First Mid Bank & Trust Agency Finance Application Instructions

The **Application** is a PDF fillable form, so please complete electronically if possible, using Adobe Reader.

- Complete the Application including the commission summary page and acquisition questionnaire, if applicable
- 2. Each owner over 25% will be required to provide a personal guaranty, so please check the appropriate guarantor boxes in the owner section given ownership percentages
- 3. Each owner needs to sign page 3
- 4. If there will be a non-owner guarantor (i.e. spouse, parent, business associate etc.), please have all parties complete and sign the last page entitled Equal Credit Opportunity (Reg B) Notice of Intent to Apply for Joint Credit.
- 5. Print the Application
- 6. Scan the signed form and submit it to your salesperson via email, fax (317-578-8361), or upload to the following link https://spaces.hightail.com/uplink/fmagencyfinance

BUSINESS CREDIT APPLICATION



In this application, "you" and "your" mean each person signing this application. "Company" is your business identified in this application. "We", "us", and "our" mean First Mid Bank & Trust Agency Finance, with its main office in Indianapolis, Indiana. "Accounts" means the business term loan and deposit account which we open for Company in response to this application. This application MUST be completed in full to process your request. Please print each page. Initial and/or sign where indicated.

				·	Ge	neral Informa	tion		Ü				
Legal Name of C	ompany:								Tax ID	Number:			
Physical Address	S:								Compa	any Phone:			
City State Zip:									Compa	any Fax:			
County:									Numbe	er of years in b	usiness:		
State of Incorpora	ation:								Numbe	er of years with	Current	Owner	s:
Business Checki	ng Bank:					Average Bala	ince:		Numbe	er of Employee	s:		
Type of Organiza	ition:	S Ltd	Corporatio Corporatio d. Partners her	n	Sol	. Liability Compa e Proprietorship n. Partnership				ption of Busine es) or NAICS (ucts ar	nd
					Cred	it Terms Requ	uested	i					
Loan Type (Ter	m / LOC) Τε	erm (Mont	hs)	\$ R	equested			L	oan Purpose			
						Revenue							
To	tal Annu	al Reveni	ue, includ	ing Bonus	3				Ann	ual Bonus			
					Busi	ness Debt Scl	hedule	9					
Debt Payable to	Interest Rate	Original Date	Original Amount	Current Balance		Purpose		Maturity Date	Monthly Payment	Secured By	Loan Past Due?	paid o	in to be off with Loan?
	rtato	Date	7 11110 01111	Danamed		. апросо				2000.00.29	2 0.0		
Has the Compan	y ever de	eclared B	ankruptcy	·?				•		•	•	Yes	No
Are there any ou	tstanding	tax oblig	ations inc	luding pa	yroll or	sales tax of the	e Com	pany or a	ny guaran	tors?		Yes	No
Do you have any	tax liens	or conte	sted taxe	s?								Yes	No
Is the Company	or guarar	ntor party	to a Fede	eral or Sta	te Tax S	Settlement or p	aymeı	nt agreen	nent requir	ing a periodic	payment	? Yes	No
Are there any ou or settled legal a												Yes	No
Have you been p	arty to a	ny Depart	ment of I	nsurance	investig	ations, inquirie	es, or e	ever recei	ved a ceas	se & desist ord	er?	Yes	No
Are all of your inc	dividual a	and busin	ess insura	ance licen	ses curi	rently in force?)					Yes	No
Are proceeds of If yes, please see	e additiona	al informati	on needed	in notes s	ection.							Yes	No
Have you comple	eted an a	igency or	book acq	uisition in	the last	3 years? If ye	s, plea	ase comp	lete the ac	quisition quest	ionnaire.	Yes	No
How many licens	ed staff	do you en	nploy?			How m	nany u	ınlicensed	l staff do y	ou employ?			
Do you have em	ployment	agreeme	ents in pla	ce for lice	nsed st	aff?						Yes	No
Do you collect pr	emiums	from any	of your po	olicyholde	rs?							Yes	No
Does the Compa	ny provid	de payday	or title lo	ans?								Yes	No
Does the Compa	ny enga	ge in inter	net gamb	ling activi	ty?							Yes	No
Is the Company	involved	in marijua	na relate	d busines	s activit	y?						Yes	No
Provide explanat	ion to an	y "yes" re	sponses	above as	an attac	chment to the o	credit a	applicatio	n.				

	Owners & Guarantors								
First Name	MI	Last Name	Suffix (Jr/Sr)	Street Address, City, State, Zip	Date of Birth	SSN / if non US, identification number	Cell Phone	Percent Owner	Guarantor?

Employment and Education History								
Owner 1: Work Experience (Include 5 years of employment)								
Employer Name	Employer Name Address Position / Title Dates of I							
Owner 1 Education:								
	School Name	Year Attended	Degree					
High School								
College								
Other								
Owner 2: Work Experience (Include	5 years of employment)							
Employer Name	Address	Position / Title	Dates of Employment					
Owner 2 Education:								
	School Name	Year Attended	Degree					
High School								
College								
Other								

For more than two owners, please attach a separate sheet with employment and education history.

Have any of the owners or guarantors ever been indicted or convicted of a misdemeanor or felony?	Yes	No
Have any of the owners or guarantors ever declared Bankruptcy?	Yes	No
Do any of the owners or guarantors have tax liens or contested taxes?	Yes	No
Are any of the owners or guarantors a senior foreign political figure?	Yes	No
Are any of the owners or guarantors a citizen of a foreign country? If yes, of what foreign country is the owner(s) or guarantor(s) a citizen?	Yes	No
Are any of the owners or guarantors involved in marijuana related business activity?	Yes	No
Are any of the owners and guarantors engaged in internet gambling activity?	Yes	No
Provide explanation to any "yes" responses as an attachment to the credit application.		

If the Organization Type is anything other than a sole proprietorship, please complete the following information for one individual with significant responsibility for managing the legal entity listed above, such as an executive officer (CEO, CFO, COO, Managing Member, General Partner, President, etc.)

		Beneficial Ownership		
Full Name	Title	Street Address, City, State, Zip	Date of Birth	SSN / if non US, other identification number

ADDITIONAL REQUIRED INFORMATION

The following information must accompany the business credit application:

- (a) Most recent two years Company Federal Tax Returns with copies of 1099's
- (b) Company's fiscal year-end statements, with balance sheets and income statements for most recent two calendar years
- (c) Company's interim <i.e. current> year to date financial statements, with balance sheet and income statement
- (d) A personal financial statement for each owner or guarantor listed
- (e) Most recent two years Personal Federal Tax Returns for each owner or guarantor listed with copies of W2's
- (f) Commission statements for the previous 12 months for pledged commissions
- (g) Agency/Carrier contracts and commission rate schedules for pledged commissions
- (h) Most recent 3 months bank statements for all bank accounts of the Company
- (i) Copies of Insurance Licenses
- (j) Articles of Incorporation or Organization; Bylaws, and Operating Agreement, as applicable
- (k) Completion of the Summary of Commission Revenue page
- (I) Provide Employment Agreements for current employees, as applicable

If loan proceeds are for an acquisition, please provide the following additional information:

- (m) Target Agency's most recent two years Federal Tax Returns with copies of 1099's
- (n) Target Agency's interim <i.e. current> year to date financial statements, with balance sheet and income statement
- (o) Provide Employment Agreements for all employees of the Target Agency
- (p) Summary of purchase terms, letter of intent or draft purchase agreement
- (q) Completed Acquisition Questionnaire

Owner 4:

This application is subject to the approval of and any credit will be extended by First Mid Bank & Trust, Illinois.

AGREEMENTS AND REPRESENTATIONS

- 1. You and Company represent to us that all information provided on this application, or otherwise in connection with the Accounts is true and correct, is not misleading, and does not contain any material omissions.
- Company agrees to all of the terms and conditions applicable to the Accounts.
- 3. You authorize us to obtain consumer credit reports on each of you from consumer reporting agencies in considering this application, and in connection with any extension of credit to Company or review or collection of any of the Accounts. If your credit references or credit history may be verified under any other name(s), please indicate next to your signatures. We may obtain business reports on Company.
- 4. You and Company authorize us to release information on the Accounts to consumer and business reporting agencies and others who we believe have a legitimate need for the information.
- 5. You represent to us that each of you is authorized to sign this application on behalf of Company, that each of you have the title indicated on this application, and that no other person(s) is/are required to sign this application in order to bind the Company or to make any of the representations, agreements, or other information in this application accurate, effective and legally binding.
- 6. You agree that all responsible closing costs associated with any Account, including but not limited, all reasonable out of pocket expenses including UCC filing fees and reasonable attorney fees associated with Account will be paid by you out of closing proceeds.

All owners and other principal representatives must sign this application. Your signature below is: (i) your Company's application through

Owner 1: Date: Owner 2: Date: Owner 3: Date:	the application	uthorized signor for the credit products indicated, (ii) your agreement to the on have been answered fully and truthfully, (iii) you and your Company's agricons section above, and (iv) you and your Company's understanding that Fig First Mid Bank & Trust approves this application.	greement as applicable to the Agreement and
		Owner 1:	Date:
Owner 3: Date:		Owner 2:	Date:
		Owner 3:	Date:

Date:

ACQUISITION QUESTIONNAIRE

quired Agency 3
arget Agency 3



Summary of Commission Revenue

Name of Business:			

Insurance Company	Annual Commissions	Product Type(s)	Personal or Commercial Lines	Direct Contract with Insurance Co., Broker, or MGA?	paid Di	nissions rectly by mpany?	If No, Paid by?	Electronic Pmt or Check?	Electronic or Paper Commission Statement?	What % of Revenue is New Business?	What % of Revenue are Renewals?	Agency Bill
					Yes	No						
					Yes	No						
					Yes	No						
					Yes	No						
					Yes	No						
					Yes	No						
					Yes	No						
					Yes	No						
					Yes	No						
					Yes	No						
					Yes	No						
					Yes	No						
					Yes	No						
					Yes	No						
					Yes	No						
					Yes	No						

Producer & MGA Schedule

Producer Name	Written Premium	Empl Agre	oyment ement?
		Yes	No

MGA Name	Written Premium





Equal Credit Opportunity (Regulation B)

This form needs to be completed if there will be a non-owner guarantor (i.e. spouse, parent, business associate, etc.).

Notice of Intent to Apply for Joint Credit

Borrower Legal Name:		
	Please Print Name	
Guarantors:		
Please Print Name	Please P	Print Name
Please Print Name	Please P	Print Name
Please Print Name	Please F	rint Name
Notice: We intend to app	/ for joint credit.	
A almanda demante Division		ont to combute a laint and it
Acknowledgment: By Sign	ing below, we acknowledge our inte	ent to apply for Joint Credit.
Guarantor Signature	Co-Guarantor Sig	nature
Co-Guarantor Signature	Co-Guarantor Sig	nature
Co-Guarantor Signature	Co-Guarantor Sig	nature
Date:		