

COMMERICAL LOAN APPLICATION

Please complete the attached Commercial Loan Application to apply for business purpose loans. This is the first step in the commercial loan application process. For Cascade Capital Funding to consider your credit request this application should be completed in its entirety.

In order to help us process your loan request quickly, please provide the following documents with completed Loan Application. Documents may vary depending on the type of loan request, collateral and parties involved.

Please note that on loans to a business, all individuals with 20% or more ownership in the business are required to be personal guarantors on the loan.

If you have any questions, please do not hesitate to contact your loan officer. We look forward to helping you meet your financial goals.

DOCUMENT CHECKLIST

BUSINESS INFORMATION

<input type="checkbox"/>	Business Financial Statements for the last 3 years
<input type="checkbox"/>	Projections (if business is less than three years old)
<input type="checkbox"/>	Interim financial statement dated within the last 45 days
<input type="checkbox"/>	Business debt schedule (form attached)
<input type="checkbox"/>	Federal tax returns for the last three years
<input type="checkbox"/>	Articles of Incorporation, Amendments thereto, and By-Laws (if corporation)
<input type="checkbox"/>	Partnership Agreement (if partnership)
<input type="checkbox"/>	Business License and Fictitious Business Name Statement (of proprietorship)
<input type="checkbox"/>	Franchise Agreement
<input type="checkbox"/>	Resume for each Officer

PERSONAL INFORMATION (for each owner of 20% or greater)

<input type="checkbox"/>	Personal tax returns for the last three years
<input type="checkbox"/>	Personal Resume
<input type="checkbox"/>	Personal financial statement
<input type="checkbox"/>	Photocopy of driver's license/I.D. card

REAL ESTATE INFORMATION

<input type="checkbox"/>	Real Estate Purchase Agreement or settlement sheet
<input type="checkbox"/>	Construction costs budget and/or equipment invoices
<input type="checkbox"/>	Existing environmental studies
<input type="checkbox"/>	Copy of Insurance Policy or Agent contact





504 APPLICATION

COMPANY INFORMATION

Company name _____

Address _____ City _____ State _____ Zip _____

Principal in charge _____ Phone () _____ Fax () _____

Secondary contact person _____ Phone () _____ Fax () _____
(IN-HOUSE CONTROLLER OR BOOKEEPER)

Type of business _____ Date established _____

Type of entity (check one): Proprietorship Partnership Corporation LLC

COMPANY OWNERSHIP

Name _____ Title _____ % of Ownership _____

Name _____ Title _____ % of Ownership _____

Name _____ Title _____ % of Ownership _____

AFFILIATE BUSINESSES (IF APPLICABLE)

Name _____ Owner _____ % of Ownership _____
(APPLICANT COMPANY OR INDIVIDUALS)

Name _____ Owner _____ % of Ownership _____
(APPLICANT COMPANY OR INDIVIDUALS)

If a corporation, please indicate who is President and Secretary

EXISTING BUSINESS LOCATIONS

Address _____ Square feet _____ Lease payment _____ Lease expiration _____
 Replaced by new facility? _____

Address _____ Square feet _____ Lease payment _____ Lease expiration _____
 Replaced by new facility? _____

REFERENCES

Bank name _____ Acct. no. _____ Acct. officer _____ Phone _____

Accountant _____ Firm name _____ Phone _____

Attorney _____ Firm name _____ Phone _____

Trade references _____ Contact Person _____ Phone _____

NATURE OF YOUR BUSINESS

Nature of your business _____

Type of products or services (include any catalogs or brochures) _____

Geographic market area _____

List key customers _____

List major competitors _____

PROJECT INFORMATION

Street address of project _____

City _____ State _____ Zip _____ County _____

What is the square footage of the new building? _____ What is the square footage your company will occupy? _____

* Please note -- We require your company to occupy 51% of an existing building and 60% of a new building.

Escrow closing date _____ Realtor's name _____ Phone _____

If known, how will the property be vested (i.e. individually, husband and wife, partnership, LLC, corporation, trust ...) _____

Please provide appropriate document (i.e. Partnership Agreement, LLC documents, Articles of Incorporation, Trust Agreement ...)

TOTAL PROJECT COSTS

Purchase existing building

Purchase price _____ \$ _____

Improvements _____ \$ _____

Equipment* _____ \$ _____

Other _____ \$ _____

Total _____ \$ _____

Construction Project

Land acquisition _____ \$ _____

Construction bid _____ \$ _____

Architects, permits, other soft costs _____ \$ _____

Equipment* _____ \$ _____

Other _____ \$ _____

Total _____ \$ _____

* Please note -- equipment to be financed must have a useful life of 10 years or greater.

If there are any tenants that will remain in the building, please provide the following information: *Also, please have your realtor provide copies of all existing leases.*

TENANT NAME	SQUARE FOOTAGE	LEASE EXPIRATION	RENT AMOUNT

BUSINESS DEBT SCHEDULE

Indebtedness: Furnish the following information on all installment debts, contracts, notes, and mortgages payable. Do not include accounts payable or accrued liabilities.

Company Name _____

Date _____*

CREDITOR NAME/ADDRESS	ORIGINAL AMOUNT	ORIGINAL DATE	PRESENT BALANCE	INTEREST RATE	MATURITY DATE	MONTHLY PAYMENT	SECURITY	CURRENT OR DELINQUENT
Total present balance**				Total monthly payment				

* Should be the same date as current financial statement.

** Total must agree with balance shown on current financial statement.

EMPLOYEE QUESTIONNAIRE

Number of current employees _____

Estimated number of new employees within the next two years as a result of this project _____

Key employees

NAME	TITLE	RESPONSIBILITIES	YEARS WITH COMPANY	YEARS IN THE INDUSTRY

MISCELLANEOUS QUESTIONS

- | | No | Yes |
|--|--------------------------|--------------------------|
| 1. Do any Applicants, Owners or Guarantors have any judgments, suits or other pending legal action?
<i>(if yes, please provide details on separate sheet)</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Have any Applicants, Owners or Guarantors of your company ever been involved in bankruptcy or insolvency proceedings? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Have any Applicants, Owners or Guarantors guaranteed or endorsed any notes for any other individual or business entity? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Do any Applicants, Owners or Guarantors have tax obligations that are past due? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Do any Applicants, Owners or Guarantors expect changes in income or expenses in the next 12 months? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Have any Applicants, Owners or Guarantors established a trust? | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Do any Applicants, Owners or Guarantors engage in and/or earn income from the marijuana industry? | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. For loans secured by real estate, is the Collateral property used or intended to be used in the marijuana industry? | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Have any Applicants, Owners or Guarantors ever received a SBA Loan?
<i>if yes, please provide a copy of the SBA Authorization document and the following:</i> | <input type="checkbox"/> | <input type="checkbox"/> |

Original Loan Amount \$ _____ Date of loan: _____

Current Balance \$ _____ Status: _____

AUTHORIZATION TO RELEASE INFORMATION

Whether completing this form or submitting separate data, all Applications, Owners and Guarantors must sign and date the affirmation below.

I/We hereby affirm that the foregoing information and any independently produced information submitted to the Lender (Cascade Capital Funding) are presented for the purpose of obtaining credit and that the submitted information is accurate and complete. As long as any obligations to the Lender are outstanding or prior to any future application for credit, the Lender is authorized to investigate the credit record of all Applicants, Owners, and Grantors, the financial status of all, collateral status and any statements made on this application or in the future. I/We give all Creditor(s), Accountant(s), Attorney(s), Advisor(s), Broker(s), and Insurance Agent(s) permission to give the Lender any information (including tax returns and financial statements) needed to determine if the Lender will grant me credit now or in the future. I/We agree to inform the Lender immediately of any matter which may materially affect the financial condition of an Applicant, Owner, Guarantor or any related business entity. I/We understand that I/we may be held responsible for the cost(s) incurred during the application process whether or not this request is granted. I/We understand the Lender will retain the submitted information whether or not this request is granted. I/We further affirm that I/We have the authority to sign on behalf of the Business.

_____	_____	_____
Name of Applicant / Title	Signature	Date
_____	_____	_____
Name of Applicant / Title	Signature	Date
_____	_____	_____
Name of Applicant / Title	Signature	Date
_____	_____	_____
Name of Applicant / Title	Signature	Date