

# SPECIALTY LENDERS, LTD.

3205 McKnight East Drive, Pittsburgh, PA 15237-6423

## LOAN APPLICATION

Date: \_\_\_\_\_

This Application is submitted to obtain a loan in the amount of \$\_\_\_\_\_ by the undersigned and a corporation to be formed, said loan to be used for the purchase/consolidation of debts/remodeling of a restaurant with liquor license now owned by \_\_\_\_\_. Submitted herewith is the amount of \$\_\_\_\_\_ to be used for the appraisal of the restaurant and credit examination. This sum may be retained by Specialty Lenders, Ltd. whether this application is approved or not. Loan Application's are accepted by current borrower's of Specialty Lenders, Ltd. after two (2) years of settlement of current loan in good standing only.

Referred to Specialty Lenders, Ltd.: \_\_\_\_\_

Purpose of Loan: \_\_\_\_\_

### Applicant & Business Information

Name of the Restaurant/Bar: \_\_\_\_\_ Corporation Name: \_\_\_\_\_

Premises Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Municipality: \_\_\_\_\_

Is the Corporate Entity applying for this loan free and clear of any liens, judgments and/or secured transactions? ( ) yes ( ) no

If renting, is your rent current? ( ) yes ( ) no If not, how much are you in arrears? \$ \_\_\_\_\_

If you own your property, is your mortgage current? ( ) yes ( ) no If not, how much are you in arrears? \$ \_\_\_\_\_

How long have you owned your liquor license? \_\_\_\_\_ Is your liquor license current? \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Do you owe taxes to PA Dept of L & I? \_\_\_\_\_ PA Dept of Revenue? \_\_\_\_\_ Allegheny Co. Drink Tax? \_\_\_\_\_

Tax filings with L & I and Revenue Current? ( ) yes ( ) no Has an extension been filed for your corporate tax return? ( ) yes ( ) no

Individual Applicant's Name: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

Present Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Years There: \_\_\_\_\_ Own ( ) Rent ( ) Name of Landlord or Mortgage Holder: \_\_\_\_\_

Title in Name of: \_\_\_\_\_ Date Purchased: \_\_\_\_\_ Price: \$ \_\_\_\_\_

Are the mortgage payments current? YES NO Mortgage Balance: \$ \_\_\_\_\_ Monthly Payment: \$ \_\_\_\_\_

DOB: \_\_\_\_\_ E-mail Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Marital Status: M - S - D Number of Dependants: \_\_\_\_\_ Ages: \_\_\_\_\_ Spouse's Name: \_\_\_\_\_

DOB: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ Spouse's Employer: \_\_\_\_\_ Years There: \_\_\_\_\_

Salary: \$ \_\_\_\_\_ per: \_\_\_\_\_ Children or Spouse involved in Business? If so, whom? \_\_\_\_\_

Present Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Years There: \_\_\_\_\_ Position: \_\_\_\_\_ Salary: \$ \_\_\_\_\_ per: \_\_\_\_\_

Source and Amount of Other Income: \_\_\_\_\_

### Additional Properties Owned

Name of Landlord or Mortgage Holder: \_\_\_\_\_

Title in Name of: \_\_\_\_\_ Date Purchased: \_\_\_\_\_ Price: \$ \_\_\_\_\_

Mortgage Balance: \$ \_\_\_\_\_ Monthly Payment: \$ \_\_\_\_\_

Name of Landlord or Mortgage Holder: \_\_\_\_\_

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## LOAN APPLICATION (continued)

Title in Name of: \_\_\_\_\_ Date Purchased: \_\_\_\_\_ Price: \$ \_\_\_\_\_

Mortgage Balance: \$ \_\_\_\_\_ Monthly Payment: \$ \_\_\_\_\_

Have you had any citations issued by the Pennsylvania Liquor Control Board during the past 5 years? ( ) yes ( ) no

If so, how many and what was/were the charge(s)? \_\_\_\_\_

**Banking Information**

**Business Checking**

Institution and Branch \_\_\_\_\_ Account # \_\_\_\_\_

**Personal Checking**

Institution and Branch \_\_\_\_\_ Account # \_\_\_\_\_

**Personal Savings**

Institution and Branch \_\_\_\_\_ Account # \_\_\_\_\_

**Credit Reference**

Creditor	Original Debt	Creditor	Original Debt
1. _____	\$ _____	4. _____	\$ _____
2. _____	\$ _____	5. _____	\$ _____
3. _____	\$ _____	6. _____	\$ _____

Are you a co-maker, endorser, or guarantor on any loan or contract? ( ) Yes ( ) No

If yes, for whom? \_\_\_\_\_ To whom? \_\_\_\_\_

Are there any unsatisfied judgments against you? ( ) Yes ( ) No

If yes, to whom? \_\_\_\_\_ Amount? \_\_\_\_\_

Has the entity that owns the restaurant declared bankruptcy in the last 14 years? ( ) Yes ( ) No

If yes, where? \_\_\_\_\_

I/We certify, for the purpose of inducing Specialty Lenders, Ltd. to grant credit applied for herein, that all statements made in this credit application are true and correct, and I/We authorize Specialty Lenders, Ltd. to investigate and obtain such additional credit information as it may deem necessary or desirable in evaluation of my/our credit for the purposes of this application and in the future on an as needed basis

\_\_\_\_\_  
Applicant's Signature Date: \_\_\_\_\_

\_\_\_\_\_  
Spouse's Signature Date: \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE**

NOTES: \_\_\_\_\_  
\_\_\_\_\_

**AUTHORIZATION FOR RELEASE OF INFORMATION**

Date: \_\_\_\_\_

**TO BE FILED WITH:**

Pennsylvania Department of Revenue  
Bureau of Field Operations  
Room 104, 300 Liberty Avenue  
Pittsburgh, PA 15222  
412-565-7540

PA Department of Labor & Industry  
Office of Employment Security  
933 Penn Avenue  
Pittsburgh, PA 15222  
412-565-2400

Allegheny County Treasurer  
Office of Alcohol Beverage Tax  
436 Grant Street-Room 108  
Pittsburgh, PA 15219-2497  
412-350-4100

**Authorization For Release of Information:**

I authorize the above named Departments of the Commonwealth of Pennsylvania to disclose, verbally and/or in written form, all tax filing and tax payment information under the jurisdiction of these respective departments to Specialty Group, Specialty Lenders, Ltd. and/or Specialty Bar & Restaurant Brokers, Ltd.

**Business Identification:**

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

**Business Identification numbers:**

Pennsylvania State Sales Tax Number \_\_\_\_\_

Federal Employer ID Number (EIN#) \_\_\_\_\_

Unemployment Compensation ID Number \_\_\_\_\_

Corporation Box Number (If incorporated) \_\_\_\_\_

Social Security Number (Sole Prop/Partnerships) \_\_\_\_\_

Witness:

Authorization:  
Owner

\_\_\_\_\_

By: \_\_\_\_\_