

Business Loan Application



1307 W. 6th St. # 220D, Corona CA 92882
Ph (951) 898-5797 Fax (951) 898-9738

Loan Amount: _____

Purpose of Loan: _____

Legal Business Name _____ Federal Tax ID# _____

DBA Name/Trade Name (if any) _____ Website _____

Type of Ownership: Sole Proprietorship C Corporation S Corporation Partnership LLC LLP LP

Type of Business: Retail Service Wholesale Manufacturing Finance Construction Other _____

Business Description _____ Exporter? Yes No

Street Address _____ City _____ State _____ Zip _____

Mailing address _____ City _____ State _____ Zip _____

Bus. Telephone (_____) _____ Bus. Fax (_____) _____ Number of Employees _____

Date Started ____/____/____ Ownership Since ____/____/____ Years in Business _____

Annual Sales _____ Annual Expenses _____ Annual Net Profit _____

Total Bus. Assets _____ Total Bus. Liabilities _____ Total Account Receivable _____

Bus. Bank Name _____ Bank Account # _____ Average Balance _____

Personal Financial Information: *Please provide the requested information for all partners. Use separate application for each partners.*

Name: (First) _____ (Middle) _____ (Last) _____

Title: _____ % Ownership in Business _____ Social Security # _____

Date of Birth _____ Mother's Maiden Name _____ Citizen: Yes No

Driver License # _____ Issued Date _____ Expire Date _____ State _____

Marital Status Married Unmarried Separated Veteran: Yes No

Home Address: _____ City _____ (State) _____ (ZIP) _____

Own Rent Living with parents Other Years at Current Address _____ Monthly Housing Pmt: \$ _____

Telephone: (_____) _____ Cell: (_____) _____ Fax: (_____) _____

Previous Address (*If less than 2 years*) _____ Time at Previous Address _____

Number of dependants: _____ Ages of dependants: _____ Email Address: _____

Annual Salary _____ Investment Income _____ Real Estate Income _____ Other Income _____

Personal Bank Name _____ Account Number _____ Current Balance _____

Saving Bank Name _____ Account Number _____ Current Balance _____

Nearest Relative Not Living With You: Name _____ Relation _____

Phone Number _____ Address: _____

Has the business incurred a loss in the last three years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Are there any delinquent State or Federal income taxes owed by the business or applicant?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Has the business and/or Guarantor(s) filed bankruptcy? If Yes, What year discharged?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Year _____
Is the applicant a party to any existing or pending claim or lawsuit?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Are you obligated to make Alimony, Support or Maintenance Payments?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Are there any unsatisfied judgments against you?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

I/we herby certify that the above information is valid and correct to the best of my / our knowledge. By signing below, the undersigned individual(s) provides this written instruction to Happy Investments Inc., or its assigns, authorizing review of his/her personal credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in consideration of his application and subsequently for the purpose of update, renewal or the extension such credit or additional credit and for reviewing and collection the resulting account. I/we agree to grant Happy Investments Inc. access to credit information for no greater than 90 days. A Photostat or facsimile copy of this authorization shall be valid as the original. By signing below, I/we affirm our identity as the respective individual(s) identified in the related application.

Applicant Signature :

Date: _____

Personal Financial Information as of _____

Cash on Hand & in Bank	\$ _____	Total Credit Card Limits	\$ _____	Payments	_____
IRA or Other Retirement Account	\$ _____	Amount Owed on Credit Cards	\$ _____		_____
Life Insurance Cash Value Only	\$ _____	Auto Installment Balance	\$ _____		_____
Stocks & Bonds Value	\$ _____	Mortgage Balance 1 st	\$ _____		_____
Real Estate Value	\$ _____	Mortgage Balance 2 nd	\$ _____		_____
Other Real Estate	\$ _____	Unpaid Taxes	\$ _____		_____
Automobile	\$ _____	Notes Payable to Banks	\$ _____		_____
Personal Property	\$ _____	Other Liabilities	\$ _____		_____
Other Assets	\$ _____	Total Liabilities	\$ _____		_____
Total Assets	\$ _____	Total Net Worth (Assets-Liabilities)	\$ _____		_____

Real Estate Owned (describe)

Real Estate Owned (describe)	Property One	Property Two	Property Three
Type of Property			
Address			
Date Purchased			
Original Cost			
Current Market Value			
Mortgage Holder's Name			
Mortgage Balance			
Monthly Payment			
Status of Mortgage			

Stocks & Bonds (describe)

Number of Shares	Name	Cost	Market Value	Date of Quotation	Total Value

Personal Assets & Other Assets (describe)

Life Insurance (describe)
Other Liabilities (describe)
Unpaid Taxes (describe)
Notes Payable to Bank(describe)

Applicant Signature :

Date: _____



1307 West Sixth Street # 220D
Corona, CA 92882
Tel: (951) 898-5797 Fax: (951) 898-9738

CREDIT CARD AUTHORIZATION FORM

Complete Form & Fax Back to (951) 898-9738

I, _____, hereby authorize Happy Investments, Inc. to charge my credit card for the total amount as shown below.

1. Credit card details:

Card Vendor: VISA _____ MASTERCARD _____

Card Holder's Name: _____
Exactly as printed on your credit card

Card Number: ____|____|____|____| - ____|____|____|____| - ____|____|____|____| - ____|____|____|____|

Expiry Date (MM/YY): ____/____

Card Security Code: ____|____|____| - the last 3 digits inside the signature area located on the back of your card

2. Billing address to which your credit card statement is mailed:

Address: _____

City: _____ State: _____ Zip _____

3. Phone number for the above address: (____) _____

4. Description of your order: Tri-Merge Credit Report with Credit Scores

5. Total amount in US Dollars: \$ 18.75 (eighteen dollars and seventy five cents).
Notice: The charge from "CBCInnovis" will appear on your next credit card statement.

Signature of Cardholder: _____ **Date** _____