



Veillon Business Consulting, LLC
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LENDING OFFICER:

BUSINESS INFORMATION

Date:	Loan Amount:	Business Phone: () -		
Company Name:	Contact:			
Title:	E-Mail:	Approx. FICO:		
Tax ID Number: -	In Business Since: /	NAICS Code:		
Company Address:				
City:	State:	Zip Code:		
% of Ownership:	#of years in industry:	Rent:	Own:	
Sole proprietorship:	LLC:	S. Corp.:	C. Corp:	Partnership:
Number of employees:		Average Daily Bank balance:		
Landlord Name:	Landlord Tel. No.: () -			
Landlord Address:	City:	State:		

OWNER INFORMATION

First Name:	Middle Initial:	Last Name:
Address:		
City:	State:	Zip Code:
Own or Rent:	Mthly. Payment: \$	How long?
Phone: () -	E-Mail:	
SSN:	DOB: / /	Gross Annual Income: \$
Citizenship:	State of Birth:	City of Birth:
Driver's License #	State Issued:	Expiration:
Applicant Signature:	Date: / /	

Federal law requires this consent form be provided to you "you" refers to each applicant, if more than one). Unless authorized by law, we cannot disclose your financial and/or tax return information to third parties without your consent. By using our services, you are agreeing to these terms: if you consent to the disclosure of your financial and/or tax return information, federal law may not protect your financial and/or tax return information from further use or distribution. If we obtain your signature on this application, you agree to the disclosure of your financial and tax return information. Your content is valid for one year from the date of signature. You have indicated that you are interested in obtaining information on the following services and authorize us to disclose your financial and tax return information to the following recipients for the following purposes: To the Small Business Administration (SBA) and its authorized agents or affiliates for the purpose of processing an application for a loan. If you desire a loan from The SBA or its agents, affiliates, or assigns, you must authorize us to disclose all of the information required by those recipients to process your application for these respective products or services. By signing this application, I (including each of you if there is more than one applicant) authorize Veillon Business Consulting, LLC and its agents and/or assigns to disclose my financial and/or tax return information that is necessary for Veillon Business Consulting, LLC and the SBA and its agents and assigns to process my application for the respective products and services. **I AGREE**