



Business Narrative Form for Self-Employment

This form must be completed by an employee (non-relative) of the borrower’s business, with knowledge and information of the operations and finances of the business. Typical positions held by this employee would include: Controller, Treasurer, V.P. Finance, Finance Manager, Accounting Manager or Human Resources Manager. This form can also be completed by a third-party individual with direct knowledge of the borrower’s business, such as a Certified Public Accountant or an IRS Enrolled Agent.

1. Using the North American Industry Classification System (NAICS) below, please check the industry that best describes this business:

- | | |
|--------------------------------------|---|
| Retail Trade | Mining-Quarrying-Oil & Gas Extraction |
| Wholesale Trade | Administrative-Support-Waste Management Information |
| Accommodation- Food Service | Real Estate-Rental and Leasing |
| Agriculture-Forestry-Fishing-Hunting | Arts-Entertainment-Recreation |
| Construction (Home & Remodeling) | Professional-Scientific-Technical Service |
| Manufacturing | Health Care-Social Assistance |
| Transportation-Warehousing | Finance and Insurance |
| Utilities | Other Services |
| Educational Services | |

2. Name of business:

3. Number of owners:

4. Service or product provided:

5. Date business started:

6. Business legal structure: Partnership Corporation Sub-S Corporation LLC

7. Business location (primary address):

Residence Commercial / Warehouse

8. Number of business locations: 1 2-5 Greater than 5

9. Are these locations: Owned Leased

10. Number of employees: 0-5 6-10 11-25 Greater than 25

11. Describe any machinery or equipment required for buiness operations:

12. Does the business require inventory (raw materias or finished goods) to generate sales? Yes No

If yes, describe the inventory and turnover ratio:

Name

Email Address

Title

Phone Number

Signature

Date

