\_\_ Percent Owned \_\_\_\_\_

Full Address \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Title \_\_\_\_\_

Duties \_\_\_\_\_

Name of Company \_\_\_\_\_ Percent Owned \_\_\_\_\_

Full Address \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Title \_\_\_\_\_

Duties \_\_\_\_\_



## Environmental Questionnaire

The following shall be used as a guide to determine if further environmental investigation is needed, and is to be completed during an on-site inspection by the current property owner and the loan applicant (if different from the current property owner) where commercial real estate is to be taken as collateral (residential real estate excluded).

Loan Applicant: \_\_\_\_\_ Telephone: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Telephone: \_\_\_\_\_

Current Property Owner: \_\_\_\_\_ Telephone: \_\_\_\_\_

Questionnaire Completion Date: \_\_\_\_\_

Property Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1. Is the subject property presently used (or has ever been used) as an industrial facility or involves an operation that uses (or has ever used) toxic chemicals (gas stations, manufacturing operations, dry cleaners, printing operations, junkyards, landfills, auto repairs)? **Yes** **No**

If yes, please describe \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. To the extent possible, determine the prior, current and planned uses of all adjoining property. Does historical or current operations on any adjoining property involve industrial uses or the use of any toxic chemicals (gas stations, manufacturing operations, dry cleansers, printing operations, junkyards, landfills, auto repairs)? **Yes** **No**

Please describe adjoining uses in all four directions (If a road or street abuts any side of the subject property, please identify the land use beyond the road or street) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Is the subject property structure a multi-tenant residential dwelling, nursing home or daycare center constructed prior to 1978? **Yes** **No**

If yes, please describe \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Is there any historical or archeological significance to the subject property? **Yes** **No**

5. Is the subject property structure to be significantly renovated or demolished? **Yes** **No**

6. Is there Asbestos Containing Material in the materials of the subject property? **Yes** **No**
7. Are there any transformers or other stationary hydraulic equipment on the subject property which are owned by the subject property owner? **Yes** **No**
8. Are there any underground storage tanks (UST's currently on the subject property? If yes, attach copies of the registration, spill insurance certificate, recent tank and line tightness test results (within last six months) and verification that UST's meet all current compliance requirements. **Yes** **No**
9. Have any UST's ever been removed from the subject property or abandoned in place? If yes, state the year removed and attach a copy of all removal documents and the "No Further Action" letter issued by the appropriate state agency. **Yes** **No**
10. Are there currently or have there ever been any fill pipes, vent pipes or access ways protruding from the ground on the subject property? **Yes** **No**
11. Are there any above ground storage tanks without secondary containment on the subject property? **Yes** **No**
12. Is the subject property registered with the EPA regarding any permits or for hazardous waste generation, treatment, storage or disposal? If yes, attach a copy of permit or registration. **Yes** **No**
13. Is any hazardous waste including petroleum products currently being treated or dispensed at the subject property? **Yes** **No**
- If yes, describe the type and method of treatment, storage or disposal \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
14. Is any hazardous waste including petroleum products currently being disposed of off-site? If yes, attach a copy of the most recent waste manifest for the disposed waste. **Yes** **No**
15. Are there any present or past enforcement actions by a regulatory agency for the subject property? **Yes** **No**
- If yes, describe \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
16. Are there any existing environmental liens, lawsuits, administrative actions or environmental easements associated with the use of the subject property? **Yes** **No**
- If yes, describe \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

17. Are there now or have there ever been pits, ponds or lagoons used for dumping wastes located on the subject property? **Yes** **No**
18. Are there any groundwater monitoring wells (for groundwater contamination) located on the subject property? **Yes** **No**  
 If yes, state how many and describe their purpose \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
19. Does the subject property discharge waste (or wastewater) to an on-site sewer, on-site septic system, ditch or other waterway? **Yes** **No**  
 If yes, state the nature of the discharge and attach copy of the permit \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
20. Are there any outstanding Fire and/or Health Department violations for the subject property? **Yes** **No**  
 If yes, describe \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
21. Does the subject property have any Wetlands? **Yes** **No**
22. Is the subject property or portion thereof used for agriculture? **Yes** **No**
23. Is there any evidence that toxic chemicals are used at the subject property? **Yes** **No**
24. Are there any discarded chemical containers on the subject property? **Yes** **No**
25. Are there waste piles of any type on the subject property? **Yes** **No**
26. Is there any evidence of distressed vegetation at the subject property? **Yes** **No**
27. Is there evidence of oily film on standing water at the subject property? **Yes** **No**
28. Is there evidence of any discolored soils at the subject property? **Yes** **No**
29. Are there any unusual odors at the subject property? **Yes** **No**

\_\_\_\_\_  
**Signature of Current Property Owner**

\_\_\_\_\_  
**Date of Visual Inspection**

\_\_\_\_\_  
**Signature of Loan Applicant (if different)**

\_\_\_\_\_  
**Date of Visual Inspection**