Thank you for choosing OneSouth Bank for your Paycheck Protection Plan (PPP) Loan. Please complete this application, print, sign, and email back to your OneSouth Bank Lender with the following subject line: "Your Business Name" PPP application.

Note: This application will only work in Adobe Acrobat or Acrobat Reader.
Download Acrobat Reader Here

Borrower Legal Name: _____

Borrower DBA: _____

Borrower TIN: _____

Number of Employees: _____

Was your business in operation as of February 15, 2020 Yes ☐ No ☐

Are you a Small Business or Sole Proprietorship? _____

Are you an Independent Contractor or Self Employeed? _____

What is your NAICS Code? (Look Up your code here) _____

Are you a franchise? _____

Business Address (street) : _____

Business Address (mailing) : _____

Date Business Established: _____

List Principals:

Name:	Years in field of Business

Please complete the following Eligibility Certification:

U.S. Small Business Administration Payroll Protection Program
Borrower and Principal Certifications

Borrower Eligibility:

Please Initial

The Payroll Protection Loan being submitted meets the following criteria:

1. Current economic uncertainty makes this loan request necessary to support the ongoing operations of the Applicant. _____
2. The funds will be used to retain workers and maintain payroll or make mortgage payments, lease payments, and utility payments; Applicant understands that if the funds are used for unauthorized purposes, the federal government may pursue criminal fraud charges. _____
3. Documentation verifying the number of full-time equivalent employees on payroll as well as the dollar amounts of payroll costs, covered mortgage interest payments, covered rent payments, and covered utilities for the eight week period following this loan will be provided to the lender. _____
4. SBA Loan forgiveness is expected to be provided for the sum of documented payroll costs, covered mortgage interest payments, covered rent payments, and covered utilities. Due to likely high subscription, it is anticipated that not more than twenty-five percent (25%) of the forgiven amount may be for non-payroll costs. _____
5. During the period beginning on February 15, 2020 and ending on December 31, 2020, the Applicant has not and will not receive another loan under this program. Yes ☐ No ☐
6. Applicant further certifies that the information provided in this application and the information that Applicant provided in all supporting documents and forms is true and accurate. Applicant realizes that knowingly making a false statement to obtain a guaranteed loan from SBA is punishable under 18 USC 1001 and 3571 by imprisonment of not more than five years and/or a fine of up to $250,000; under 15 USC 645 by imprisonment of not more than two years and/or a fine of not more than $5,000; and, if submitted to a Federally insured institution, under 18 USC 1014 by imprisonment of not more than thirty years and/or a fine of not more than $1,000,000. _____
7. Applicant acknowledges that the lender will calculate the eligible loan amount using tax documents and/or other payroll documents applicant has submitted. Applicant affirms that these tax documents are identical to those submitted to the IRS. Applicant also understand, acknowledge and agree that the Lender can share the tax information with SBA's authorized representatives, including authorized representatives of the SBA Office of Inspector General, for the purpose of compliance with SBA Loan Program Requirements and all SBA reviews. _____

Borrower: _____

By: (Print Name & Title) _____

Signed: _____

Date: _____

Borrower Certifications:

Involved in Bankruptcy/Insolvency? Yes No

Involved in Pending Lawsuit? Yes No

Prior SBA Loan? Yes No

Liability Insurance Yes No

Product Liability Insurance Yes No

Dram Shop/Host Liquor Liability Insurance Yes No

Malpractice Insurance Yes No

Workers Comp Insurance Yes No

Other Insurance (Ex. State Specific, etc.) Yes No

Business--Total payments less than total amount of credit card purchases Yes No

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Have you or any business owned or controlled by you ever obtained a direct or guaranteed loan from SBA or any other Federal agency or been a guarantor on such a loan? (including student loans) Yes No

Is the Small Business Applicant debarred, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency? Yes No

Are any of the Small Business Applicant's revenues derived from gambling, loan packaging, or from the sale of products or services, or the presentation of any depiction, displays or live performances, of a prurient sexual nature? Yes No

Is any SBA employee or the household member of an SBA employee; a sole proprietor, partner, officer, director, or stockholder with a 10 percent or more interest, of the Applicant? Yes No

Is a former SBA employee, who has been separated from SBA for less than one year prior to the request for financial assistance; an employee, owner, partner, attorney, agent, owner of stock, officer, director, creditor or debtor of the Applicant? Yes No

Is a member of Congress, or an appointed official or employee of the legislative or judicial branch of the Fed-eral Government; a sole proprietor, general partner, officer, director, or stockholder with a 10 percent or more interest, or household member of such individual, of the Applicant? Yes No

Is any Government employee having a grade of at least GS-13 or higher or a household member of such individual; a sole proprietor, general partner, officer, director, or stockholder with a 10 percent or more interest, of the Applicant? Yes ☐ No ☐

Is any member or employee of a Small Business Advisory Council or a SCORE volunteer; a sole proprietor, general partner, officer, director, or stockholder with a 10 percent or more interest, or a household member of such an individual, of the Applicant? Yes ☐ No ☐

Principal Certifications:

Citizenship _____

Gender Male _____ Female _____

Veteran Yes _____ No _____ Unanswered _____ **If yes, please attach documentation.**

Select 1 or more race categories

Race American Indian or Alaska Native _____ Asian _____

Black or African American _____ Native Hawaiian or Other Pacific Islander _____

Unanswered _____ White _____

Involved in Bankruptcy/Insolvency? Yes ☐ No ☐

Involved in Pending Lawsuit? Yes ☐ No ☐

Number of Years Professional Experience in Primary Business Field _____

Is Principal or Affiliate Employed by Federal Agency? Yes ☐ No ☐

Interest in Other Business? If yes, attach Affiliate List. See Addendum A

Yes ☐ No ☐

Indictment, Parole or Probation?

Yes ☐ No ☐

Charged or arrested for criminal offense?

Yes ☐ No ☐

Convicted?

Yes ☐ No ☐

Are you presently suspended, debarred, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency? Yes ☐ No ☐

If you are a 50% or more owner of the Small Business Applicant, are you more than 60 days delinquent on any obligation to pay child support arising under an administrative order, court order, repayment agreement between the holder and a custodial parent, or repayment agreement between the holder and a state agency providing child support enforcement services? Yes ☐ No ☐

Are you, or any business you control presently involved in any legal action (including divorce)? Yes No

Life Insurance on Principal Yes No

Disability Insurance on Principal Yes No

Applicant hereby certifies that the information provided in this Borrower and Principal Certification is true and correct. Applicant, the undersigned, understands that this information will be used and relied upon by One-South Bank to obtain a loan guaranty from the U.S. Small Business Administration in order for the borrower to obtain a loan based on the rules and requirements of the SBA Paycheck Protection Program. Borrower further certifies that funds from such loan will be used for purposes approved under the SBA Paycheck Protection Program: Utilities, Payroll Costs, Mortgage Interest Payments, Rent, to Refinance eligible EIDL loan, Interest on debt incurred before February 15, 2020, and/or the continuation of healthcare benefits and insurance premiums.

Name of Borrower: _____

Name of Principal:
(Please Print) _____

Signature: _____

Name of Principal: _____

Signature: _____

For OSB Use Only

Received By: _____

Date: _____