

# **SME Business Lending**

## **Application Form**



**permanent tsb**

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## **Three easy steps to applying for business lending with permanent tsb.**

1. Arrange a meeting with your Relationship Manager at the branch.
2. Complete this Application Form in full.
3. Gather any additional supporting documentation or information that may be required by the Bank (Your Relationship Manager will inform you if the Bank has any additional requirements).

SME – Enterprises which employ fewer than 250 persons and which have an annual turnover not exceeding EUR 50 million, and/or annual balance sheet total not exceeding EUR 43 million.

# SME Business Lending Application Form:

Thank you for your recent enquiry in relation to credit facilities. In order to progress your application you should arrange a meeting with your **permanent tsb** Relationship Manager and complete this Business Lending Application Form. You can complete this form with the assistance of your Relationship Manager during this meeting or with the help of a Business Professional.

Your Relationship Manager will inform you of any further documentation that may be required to support your application. Your request for credit will be progressed when your Relationship Manager has received these documents along with your signed Business Lending Application Form.

## Part 1 Business Details: Please tell us about your business. This information will assist us in providing a professional timely response.

### Business Details:

Business Name/ Trading Name	<input type="text"/>	Business Type	Sole Trader <input type="checkbox"/> Ltd. Co. <input type="checkbox"/> Other <input type="checkbox"/>
Business Address	<input type="text"/>	If Other Specify	<input type="text"/>
Contact Person	<input type="text"/>	Company Registration Number	<input type="text"/>
Email	<input type="text"/>	Company Incorporated in (Country)	<input type="text"/>
Telephone/Mobile	<input type="text"/>	No. of Outlets	<input type="text"/>
Fax	<input type="text"/>	Primary Business Activity	<input type="text"/>
Best Contact Time	<input type="text"/>	In Business Since	<input type="text"/> / <input type="text"/> month/year
Main Bank Account Details	<input type="text"/>	Customer Since	<input type="text"/> / <input type="text"/> month/year
Sort Code	<input type="text"/>	Number of Employees	<input type="text"/> as at <input type="text"/> / <input type="text"/> / <input type="text"/>
		Business Premises Status:	Owned <input type="checkbox"/> Leased <input type="checkbox"/> Other <input type="checkbox"/>

### Business Ownership Details: List the names of all individuals who ultimately own or control 25% or more of the shares or voting rights in the Company or otherwise exercise control over the management of the Company.

1. Owner's name	<input type="text"/>	Director: Yes <input type="checkbox"/> No <input type="checkbox"/>	Irish resident: Yes <input type="checkbox"/> No <input type="checkbox"/>
Address	<input type="text"/>	Date of Birth	<input type="text"/> / <input type="text"/> / <input type="text"/>
Occupation	<input type="text"/>	Percentage Shareholding:	<input type="text"/> %
2. Owner's Name	<input type="text"/>	Director: Yes <input type="checkbox"/> No <input type="checkbox"/>	Irish resident: Yes <input type="checkbox"/> No <input type="checkbox"/>
Address	<input type="text"/>	Date of Birth	<input type="text"/> / <input type="text"/> / <input type="text"/>
Occupation	<input type="text"/>	Percentage Shareholding:	<input type="text"/> %
3. Owner's Name	<input type="text"/>	Director: Yes <input type="checkbox"/> No <input type="checkbox"/>	Irish resident: Yes <input type="checkbox"/> No <input type="checkbox"/>
Address	<input type="text"/>	Date of Birth	<input type="text"/> / <input type="text"/> / <input type="text"/>
Occupation	<input type="text"/>	Percentage Shareholding:	<input type="text"/> %

List below any corporate shareholder that ultimately owns or controls 10% or more of the shares or voting rights in this Company or otherwise exercises control over the management of the Company.

1. Company Name	<input type="text"/>	% of shares owned in the Company	<input type="text"/> %
Registered No.	<input type="text"/>		
2. Company Name	<input type="text"/>	% of shares owned in the Company	<input type="text"/> %
Registered No.	<input type="text"/>		

If more fields required, please photocopy this page or use a separate form.

## Business Borrowing & Savings Details

Borrowings	Financial Institution	Amount Outstanding	Monthly Repayments
Overdraft			
Business Cards			
Loans (Credit Union etc.)			
Leasing/Hire Purchase			
Commercial Mortgage			
Other Financial Commitments (e.g. Forward contracts, Bank Guarantees etc)			

Savings & Investments	Financial Institution	Amount Held
Deposits		
Investment Accounts		
Shares		
Property (please also indicate current property value)	Value _____	
Other		

## Business Financial Details

Period ending	<input type="text" value="D"/> <input type="text" value="D"/> / <input type="text" value="M"/> <input type="text" value="M"/> / <input type="text" value="Y"/> <input type="text" value="Y"/>
Full Year Accounts	Yes <input type="checkbox"/> No <input type="checkbox"/>
Account Type	Audited <input type="checkbox"/> Auditor's Name <input type="text"/>
	Certified <input type="checkbox"/>
	Management <input type="checkbox"/>
	Other <input type="checkbox"/>
	Value (000's) <input type="text"/>
Sales/Turnover	<input type="text"/>
Net Profit	<input type="text"/>
Drawings	<input type="text"/>
Interest	<input type="text"/>
Depreciation	<input type="text"/>
Tax	<input type="text"/>

Current Values			
Assets	Value	Liabilities	Amount
Land & Buildings		Creditors	
Machinery and Equipment		VAT/PAYE/PRSI	
Furniture and Fittings		Directors Loans	
Stock		Corporate Tax	
Debtors		Bank Debt	
Cash		Leasing	
Deposits		Other	
Other			
Total Assets		Total Liabilities	

**Other**

Tax Status (Tax up to date) Yes  No

Is a Revenue Agreement in place? Yes  No

Monthly Amount of Revenue Agreement

## Part 2 Personal Details

Your personal details are also important to us and while it is critical to understand your business, it is also important to understand owners. These details will help us meet your current needs.

### Personal Details Principal Business Owner

Name

Address

Date of Birth   /   /

Account number

Sort Code

Time with Bank

**Contact Details**

Email

Telephone/Mobile

Best Contact Time

No of Dependants

Age Range from  to

Residential Status Owner  Tenant

Living with Parents  Other

Number of years at address

Estimated value of home

Previous address (if less than 3 years at current address)

Annual Salary

Salary payment frequency

## Personal Financial Details Principal Business Owner

Borrowings	Financial Institution	Amount Outstanding	Monthly Repayments
Mortgage			
Personal Loan			
Motor Loan			
Overdraft			
Credit & other cards			
Tax Liability			
Other			

Savings & Investments	Financial Institution	Amount Held
Deposits		
Investment Accounts		
Life Assurance		
Shares		
Pension		
Property other than family home (please also indicate Current property value)	Value _____	
Other		

## Personal Details Second Business Owner (if applicable)

Name

Address

Date of Birth   /   /

Account number

Sort Code

### Contact Details

Email

Telephone/Mobile

Best Contact Time

No. of Dependants

Age Range from  to

Residential Status Owner  Tenant

Living with Parents  Other

Number of years at address

Estimated value of home

Previous address (if less than 3 years at current address)

Annual Salary

Salary payment frequency

## Personal Financial Details Second Business Owner

Borrowings	Financial Institution	Amount Outstanding	Monthly Repayments
Mortgage			
Personal Loan			
Motor Loan			
Overdraft			
Credit & other cards			
Tax Liability			
Other			

Savings & Investments	Financial Institution	Amount Held
Deposits		
Investment Accounts		
Life Assurance		
Shares		
Pension		
Property other than family home (please also indicate current property value)	Value _____	
Other		

If more than 2, please use separate form or photocopy this page

## Part 3 Application Details

Please tell us about your current financial requirements. If you are unsure, please discuss with your Relationship Manager, who will be happy to go through the various options.

### Application Details

#### Facility 1

Overdraft  Loan

Other

Amount required

Repayment Period  Years  Months

Purpose of Facility (e.g Working Capital)

Loan Repayment Frequency (e.g Monthly)

Loan First Repayment Date:   /   /

#### Facility 2

Overdraft  Loan

Other

Amount required

Repayment Period  Years  Months

Purpose of Facility (e.g Working Capital)

Loan Repayment Frequency (e.g Monthly)

Loan First Repayment Date:   /   /

Do you see any additional requirements over the coming 12 months? Yes  No

If yes, please provide details:

Describe briefly the purpose of Facility 1 and/or Facility 2 and what financial input is being provided by you and the source of these funds. Please let us know if your business is supported by Enterprise Ireland, City & County Enterprise Boards, Business Angels etc. and/or other specialist funds.

#### Additional Information

Depending on the purpose of your borrowing further details may be required. For example, if you are purchasing a new business premises the address, property valuation etc. will be required. For a machinery purchase the machinery value, expected fit-out costs, expected life etc. will be required. Please provide any additional information which is relevant to your application.

#### Attachments

These details may not be required for all applications. Your Relationship Manager will advise you what further information is required to ensure a speedy decision.

	Yes	No	Date Received
Completed application form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Management Accounts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Certified/Audited Accounts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Cash flow statement/projections	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Business Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Aged Debtors Listing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Aged Creditors Listing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Confirmation of Tax Affairs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

#### Security/Collateral proposed

Your Relationship Manager will inform you if security is required.

Lending criteria, terms and conditions apply. **permanent tsb** p.l.c. is regulated by the Central Bank of Ireland.

#### FOR BANK USE ONLY:

Branch  Application No.

CIF No. 1  CIF No. 2

Received By  Date:   /   /

## Part 4 (i) Data Protection Notice

You have the right at any time to request a copy of any "personal data" within the meaning of the Data Protection Acts 1988 and 2003 (as amended or re-enacted from time to time) that **permanent tsb** holds about you (for which **permanent tsb** may charge a small fee) and to have inaccuracies in that information corrected, by writing to Data Access Request, Document Management Control, **permanent tsb**, 56-59 St. Stephen's Green, Dublin 2.

**permanent tsb** will retain and use the information provided by you (whether in this application form or otherwise) and any information relating to the

conduct of the credit facility (including any personal data) for the purposes of processing this application, managing and administering the credit facility, credit checks (which may involve automated credit scoring), debt collection, group reporting and analysis, and compliance with **permanent tsb's** legal and regulatory obligations, as well as for any other purpose to which you have consented. **permanent tsb** may also pass this information to other companies within the **permanent tsb** Group, and to its agents and delegates, in connection with these purposes.

## Part 4 (ii) Credit References Searching and Reporting

**permanent tsb** may from time to time make searches against you and any individual named on this form on the records held by credit reference agencies. When such a search is made the credit reference agencies will keep a record for a period (usually a year) that the search has been made.

**permanent tsb** may also provide information to credit reference agencies concerning this application and the manner in which the credit facility was conducted.

Individuals have the right at any time to request from any credit reference agency a copy of any "personal data" within the meaning of the Data Protection

Signature of first applicant\*

\*Authorised representative of the Business

Date:   /   /

Acts 1988 and 2003 (as amended or re-enacted from time to time) that such a credit reference agency hold about that individual (for which they may charge a small fee) and to have inaccuracies in that information corrected.

I/We acknowledge that **permanent tsb** will carry out credit reference searches against me/us. I/We acknowledge that such credit reference agencies will record that such a search has been made and disclose that fact to their members for a period of at least one year. I/We also acknowledge that **permanent tsb** will provide information concerning this application and the conduct of the Account to credit reference agencies.

Signature of joint applicant\* (if any)

Date:   /   /

## Part 4 (iii) Signature and Declaration To be completed by the individuals listed in part 2-Personal Details.

I/We declare that I/We am/are of full age and I/We hereby make application for Business Lending with **permanent tsb** as described above. I/We declare that the foregoing statements and particulars and other information we have given to **permanent tsb** to be strictly true, to the best of my/our knowledge and belief. The information I/We are supplying on the following form will be used for the purpose of providing me/us with the service I have requested. By supplying my home or work address, telephone number or email address I am giving my consent for **permanent tsb** to contact me in any of those ways in connection with this request.

Signature of first applicant\*

\*Authorised representative of the Business

Date:   /   /

Signature of joint applicant\* (if any)

Date:   /   /

### Keeping you informed (Direct Marketing)

To keep you informed of any benefits, products or services that we offer and for that purpose and the purposes mentioned below, please check the boxes below to indicate the ways you wish to be contacted:

	Applicant 1		Applicant 2	
	Y	N	Y	N
Post	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Online	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mobile phone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Email	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home phone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Text message	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Information provided by you (whether in the application for an Account or otherwise) and any information relating to the conduct of your Account(s) may be used by us to: (i) transmit to you information relating to other products, services, special offers, promotions, competitions run by us or other companies in the **permanent tsb** Group ("Group" means the **permanent tsb** Group, a financial services group principally comprised of banking companies) or (ii) provide such information to other companies in **permanent tsb** Group so that they can transmit to you details of their products, services, special offers, promotions and competitions.

If at any time you change your mind and you wish to amend your contact preferences, you may contact us by writing to FREEPOST F4940, Customer Data Quality (Direct Marketing), **permanent tsb** p.l.c., 56-59 St Stephen's Green, Dublin 2.

**WARNING: If you do not meet the repayments on your credit agreement, your account will go into arrears. This may affect your credit rating, which may limit your ability to access credit in the future.**

Lending criteria, terms and conditions apply. **permanent tsb** plc is regulated by the Central Bank of Ireland.

# Contact Us

**Drop in to**  
**Any of the 77 Local Branches Nationwide**

**Call us on**  
**1890 818 729**

**Visit**  
**[www.permanenttsb.ie/business](http://www.permanenttsb.ie/business)**