
COMMERCIAL LOAN/MORTGAGE/LINE OF CREDIT APPLICATION INSTRUCTIONS

Please download the Ascendia Bank Commercial Loan Application (fillable PDF) and type all information directly onto the form. Please do not handwrite information as this will help prevent handwriting misinterpretations. Carefully review all information provided for accuracy. When completed, save and print the application and contact our Vice President and Commercial Lending Manager, Jonathan Jacobs at 973-636-5888 ext. 5158.

The following items must be completed as instructed:

1. Commercial Application Form - complete all pages and sign.
2. Rent Roll – complete and sign (please provide copies of all current leases).
3. Appraisal Authorization, Certificate and Disclosure – complete and sign.
4. Environmental Risk Questionnaire – complete and sign.
5. Insurance Information and Agreement to Provide Insurance form – complete and sign.
6. Borrowers Blanket Signature Authorization – complete and sign.
7. US PATRIOT Act form – complete and sign (please provide 2 forms of ID).

Also submit:

1. Personal financial statements of borrowers/guarantors (form enclosed).
2. Last three years of personal federal tax returns for each borrower/guarantor plus their W-2's (if applicable).
3. Last three years of business federal tax returns.
4. Copy of Fully Executed Purchase Contract (purchase only).

If Construction Loan Request, also submit:

1. Architectural drawings.
2. Engineering plans (if applicable).
3. Specifications.
4. Detailed construction budget.
5. Construction contract (if applicable).
6. Resume of builder/developer.
7. Subcontract agreements (if applicable).
8. Land acquisition costs and purchase contract (if applicable).
9. Marketing analysis.
10. Pro forma operating statement (if property to be retained and rented).
11. Pro forma profit and loss statement (if property to be sold).
12. All related permits and approvals.

Attached to this application is our Privacy Notice.

COMMERCIAL LOAN/MORTGAGE/LINE OF CREDIT APPLICATION

Borrower Name & Address:

Property Address:

Principal's/Guarantor's Name & Address:

Principal's/Guarantor's Name & Address:

Social Security Number:

Social Security Number:

Daytime Phone Number:

Daytime Phone Number:

Cell Number:

Cell Number:

Email:

Email:

Amount of Loan / Mortgage Requested: _____

Purpose of Loan: _____
(Purchase/Refinance/Construction/Renovation)

You must be represented by legal counsel. Please provide the following:

Attorney Name and Mailing Address:

Phone Number: _____ Email: _____

Fax Number: _____

Title Company Name: _____

Phone Number: _____ Email: _____

ALL LOANS MUST BE REAL ESTATE SECURED AND HAVE PERSONAL GUARANTEES

COMMERCIAL LOAN/MORTGAGE/LINE OF CREDIT APPLICATION

COLLATERAL PROPERTY:

Type of property:

(Single Family/Multi-Family/Mixed Use/Commercial/Industrial/Office/Other) _____

No. of Units: _____ Square footage: _____

Mortgage(s) outstanding (amount): _____ Lender(s): _____

Purchase Price/Estimated Value: _____ Present Owner: _____

If requested, construction funds (amount): _____

PRO FORMA INCOME AND EXPENSE STATEMENT (ANNUAL)

Borrower: _____

Property Address: _____

Property Type: _____ Number of Units: _____

Monthly Rent for All Units: _____ x 12 = Gross Rental Income: _____

Plus: Tenant Contributions or Other Income (Itemize on Back): _____

Less: Vacancy or Rent Loss: _____

Effective Gross Income: _____

Yearly Expenses for Property (All Units):

Real Estate Taxes: _____

Insurance: _____

Electric & Gas: _____

Water & Sewer: _____

Utilities: _____

Repair & Maintenance: _____

Management: _____

Other: _____

Total Expenses: _____

Net Operating Income: _____

**(Effective Gross Income Less Expenses and
Mortgage/debt payments)**

Signature: _____

Print Name: _____

BUSINESS BACKGROUND & HISTORY

Business Name: _____

Type of Business Entity: _____
(Sole Proprietorship/Partnership/LLC/Corporation)

Tax Identification Number: _____

Year Established: _____ Year Incorporated: _____

Number of Employees: _____

If incorporated state number of shares outstanding: _____

President Vice President

Treasurer Secretary

List all stockholders/members and number of shares outstanding/percentage of ownership:

Name	Address	Title	# Shares Owned/% Owned
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name and Address of Accounting Firm (include phone # and name of Representative):

Name and Address of Insurance Agent (include phone # and name of Representative)

Name and Address of Title Company (include phone # and name of Representative):

In the following statement, the words, "I", "me" and "my" mean anyone signing below. "You" and "your" refer to Ascendia Savings Bank.

The foregoing financial statements and any supplementary information are warranted to be true and are furnished to induce you to make the loan applied for which, if made, will be used only for the purpose above stated.

I know that you rely and will continue to rely thereon until written notice of any change therein is received by you. I will give you immediate written notice of any material change in my financial condition, including any lawsuit, begun or threatened, the effect of which may be to materially alter said condition.

I will furnish you with such financial statements and data at such times and with such certification as you may require, without expense to you. You and your agents and accountants may at any time inspect my books and accounts.

You may request credit information about me from others and may furnish credit information about me to others.

I understand that you may request a consumer report about me in connection with my application to you for credit. If I ask, you will tell me whether or not a consumer report was requested and will also tell me the name and address of the consumer reporting agency that furnished it. If you update, review, renew, or extend my loan, you may obtain subsequent reports without telling me.

Name of Borrower:

Name of Guarantor:

Authorized Signature:

Signature:

Title:

Dated _____ 20____

Name of Guarantor:

Dated _____ 20____

Signature:

Dated _____ 20____

RENT ROLL CERTIFICATION

Property Address: _____

Borrower: _____

[illegible]

Rent Roll Certification

I/We certify that the rent roll(s) dated _____ for the property above is/are true and correct.

By: _____ Date: _____

COMMERCIAL APPRAISAL AUTHORIZATION, CERTIFICATION, AND DISCLOSURE

Property Address: _____

Authorization:

I/we hereby authorize Ascendia Bank to have the above property appraised by one of its approved appraisal Companies. In that connection, we will or have, made all of the necessary contacts so that the appraisal representative can have access to the subject property. I/we understand that the Bank does not have to schedule the appraisal until I/we have paid the required appraisal fee.

Please have the appraiser contact the following for access:

Name: _____ Daytime Phone: _____

Email: _____ Cell Phone: _____

Certification:

I/we understand and agree that the appraisal of the subject property is being made solely for the purpose of determining the Bank's position with respect to protecting its interest, and in no manner be construed as an approval or warranty as the soundness, structural components, mechanical structure, etc. of the subject property.

Certifications may be required, prior to closing, from the appropriate local, county, and/or state authority, or private engineer that the individual septic and/or water supply systems are functioning satisfactorily with proper maintenance and are not likely to create an unsanitary condition (as applicable).

Disclosure:

We may order an appraisal to determine the property's value and charge you for this appraisal. We will promptly give you a copy of any appraisal even if your loan does not close. You can pay for an additional appraisal for your own use at your own cost.

Borrower/Title

Date

ENVIRONMENTAL RISK QUESTIONNAIRE
For Real Estate Secured Transactions (to be completed by Applicant)

Applicant's Name(s):				Proposed Loan Amount:			
Street Address of Property to be Used as Collateral:							
City:		County:		State:		Zip Code:	
Person answering questionnaire and relationship to loan:						Telephone #:	
The Property is: (Check all that apply) ☐ to be purchased ☐ to be expanded and/or renovated; ☐ new construction; ☐ to be substantially demolished ☐ used in applicant's present operations; ☐ proposed as collateral for the loan; ☐ a refinance/renewal of an existing GRSB credit; ☐ a refinance of a non-GRSB credit							
Property Type: ☐ Vacant Land; ☐ Farm; ☐ Apartment; ☐ Retail; ☐ Office; ☐ Mixed-Use; ☐ Bar/Restaurant ☐ Gas Station; ☐ Dry Cleaner ☐ Convenience Store; ☐ Light Industrial; ☐ Heavy Industrial; ☐ Hotel/Motel; ☐ Health Care; ☐ Other(describe) _____							
Number of Buildings on Site:				Current Specific Business Use:			
Previous Historic Uses and Dates (attach sheet if necessary):							
Date(s) of Construction:		Land Area (acres)		Total Building Area: (Square feet)			
% Owner Occupied:		% Tenant Occupied:		% Vacant		No. of Rental Units:	
						No. of Tenants:	
The property is served with: (check all that apply) ☐ public water ☐ well water ☐ public sewer ☐ septic system							
Has there ever been an environmental site assessment (ESA) completed for this Property? ☐ YES ☐ NO (If YES, a copy of all ESA's and related environmental reports must be submitted along with this questionnaire)							
						Yes	No
1. Does Applicant, Owner or any Lessee hold a permit or license related to hazardous materials, water discharge, air emissions or any other discharge into the environment associated with this Property?							
2. Has the property ever been used for the generation, handling, storage, transportation or disposal of any hazardous waste or hazardous substance?							
3. Is any portion of the Property listed by any federal, state or local government agency as a site of potential or confirmed environmental contaminations? (i.e. the National Priorities List, the CERCLIS list, Master Site List, RCRA/TSD, RCRA Generator, Leaking UST list (Registered or LUST), or solid waste/landfill lists)?							
4. Has the Property ever been the subject of an environmental cleanup or remediation effort?							
5. Does the Applicant anticipate, or is the Applicant aware of, the requirements of any environmental statute, regulation, orders, ordinance, pending lawsuits or other law, which may require substantial expenditures by the borrower for compliance herewith for this or any other Property?							
6. Is Applicant aware of any environmental liens or activity use limitations that affect the Property's use? How is property heated (explain)?							
7. Has the purchase price of the Property been reduced because of an environmental problem, condition or event?							
8. Is Applicant aware of any other condition or event that potentially may affect the property's market value?							
9. Does the Property contain or has the Property previously contained any of the following?							
(a) underground storage tanks, or aboveground storage tanks (if YES, provide a list including size, age content and capacity)							
(b) electrical transformers, capacitors or any hydraulic equipment/lifts							
(c) evidence of mold, fungal growth, water damage or water intrusion							
(d) wetlands (if YES, attach copies of permits, delineation studies)							
(e) asbestos containing materials (if YES, attach available property surveys)							
(f) pesticides, paints, oils, solvents, planting chemicals or other chemicals used or stored in significant quantities in the regular course of operations							
(g) medical waste materials, biological agents, or radioactive materials present on site							
(h) operating or former oil or gas wells							
10. Is Applicant aware of any adjacent properties or businesses that contain underground storage tanks, use large quantities of chemical products in their regular operations, or are any the subject of any voluntary or government-initiated environmental cleanup efforts?							

The information provided above in response to this questionnaire is true, complete and accurate. Applicant acknowledges that GRSB will rely upon the information provided herein in evaluating applicant's request for an extension of credit and in considering the acceptability of the Property as collateral.

BORROWER/S SIGNATURE: _____
TITLE: _____ **DATE:** _____

Commercial Insurance Checklist

1. Insured to be listed in **exact name of Borrower or Borrowing Entity** and Guarantor(s) (if applicable).
2. **Property Address** must be referenced on all insurance certificates.
3. **Acord Certificate 25 (Evidence of Liability Insurance)** (*Residential, Multi-Family, Commercial Real Estate, Mixed-Use Properties, and Construction*):
 - a. **Combined Single Limit Liability Insurance of \$1,000,000 per occurrence, \$2,000,000 aggregate. Ascendia Bank, Its Successors and/or Assigns (ISAOA), As Their Interests May Appear (ATIMA), 11 Harristown Rd, 2nd Floor, Glen Rock, NJ 07452, to be listed as Certificate Holder, First Mortgagee, Loss Payee, and Additional Insured.**
 - b. **General liability deductible shall not exceed \$10,000.**
 - c. Workman's Comp Insurance of \$1,000,000 employer's liability, if determined necessary by the Bank (only if there are employees or if a guaranteeing entity has employees).
4. **Acord Certificate 28* (Evidence of Commercial Property Insurance)** (*Residential, Multi-Family, Commercial Real Estate, Mixed-Use Properties, and Construction*):
 - a. **Property Insurance in an amount of no less than the loan amount. Ascendia Bank, Its Successors and/or Assigns (ISAOA), As Their Interests May Appear (ATIMA), 11 Harristown Rd, 2nd Floor, Glen Rock, NJ 07452, to be listed as Certificate Holder, First Mortgagee, Loss Payee, and Additional Insured.**
 - b. **For refinances, the policy must have a minimum of 3 months before expiration or a paid receipt for the next year's premium must be provided. For purchases, a paid receipt for the first full year's premium must be provided.**
 - c. **Property deductibles shall not exceed \$10,000.**
 - d. **Business Income Insurance in an amount of no less than 12 months gross rent with valuation actual loss sustained endorsement or a business income limit greater than or equal to 12 months gross rent.**
 - e. The following endorsement must also be listed on the Acord Certificate 28:
 - **Replacement Cost Coverage.**
 - **Equipment Breakdown Coverage (Boiler and Machinery Coverage)** – not required for one to four family residential dwellings.
 - **Ordinance or Law Coverage** – not required for one to four family residential dwellings.

***For Construction Loans, Builder's Risk Coverage via an Acord 27 Certificate is required in lieu of the Acord 28**

5. **Flood Insurance if determined necessary** by the Bank at any time during the loan term. (*Federal Regulation*)
Flood Insurance contents policy may be required if determined necessary by the Bank as UCC's are filed.

The insurance company must be licensed to do business in the State of New Jersey. All insurance shall be in such amounts, form, and by such companies as approved by the Lender (which insurance company shall have a Best's Rating of B+ or better, and Financial Size Category of Class V or higher), with endorsements naming the Lender as a Certificate Holder, First Mortgagee, Loss Payee, and Additional Insured. All insurance shall be prepaid for one year from closing and a **paid receipt is required to accompany the policy.**

INSURANCE INFORMATION AND AGREEMENT TO PROVIDE INSURANCE

I/We have entered into a loan agreement for which I/we will be given a mortgage, lien or security interest in certain assets that I/we own. Accordingly, I/we agree to maintain continuous property insurance coverage which will be equal to or greater than the total outstanding balances of any first and/or subsequent mortgages and this pending loan. Such coverage will be maintained as long as any part of my loan with the Bank remains outstanding and unpaid. **It is understood that, I/we may obtain such property insurance from any agent, broker or other person of my/our choice.**

PROPERTY INSURED:

Street Address: _____

City: _____ State: _____ Zip: _____

Insurance Agent:

Insurance Company:

Name: _____

Name: _____

Address:

Policy #: _____

Policy Dates: _____

Phone #:

Email:

Borrower/Guarantor	Date
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Guarantor	Date
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BORROWER(S) BLANKET SIGNATURE AUTHORIZATION

Borrower(s) Name(s), Address:

Borrower(s) Name(s), Address:

I/WE HEREBY AUTHORIZE YOU TO RELEASE INFORMATION CONCERNING ANY OF THE FOLLOWING:

1. To verify my past and present employment earnings records, bank accounts, stock holdings, and any other assets needed to process my loan application.
2. I further authorize the Bank to order a consumer credit report and verify other credit information, including past and present loan references, and any other liability information.
3. It is understood that a photocopy of this form will also serve as authorization.

The information the lender obtains is to be used in the processing of my loan application. This information may also be obtained in conjunction with a quality control review of the file after the loan has closed.

Borrower/Guarantor

Date: _____

Social Security Number

Borrower/Guarantor

Date: _____

Social Security Number

Borrower/Guarantor

Date: _____

Social Security Number

Borrower/Guarantor

Date: _____

Social Security Number



USA PATRIOT ACT – CUSTOMER IDENTIFICATION VERIFICATION DISCLOSURE

Federal Regulations enacted pursuant to Section 326 of the Patriot Act require all financial institutions to verify the identity of every person who seeks to open an account or become a signatory on an account with the institution. All persons are subject to the identity verification requirements even though they may be a long-term customer of and well known to the bank.

For the purpose of the regulation, an “account” includes every formal banking relationship that entails ongoing services, dealings or transactions. Some examples are a deposit account, loan, trust relationship or safe deposit box rental.

If you request to open an account or become a signatory on an account, and we have not previously verified your identity under the new regulatory requirements, we will request documentary verification of your identity, such as a driver’s license or passport and/or will verify your identity through other nondocumentary methods. Similar identification requirements apply to business entities such as corporations and partnerships

Copies of two forms of ID must accompany this form (the first must be a photo ID, such as driver’s license or passport. The second form must list your name, such as vehicle registration, health card, employee ID or voter registration).

Full Name (include middle initial) _____

Address of Residence _____

SSN _____ Date of Birth _____

Email Address _____

Phone Number (Cell) _____ (Work) _____ (Home) _____

Mother’s Maiden Name _____

Employed By _____ Hire Date _____

Address of Business _____

Type of Business _____ Occupation * _____

Driver’s License # _____ State of Issue _____

Issue Date of License _____ Expiration Date _____

Information for second form of ID (such as example listed above or last four digits of credit card including expiration date)

**Note: If signer is retired, please list former occupation.*

Signature: _____

Date _____

This signature verifies that the above personal information is true and accurate.

PERSONAL FINANCIAL STATEMENT AS OF: _____
SUBMITTED TO: _____

PERSONAL INFORMATION							
APPLICANT(NAME)				CO-APPLICANT (NAME)			
Employer				Employer			
Address of Employer				Address of Employer			
Business Phone No.	No. of Years with Employer		Title/Position	Business Phone No.	No. of Years with Employer		Title/Position
Name of previous employer & position (if with current employer less than 3 yrs.)			No. of Yrs.	Name of previous employer & position (if with current employer less than 3 yrs.)			No. of Yrs.
Home Address				Home Address			
Home Phone No.	Social Security No.		Date of Birth	Home Phone No.	Social Security No		Date of Birth
Name, Phone No. of your Accountant				Name, Phone No. of your Accountant			
Name, Phone No. of your Attorney				Name, Phone No. of your Attorney			
Name, Phone No. of your Investment Advisor/Broker				Name, Phone No. of your Investment Advisor/Broker			
Name, Phone No. of your Insurance Advisor				Name, Phone No. of your Insurance Advisor			

Cash Income & Expenditure Statement For Year Ended _____ (Omit cents)

ANNUAL INCOME	AMOUNT (\$)
Salary (Applicant)	
Salary (Co-Applicant)	
Bonuses & Commissions (Applicant)	
Bonuses & Commissions (Co-Applicant)	
Rental Income	
Interest Income	
Dividend Income	
Capital Gains	
Partnership Income	
Other Investment Income	
Other Income (List)	

TOTAL INCOME:

ANNUAL EXPENDITURES	AMOUNT (\$)
Federal Income and Other Taxes	
State Income and Other Taxes	
Rental payments, Co-op, or Condo Maintenance	
Mortgage Payments	Residential
	Investment
Property Taxes	Residential
	Investment
Interest & Principal Payments on Loans	
Insurance	
Investments (including tax shelters)	
Alimony/Child Support	
Tuition	
Other Living Expenses	
Medical Expenses	
Other Expenses	

TOTAL EXPENDITURES:

Balance Sheet as of _____

ASSETS	AMOUNT \$	LIABILITIES	AMOUNT \$
Cash in this Bank (INCLUDING MONEY MARKET ACCOUNTS, CDs)		Notes Payable to this Bank	
		Secured	
Cash in Other Financial Institutions (List) (INCLUDING MONEY MARKET ACCOUNTS, CDs)		Unsecured	
		Notes Payable to Others (Schedule E)	
		Secured	
		Unsecured	
		Accounts Payable (including credit cards)	
		Margin Accounts	
Readily Marketable Securities (Schedule A)		Notes Due: Partnership (Schedule D)	
Non-Readily Marketable Securities (Schedule A)		Taxes Payable	
Accounts and Notes Receivable		Mortgage Debt (Schedule C)	
Net Cash Surrender Value of Life Insurance (Schedule B)		Life Insurance Loans (Schedule B)	
Residential Real Estate (Schedule C)		Other Liabilities (List):	
Real Estate Investments (Schedule C)			
Partnership / PC Interests (Schedule D)			
IRA, Keogh, Profit-Sharing & Other Vested Retirement Accts.			
Deferred Income (number of years deferred _____)			
Personal Property (including automobiles)			
Other Assets (List):			
		Total Liabilities	
		Net Worth	

CONTINGENT LIABILITIES	YES	NO	AMOUNT
Are you a guarantor, co-maker, or endorser for any debt of an individual, corporation, or partnership?			_____
Do you have any outstanding letters of credit or surety bonds?			_____
Are there any suits or legal actions pending against you?			_____
Are you contingently liable on any lease or contract?			_____
Are any of your tax obligations past due?			_____
What would be your total estimated tax liability if you were to sell your major assets?			_____
If yes for any of the above, give details:			

Schedule A - All Securities (including non-money market mutual funds)							
No. of Shares (Stock) or Face Value (Bonds)	DESCRIPTION	OWNER(S)	WHERE HELD	COST	CURRENT MARKET VALUE	PLEDGED YES / NO	
READILY MARKETABLE SECURITIES (Including U.S. Governments and Municipals)*							
NON-READILY MARKETABLE SECURITIES (closely held, thinly traded, or restricted stock)							

* If not enough space, attach a separate schedule or brokerage statement and enter totals only.

Applicant's Initials_____

Co-Applicant's Initials_____

Schedule B - Insurance						
Life Insurance (use additional sheet if necessary)						
Insurance Company	Face Amount of Policy	Type of Policy	Beneficiary	Cash Surrender Value	Amount Borrowed	Ownership

Disability Insurance	Applicant	Co-Applicant

Schedule C - Personal Residence & Real Estate Investments, Mortgage Debt (majority ownership only)									
Personal Residence		Purchase		Market Value	Present Loan Balance	Interest Rate	Loan Maturity Date	Monthly Payment	Lender
Property Address	Legal Owner	Year	Price						
Investment		Purchase		Market Value	Present Loan Balance	Interest Rate	Loan Maturity Date	Monthly Payment	Lender
Property Address	Legal Owner	Year	Price						

Schedule D - Partnerships (less than majority ownership for real estate partnerships) *						
Type of Investment	Date of Initial Investment	Cost	Percent Owned	Current Market Value	Balance Due on Partnerships: Notes, Cash Call	Final Contribution Date
Business/Professional (Indicate Name):						
Investments (Including Tax Shelters):						

* **Note:** For investments which represent a material portion of your total assets, please include the relevant financial statements or tax returns, or in the case of partnership investments or S-corporation, schedule K-1s.

Schedule E - Notes Payable								
Due to	Type of Facility	Amount of Line	Secured		Collateral	Interest Rate	Maturity	Unpaid Balance
			Yes	No				

Applicant's Initials_____Co-Applicant's Initials_____

Please Answer The Following Questions:

1. Income Tax Returns filed through (date): _____ Are any returns currently being audited or contested?

YesNo

If yes, what year(s)? _____

2. Have (either of) you or any firm in which you were a major owner ever declared bankruptcy?

YesNo

If yes, please provide details:

3. Have you drawn a will?

Yes☐No

If yes, please furnish the name of the executor(s) and year will was drawn: _____ Year: _____

4. Number of Dependents (excluding self) and relationship to applicant:

5. Have you ever had a financial plan prepared for you?

YesNo

6. Did you include two years federal and state tax returns?

YesNo

7. Do (either of) you have a line of credit or unused credit facility at any other institution(s)?

YesNo

If so, please indicate where, how much and name of banker:

8. Do you anticipate any substantial inheritances?

Yes☐No

If yes, please explain:

Representations and Warranties:

The information contained in this statement is provided to induce you to extend or to continue the extension of credit to the undersigned or to others upon the guarantee of the undersigned. The undersigned acknowledge and understand that you are relying on the information provided herein in deciding to grant or continue credit or to accept the guarantee thereof. Each of the undersigned represents, warrants and certifies that the information provided herein is true, correct and complete. Each of the undersigned agrees to notify you immediately and in writing of any change in name, address, or employment and of any material adverse change (1) in any of the information contained in this statement or (2) in the financial condition of any of the undersigned or (3) in the ability of any of the undersigned to perform its (or their) obligations to you. In the absence of such notice or a new and full written statement, this should be considered as a continuing statement and substantially correct. If the undersigned fail to notify you as required above, or if any of the information herein should prove to be inaccurate or incomplete in any material respect, you may declare the indebtedness of the undersigned or the indebtedness guaranteed by the undersigned, as the case may be, immediately due and payable. You are authorized to make all inquiries you deem necessary to verify the accuracy of the information contained herein and to determine the credit-worthiness of the undersigned. The undersigned authorize any person or consumer reporting agency to give you any information it may have on the undersigned. As long as any obligation or guarantee of the undersigned to you is outstanding, the undersigned shall supply annually an updated financial statement. This personal financial statement and any other financial or other information that the undersigned give you shall be your property.

Date

Your Signature

Date

Co-Applicant's Signature (if you are requesting the financial accommodation jointly)

FACTS

WHAT DOES ASCENDIA BANK DO WITH YOUR PERSONAL INFORMATION?



Why?

Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share and protect your personal information. Please read this notice carefully to understand what we do.

What?

The types of personal information we collect and share depend on the product or service you have with us. This information can include:

- Social Security number and account balances
- Payment history and transaction history
- Credit history and checking account information

When you are *no longer* our customer, we continue to share your information as described in this notice.

How?

All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons Ascendia Bank chooses to share; and whether you can limit this sharing.

Reasons we can share your personal information	Does Ascendia Bank share?	Can you limit this sharing?
For our everyday business purposes-- such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No
For our marketing purposes-- to offer our products and services to you	Yes	No
For joint marketing with other financial companies	No	We don't share
For our affiliates' everyday business purposes-- information about your transactions and experiences	No	We don't share
For our affiliates' everyday business purposes-- information about your creditworthiness	No	We don't share
For our affiliates to market to you	No	We don't share
For nonaffiliates to market to you	No	We don't share

Questions?

Call (201)652-8776 or go to www.ascendiabank.com

Who we are

Who is providing this notice?

Ascendia Bank

What we do

How does Ascendia Bank protect my personal information?

To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.

How does Ascendia Bank collect my personal information?

We collect your personal information, for example, when you

- Open an account or apply for a loan
- Make deposits or withdrawals from your account or provide employment information
- Give us your contact information

We also collect your personal information from others, such as credit bureaus, affiliates, or other companies.

Why can't I limit all sharing?

Federal law gives you the right to limit only

- sharing for affiliates' everyday business purposes - information about your creditworthiness
- affiliates from using your information to market to you
- sharing for nonaffiliates to market to you

State laws and individual companies may give you additional rights to limit sharing.

Definitions

Affiliates

Companies related by common ownership or control. They can be financial and nonfinancial companies.

- *Ascendia Bank has no affiliates.*

Nonaffiliates

Companies not related by common ownership or control. They can be financial and nonfinancial companies.

- *Ascendia Bank does not share with nonaffiliates so they can market to you.*

Joint marketing

A formal agreement between nonaffiliated financial companies that together market financial products or services to you.

- *Ascendia Bank doesn't jointly market.*

Other important information

Other Privacy Statement

You can contact Ascendia Bank at 201-652-8776, 973-636-5888, 973-736-0020 or 973-731-7150.