	Applicant Bus	iness Name:		Date:
	<u>Self-</u>	-Employed Questio	<u>nnaire</u>	
	Business information	required to properly analyze loan/	′income/bank stat	rements
Busi	ness Type:			
If O	f Other, please describe here:			
Prov	vide details of how income	is generated:		
Whe	ere do you conduct busine	ss: Office, Plant, Residence?	) 	
	re than one physical site? es, how many?		NO	
	•	e(s)?		
			State	Zip Code
	v many people do you hav			
	Time:	Part Time:		ractors:
Full	Time Payroll:	Part Time Payroll:	Conti	ractor Payroll:
	mately sell? eck One) YES I	NO If YES, describe in	n detail:	
(Cho	eck One) YES I	NO If YES, describe in goods sold:		
(Cho	eck One) YES I	goods sold:		If <b>YES</b> , describe in detail
Estin	mate for monthly Cost of g	goods sold: product? <b>(Check One) YI</b>		If <b>YES</b> , describe in detail
Estin Do y	mate for monthly Cost of government of the percentage of your business.	goods sold: product? <b>(Check One) YI</b>	ES NO	
Estir Do y Wha	mate for monthly Cost of government of the provide any additional last percentage of the provide any additional last percentage and provide any additional last percentage of your business than 100%, who owns the provide any additional last provide any ad	goods sold:	ES NO%  /hat percentag	ge?
Estir Do y Wha If les	mate for monthly Cost of government of the provide any additional last percentage of the provide any additional last percentage and provide any additional last percentage of your business than 100%, who owns the provide any additional last provide any ad	goods sold:	ES NO%  /hat percentag	ge?
Che Estir Do y Wha If les Sola How	mate for monthly Cost of government of you buy and then resell a part percentage of your business than 100%, who owns the provide any additional of your business than 200%, who owns the provide any additional of your business than 200%, who owns the provide any additional of your business provide any additional of your business provide any additional of your business and you business provide any additional of your business provide any additio	goods sold:	ES NO  /hat percentage d above: (Excl	ge? uding Rent / Payroll / COG tant for us to know as we

Date of Review: \_\_\_\_\_

Employee Reviewer Signature: \_\_\_\_\_