

To Apply for a Business FirstTermSM Loan or Business FirstLineSM of Credit

Thank you for your interest in applying for a Business FirstTerm Loan or Business FirstLine of Credit.

Please complete the fillable PDF form application on the next page.

Note: *Information about all owners or shareholders with a 20% or greater ownership in the business must be provided. This information can be provided on additional pages, but must be submitted with your application.*

Once completed, please print, sign, and submit your application to us in one of the two following ways:

By Mail:

First Hawaiian Bank
Attn: Credit Administration Division
P.O. Box 2400
Honolulu, HI 96804-9979

In Person:

Take your completed application to any First Hawaiian Bank branch. To locate a branch near you, visit <https://locations.fhb.com>.

If you prefer to apply by phone, please call 643-LOAN (5626) if you are in the State of Hawaii, or 1 (800) 403-7167 if you are in Guam or the Commonwealth of the Northern Mariana Islands.

Depending on the nature of your request, we may require you to provide photocopies of supporting documents such as the following:

- **Financial Information:** Last two years' federal tax returns (including all schedules), personal financial statements from the business's owners/guarantors, and/or business financial records (including all schedules and an interim statement).
- **Business Formation Documents:** Articles of Incorporation, Articles of Organization, Operating Agreements, LLC/LLP/Partnership Agreements, By-Laws, and/or Corporate Resolutions
- **For Guam/CNMI businesses:** Current business license

(Application follows on the next page)



First Hawaiian Bank

Business Credit Application and Agreement

Application for (select all that apply):

Business FirstTermSM Loan (Loans of \$2,500 - \$75,000 only)

Loan Purpose _____

Amount Requested \$ _____

Business FirstLineSM of Credit (Lines of \$5,000 - \$75,000 only)

Credit Line Requested:

\$ _____

Business Yes-CheckSM

Coverage is available up to \$10,000. Only available with Business FirstLine up to \$75,000

FHB Business Checking Account #: _____

Please print clearly with black or blue pen.

If you are applying for an amount of \$10,000 or more, additional information may be required.

Tell Us About Your Business

Business Legal Name (REQUIRED)			Federal Tax ID number (REQUIRED)			Census Tract (Guam/CNMI only)		
Country of Formation (REQUIRED)								
Street Address (REQUIRED - NO P.O. BOX, WE ARE REQUIRED TO OBTAIN YOUR PHYSICAL ADDRESS)				City		State		Zip
Billing Address (if different from street address)				City		State		Zip
Gross Annual Revenue* (REQUIRED)		Years in Business (REQUIRED)	# of Employees	Legal Structure (REQUIRED - Check one): <input type="checkbox"/> Corporation <input type="checkbox"/> General Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Other: _____			Type of Business, Describe (REQUIRED - contracting, restaurant, etc.)	
Business Checking Institution			Current Balance \$		Does Your Business <input type="checkbox"/> Accept Credit Cards <input type="checkbox"/> Issue Gift Cards <input type="checkbox"/> Lease Vehicles and/or Equipment			*NOTE: Personal tax returns and/or business financial records may be requested.

Tell Us About Yourself

Complete this section for each owner or shareholder with 20% or more ownership. Attach additional pages if necessary.

Name (REQUIRED - First, Middle, Last)			% Ownership		Social Security Number (REQUIRED)		Date Of Birth (REQUIRED)		Cell Phone ()
Street Address (REQUIRED)			<input type="checkbox"/> Own <input type="checkbox"/> Monthly Payment <input type="checkbox"/> Rent \$		City (REQUIRED)		State (REQUIRED)		Zip (REQUIRED)
You Must Be One Of The Following (check one): <input type="checkbox"/> President <input type="checkbox"/> Partner <input type="checkbox"/> Owner			For Sole Proprietorship Only (REQUIRED) Are you a U.S. Citizen? (check one) <input type="checkbox"/> Yes <input type="checkbox"/> No, state Country of Citizenship _____			Are you a Permanent Resident Alien? (check one) <input type="checkbox"/> Yes <input type="checkbox"/> No			
Years You Have Been An Owner		Gross Monthly Income* (REQUIRED)		*NOTE: Alimony, child support or maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.					
Personal Deposits \$			Real Estate Value \$		Other Assets \$		Email Address (Optional: If you want to receive account information and special offers by email.)		

Please Sign Below

The person signing this Application certifies that (i) s/he is authorized to execute and deliver this Application and the agreements set forth or referred to herein on his/her behalf and on behalf of the Business named on this Application, (ii) s/he is authorized to receive all communications from the bank, (iii) the Application is for business credit only and not consumer credit, and (iv) all information and documents submitted are true, correct, and complete.

By signing below, the Business and the individual signing understand that they will be jointly liable for repayment of all amounts due on the Business FirstLine, the Business FirstTerm, or the Business Yes-Check. The person signing this Application authorizes First Hawaiian Bank ("Bank"), both now and in the future, to obtain consumer credit reports in his/her name as an individual, to obtain business credit reports in his/her name as an individual, to obtain business credit reports on the Business, to make available to and to obtain from other subsidiaries of First Hawaiian, Inc., information relating to both his/her and the Business's financial conditions, and to provide credit bureaus and others with information about the Bank's experience with him/her and the Business. The person signing this Application and the Business acknowledge that if additional information becomes available which would have influenced the Bank's decision to approve this Application prior to the closing of the transaction, the Bank reserves the right to withdraw such approval. If the Bank approves this Application, the Business and the person signing this Application separately agree to abide by all the terms and conditions of any applicable agreements for the Business FirstLine, the Business FirstTerm, or the Business Yes-Check Accounts, including but not limited to any promissory note and/or the Business FirstLine Agreement, or Business Yes-Check Agreement, copies of which will be provided upon approval. The person signing this Application understands that for final approval, additional agreements may need to be signed. All references in the Business FirstLine Agreement to "you," "your," and "Borrower" shall mean and include the individual signing below, in such person's individual capacity.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person or business entity that opens an account. **What this means to you:** When you open an account, we will ask for your name, address, federal taxpayer identification number, date of birth (if applicable), and other information that will allow us to identify you.

X INITIAL HERE _____ (to acknowledge personal liability on the account as described above)

Signed individually and on behalf of the Business

Print Name

Date

Commercial Loan Appraisal Notice

Notice of Right to Receive Copy of Appraisal Report. If the loan or line of credit you are applying for will be secured by a first lien on a dwelling, we may order an appraisal to determine your property's value in connection with your application for credit, and charge you for the appraisal. We will promptly give you a copy of any appraisal, even if your application is denied or withdrawn. You will have a minimum of three business days to review your appraisal before you sign your credit documents. You can pay for an additional appraisal for your own use at your own cost.

Bank Use Only

New Account Number			Close And Convert #		
Approved <input type="checkbox"/> Yes <input type="checkbox"/> No	Approved Credit Limit \$	Approved By	Employee Number	Branch Number	Date

