SME Business Lending

Application Form Republic of Ireland

www.bankofireland.com/business

NOTICE: Under the Credit Reporting Act 2013 lenders are required to provide personal and credit information for credit applications and credit agreements of €500 and above to the Central Credit Register. This information will be held on the Central Credit Register and may be used by other lenders when making decisions on your credit applications and credit agreements.

When the Central Credit Register goes live in 2018, you will be entitled to:

- get a copy of your credit record from the Central Bank
- ► correct any errors on your credit record
- ► tell the Central Bank if you suspect you may have been impersonated
- ► ask the Central Bank to add a short explanation written by you to your credit record

To learn more about the register, and your rights and duties under the Credit Reporting Act 2013, please see www.centralcreditregister.ie

In order to provide you with a timely response and to allow us assess risk fairly and consistently, we may use automated decision making. If you do not agree with the result, you have the right to provide us with your point of view and have those decisions reviewed by a member of our team.

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PART 3 Application Details

PART 4 (i) Customer Identification Form

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Three easy steps to applying for business lending with Bank of Ireland

- 1. Arrange a meeting with your Business Adviser at the branch
- 2. Complete the enclosed Application Form in full
- **3.** Gather any additional supporting documentation or information that may be required by the Bank (Your Business Adviser will inform you if the Bank have any additional requirements)

Credit Application Assistance

To help you with your request for credit, please refer to the following websites:

 $www.business banking.bank of ireland.com/business-supports/guide-to-obtaining-credit\\ www.creditreview.ie/Publications.aspx$

Definition of Small and Medium-sized Enterprises (SMEs)

The SME Regulations apply to "micro, small and medium sized enterprises" and the SME Regulations define these enterprises as follows:

- "micro and small enterprise" means an enterprise which employs fewer than 50 persons and which has either or both of the following:
 - (1) an annual turnover which does not exceed €10 million
 - (2) an annual balance sheet total which does not exceed €10 million;
- "micro, small and medium-sized enterprise" means an enterprise which employs fewer than 250 persons and which has either or both of the following:
 - (1) an annual turnover not exceeding €50 million
 - (2) an annual balance sheet total not exceeding €43 million.

SME Business Lending Application FormRepublic of Ireland

Bank of Ireland **⊗**

PLEASE COMPLETE IN BLOCK CAPITALS

Thank you for your recent enquiry in relation to credit facilities. In order to progress your application you will need to arrange a meeting with your Bank of Ireland Business Adviser and complete this Business Lending Application Form. You can complete this form with the assistance of your Business Adviser during this meeting or with the help of a Business Professional.

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

PART 1: BUSINESS DETAIL	.S			
Please tell us about your busine	ss. This information will assist us in prov	viding a professiona	I timely response.	
Business Name	Com	npany Registration N	lo.	
Trading Name (if different from above)	Company inco	orporated in (Countr	y)	
(II dillerent Irom above)		No. of Outle	ets	
Business Address				
Contact Person	Prin	mary Business Activ	ity	
Email		In Business Sin	ce Year	s Months
Telephone		Customer Sin	ce Year	s Months
Mobile		No. of Employees	As at	
Best Contact Time	Busines	ss Premises Status	Owned Lease	d Rented
	Business Type DAC (Designated Activity	ty Co.) Unlimited	Co. Ltd Co.	Sole Trader
	Other	specify		(e.g. Partnership)
Main Bank Account Details				
Sort Code				
BUSINESS OWNERSHIP DET	TAILS			
List the names of all individuals	TAILS who ultimately own or control 25% or m ver the management of the Company	nore of the shares or	voting rights in th	e Company
List the names of all individuals	who ultimately own or control 25% or m		voting rights in th	
List the names of all individuals or otherwise exercises control o	who ultimately own or control 25% or m ver the management of the Company	s No		
List the names of all individuals or otherwise exercises control of 1. Owner Name	who ultimately own or control 25% or m ver the management of the Company	s No	Irish Resident	Yes No
List the names of all individuals or otherwise exercises control of the control o	who ultimately own or control 25% or m ver the management of the Company	s No	Irish Resident Date of Birth	Yes No
List the names of all individuals or otherwise exercises control of the control o	who ultimately own or control 25% or m ver the management of the Company Director Yes	s No	Irish Resident Date of Birth Percentage Shareho	Yes No
List the names of all individuals or otherwise exercises control of the control o	who ultimately own or control 25% or m ver the management of the Company Director Yes	s No	Irish Resident Date of Birth Percentage Shareho Irish Resident	Yes No olding Yes No
List the names of all individuals or otherwise exercises control of the control o	who ultimately own or control 25% or m ver the management of the Company Director Yes	es No	Irish Resident Date of Birth Percentage Shareho Irish Resident Date of Birth	Yes No Olding Yes No Olding
List the names of all individuals or otherwise exercises control of the control o	who ultimately own or control 25% or m ver the management of the Company Director Yes	es No	Irish Resident Date of Birth Percentage Shareho Irish Resident Date of Birth Percentage Shareho	Yes No Iding Yes No Iding
List the names of all individuals or otherwise exercises control of the control o	who ultimately own or control 25% or m ver the management of the Company Director Yes	s No	Irish Resident Date of Birth Percentage Shareho Irish Resident Date of Birth Percentage Shareho Irish Resident	Yes No Olding Yes No Olding Yes No
List the names of all individuals or otherwise exercises control of the control o	who ultimately own or control 25% or m ver the management of the Company Director Yes	es No	Irish Resident Date of Birth Percentage Shareho Irish Resident Date of Birth Percentage Shareho Irish Resident Date of Birth	Yes No Iding Yes No Iding Yes No Iding
List the names of all individuals or otherwise exercises control of the control o	who ultimately own or control 25% or m ver the management of the Company Director Yes Director Yes	es No	Irish Resident Date of Birth Percentage Shareho Irish Resident Date of Birth Percentage Shareho Irish Resident Date of Birth Percentage Shareho Date of Birth	Yes No Iding Yes No Iding Yes No Iding

BUSINESS OWNERSHIP DETAILS CONTINUED...

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 this Company

1. Company Name % of shares owned in the Company

Registered No.

2. Company Name % of shares owned in the Company

Registered No. (If more fields are required, please photocopy page)

BUSINESS BORROWING & SAVINGS DETAILS

BORROWINGS Financial Institution Amount Outstanding (000's) Monthly Repayments

Overdraft

Business Cards

Loans

(incl. Credit Union

Leasing/Hire Purchase

Commercial Mortgage

Other Financial Commitments

(e.g. Forward Contracts, Bank Guarantees etc.)

SAVINGS & INVESTMENTS

Financial Institution Amount Held (000's)

Savings

Deposits

Other

Investments

Investment Accounts

Shares

Other

Property Yes No Current Property Value

Mortgage Outstanding Financial Institution

BUSINESS FINANCIAL DETAILS

Period Ending Full Year Accounts Yes No

Accounts Type Audited Auditor's Name Certified Management Other

Value (000's) Value (000's)

Sales Turnover Interest

Gross Profit Depreciation

Net Profit Tax

Drawings

BUSINESS FINANCIAL DETAILS CONTINUED...

Current Values

Assets Value (000's) Liabilities Value (000's)

Land & Buildings Creditors

Machinery & Equipment VAT / PAYE / PRSI

Furniture & Fittings Other

Stock

Debtors Other

Cash Tax Status (Tax up to date) Yes No

Deposits Is a Revenue Agreement in place Yes No

Other Monthly Amount of Revenue Agreement

Total Assets

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 its owners. These details will help us meet your current needs.

PERSONAL DETAILS Principal Business Owner

Name Time with Bank Years Months

Address No. of Dependants

Age Range From To

Residential Status Owner Tenant

Account Number Living with Parents Other

Sort Code No. of Years at Address

Contact Details Estimated Value of Home

Email Annual Salary

Landline Salary Payment Frequency

Mobile Previous Address

(If less than 3 years at current address)

Best Contact Time

Date of Birth

Personal Public

Service Number

(PPSN)*

*We use this to check the Central Credit Register, which became law in 2019. Documentary evidence of your PPSN will be required.

PERSONAL FINANCIAL DETAILS Principal Business Owner

BORROWINGS Financial Institution Amount Outstanding (000's) Monthly Repayments

Mortgage

Personal Loan

Motor Loan

Overdraft

Credit & Other Cards

Tax Liability

Other

SAVINGS & INVESTMENTS

Financial Institution Amount Held (000's)

Savings

Deposits

Other

Investments

Investment Accounts

Life Assurance

Shares

Pension

Property

(other than family home)

Please indicate current property value

Other

PERSONAL DETAILS Second Business Owner

Time with Bank Name Years Months

No. of Dependants **Address**

> Age Range From То

> **Residential Status** Owner Tenant

Living with Parents **Account Number** Other

Sort Code No. of Years at Address

Contact Details Estimated Value of Home

Email Annual Salary

Landline Salary Payment Frequency

Mobile **Previous Address**

Best Contact Time

Date of Birth

Personal Public

Service Number

(PPSN)*

*We use this to check the Central Credit Register, which became law in 2019. Documentary evidence of your PPSN will be required.

(If less than 3 years at current address)

PERSONAL FINANCIAL DETAILS Second Business Owner

BORROWINGS Financial Institution Amount Outstanding (000's) Monthly Repayments

Mortgage

Personal Loan

Motor Loan

Overdraft

Credit & Other Cards

Tax Liability

Other

SAVINGS & INVESTMENTS

Financial Institution Amount Held (000's)

Savings

Deposits

Other

Investments

Investment Accounts

Life Assurance

Shares

Pension (other than family home)

Property

(other than family home)

Please indicate current property value

Other

PART 3: APPLICATIONS DETAILS

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

APPLICATION DETAILS

FACILITY 1	Overdraft	Loan	FACILITY 2	Overdraft	Loan
	Other			Other	
Amount Required			Amount Required		
Repayment Period	Years	Months	Repayment Period	Years	Months
Purpose of Facility (e.g. Working Capital)			Purpose of Facility (e.g. Working Capital)		
Loan Repayment Frequency (e.g. Monthly)			Loan Repayment Frequency (e.g. Monthly)		
Loan First Repayment Date			Loan First Repayment Date		
Do you foresee any additional requirement over the coming 12 m	Yes	No	If yes, please provide details		

APPLICATION DETAILS (CONTINUED)

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 Agents etc. and / or other Specialist Funds.

APPLICATION DETAILS CONTINUED...

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 Business Adviser will tell you what further information is required to ensure a speedy decision.

Management Accounts

Certified/Audited Accounts

Cash Flow Statement/Projections

Business Plan

Aged Debtors Listing

Aged Creditors Listings

Tax Clearance Certificate

Other

SECURITY/COLLATERAL PROPOSED

Your Business Adviser will inform you if security is required.

BANK USE ONLY

What is the turnaround time that has been advised to the customer?

PART 4 (I): IDENTIFICATION FORM - PERSONAL CUSTOMER 1

Please photocopy where required

This form should be completed by the individual presenting the Identification & Verification Documents. (The Bank may also, at its discretion, require any of the Beneficial Owners to complete this form). Two copies of the Form are enclosed in this Application Pack.

Account Name

Person to be Identified		A/c No.		
Relationship of this person to the above a	account (please tick all applicable)			
Sole Trader	Trustee	Elected Officer / Committee Member		
Partner	Authorised Signatory Management Committee M			
Director	Beneficial Owner			
Signed		Date 20		

BANK USE	ONLY			
Is person to b	e identified an existing Bank of Ireland Group Customer?	Yes		No
IF YES:	Name of Branch/Group Entity			
	ID Documentation for the person named above must be confirmed in o	rder.		
	Anti Money laundering Documentation Screen completed for the above according	ount.		Yes
	Date Opened			
	Is AML ID&V documentation held and in order and has AML Documentation	Screen been fully completed?	Yes	No
	With the person's acknowledgment that he / she has been provided with a copy of the Data Protection Summary as of in this application form, you can request the Branch/Group Entity who has established his/her identity to update the A Documentation Screen or provide copies of the ID documentation for your records or you can request him/her to provincessary ID documentation.			
IF NO:	Name and current permanent address of person named overleaf must be vertical theoretical that there been face to face contact with the person being identified?	rified in line with procedures.	Yes	No
	If NO , specify method of contact (two forms of address verification must be obtained)			
	Address Verification 2x method(s) used (for non Face to Face only)			
	Anti Money laundering Documentation Screen completed for person named	above.		Yes
	Signed (Staff Member)	Staff Number		
	Date			
	Cop	pies of ID Material(s) must be at	tached to	o this Form

PART 4 (I): IDENTIFICATION FORM - PERSONAL CUSTOMER 2

Please photocopy where required

This form should be completed by the individual presenting the Identification & Verification Documents. (The Bank may also, at its discretion, require any of the Beneficial Owners to complete this form). Two copies of the Form are enclosed in this Application Pack.

Account Name

Person to be Identified		A/c No.		
Relationship of this person to	the above account (please tick all applicable)			
Sole Trader	Trustee	Elected Officer / Committee Member		
Partner	Authorised Signatory	Management Committee Member		
Director	Beneficial Owner			
Signed		Date 20		

IF YES:	Name of Prench/Croup Entity				
IF YES:	Name of Branch/Group Entity ID Documentation for the person named above must be confirmed in a	ordor			
	Anti Money laundering Documentation Screen completed for the above acc			Yes	
	Date Opened				
	Is AML ID&V documentation held and in order and has AML Documentation	n Screen been fully completed?	Yes	No	
	With the person's acknowledgment that he / she has been provided with a copy of the Data Protection Summary as detailed in this application form, you can request the Branch/Group Entity who has established his/her identity to update the AML Documentation Screen or provide copies of the ID documentation for your records or you can request him/her to provide the necessary ID documentation.				
IF NO:	Name and current permanent address of person named overleaf must be v Has there been face to face contact with the person being identified?	verified in line with procedures.	Yes	No	
	If NO , specify method of contact (two forms of address verification must be obtained)				
	Address Verification 2x method(s) used (for non Face to Face only)				
	Anti Money laundering Documentation Screen completed for person named	d above.		Yes	
	Signed (Staff Member)	Staff Number			
	Date	Staff Number ppies of ID Material(s) must be at	tached t	to f	

PART 4(II): AUTHORISATION AND INFORMATION/NOTIFICATIONS ON USE OF PERSONAL DATA

This Form must be completed by all Shareholder(s)/Owner(s) who have completed the Personal Details Section in Part 2.

Where more than one applicant, this declaration is to be signed by all parties. (Note: applicants must sign form if personal details are provided.)

Consents required under consumer legislation

The information I am supplying on this application will be used for the purpose of providing me with the service I have requested. By supplying the Bank with my home or work telephone or email address I am giving my consent to Bank of Ireland to contact me in any of those ways in connection with this request.

Yes No

If you do not provide your consent the Bank may not be able to contact you in relation to this application and any subsequent service we may provide.

Data Protection:

I/We understand that – unless the Bank has told me/us differently - the provision of my/our personal details by me/us to the Bank for the purposes of this application is a contractual requirement and/or necessary for the Bank to comply with its legal obligations. By signing this form, I/we acknowledge that I/we have read Bank of Ireland's Data Privacy Summary provided with this application. Please note that more detailed information is available in the full Bank of Ireland Data Privacy Notice which is available on request or at www.bankofireland.com/privacy. This notice is a guide to how the Bank of Ireland Group processes personal data.

Marketing Preferences

Please note that if you are an existing Bank of Ireland Group customer, we will continue to respect your marketing preferences with us. If for any reason you do not want to be contacted for marketing purposes by us, please contact us on 01 688 3674.

If you are not already a Bank of Ireland Group customer we will not contact you for marketing purposes unless you tell us you would like to be contacted. You can let us know this by contacting us on 01 688 3674.

To the Bank of Ireland Group

SIGNATURE(S)

- 1. Where this application is an application for facilities, I/we confirm that I/we am/are not less than 18 years of age.
- 2. I/we certify the accuracy of the information in the event of any future applications by me/us (whether oral or written) for a facility, unless I/we expressly advise you to the contrary at the time of any such future application.
- 4. I/We understand if the loan I/we apply for involves the Strategic Banking Corporation of Ireland (SBCI) it will be necessary to share the information (including personal information) collected about me/us for the purposes of this application with the SBCI, and for the Bank to access and process the information (including personal information) collected about me/us by the SBCI. The processing and sharing of such information is based on the following
 - (a) it being necessary for the purposes of the Bank's legitimate interests,
 - (b) it being necessary in order to take steps so that your application for this loan can be considered before a loan agreement can be entered into between us.
- 5. Please read the Personal Data Notice from the Strategic Banking Corporation of Ireland set out below.
- 6. As part of the application process and ongoing loan management I/we understand you will carry out credit checks and share information with the Irish Credit Bureau or other credit reference agencies. I/we understand they will keep a record of this information and may give it to other financial institutions that I/we apply to for credit facilities. I/we confirm I/we have read the Notice from the Irish Credit Bureau set out below.
- 7. In the event of a facility being approved by the Bank and accepted by me/us and following a request to drawdown the facility by me/us, I/we authorise the Bank to make the facility available and to put the appropriate repayment schedule into effect.
- 8. I/We agree that the facility (and any other facilities as may be granted by the Bank at your discretion) shall be subject to the terms and conditions and specific provisions detailed in the Bank's Credit Agreement, once issued.

SIGNATURE(S)	
Applicant 1.	Date 20
Applicant 2.	Date 20
Applicant 3.	Date 20
Applicant 4.	Date 20
BANK USE ONLY	
Branch	NSC
Witnessed by	
	Date 2 0
Application No.	Date2_0

WARNING: IF YOU DO NOT MEET THE REPAYMENT ON YOUR CREDIT FACILITY AGREEMENT, YOUR ACCOUNT WILL GO INTO ARREARS. THIS MAY AFFECT YOUR CREDIT RATING, WHICH MAY LIMIT YOUR ABILITY TO ACCESS CREDIT IN THE FUTURE.

WARNING: YOU MAY HAVE TO PAY CHARGES IF YOU REPAY EARLY, IN FULL OR IN PART, A FIXED-RATE CREDIT FACILITY.

CREDIT REFERENCE AGENCIES

As part of the application process and on going loan management we will carry out credit checks and credit scoring and share information with the Central Credit Register (CCR), Irish Credit Bureau (ICB) and/or other credit reference agencies. Those agencies may keep a record of this information and may give it to other financial institutions that you apply to for credit facilities. The ICB uses Legitimate Interests (GDPR Article 6 (f)) as the legal basis for processing of your personal and credit information. These Legitimate Interests are promoting greater financial stability by supporting a full and accurate assessment of loan applications, aiding in the avoidance of over-indebtedness, assisting in lowering the cost of credit, complying with and supporting compliance with legal and regulatory requirements, enabling more consistent, faster decision-making in the provision of credit and assisting in fraud prevention. Please review ICB's Fair Processing Notice which is available at http://www.icb.ie/pdf/Fair Processing Notice.pdf.

PERSONAL DATA NOTICE FROM THE STRATEGIC BANKING CORPORATION OF IRELAND

The information, including personal data, provided on this application may be disclosed by the Bank to the Strategic Banking Corporation of Ireland ("SBCI") for the purposes of: (i) determining eligibility for the particular SBCI Scheme; (ii) anti-money laundering / financing of terrorism or fraud; (iii) the Bank and SBCI's reporting functions in accordance with the Scheme; and (iv) conducting relevant surveys by or on behalf of the SBCI. Such processing is undertaken pursuant to the SBCI's statutory purposes and in relation to personal data that it obtains, the SBCI acts as data controller for the purposes of applicable data protection law. The SBCI may also disclose the information to its respective advisors, contracted parties, delegates and agents, and the SBCI's own funders (details of which are available at: https://sbci.gov.ie/). For further information on how the SBCI handles personal data, including information about your data protection rights (in respect of the SBCI) and the contact details of the SBCI's data protection officer, please refer to the SBCI's data protection statement which is available at: https://sbci.gov.ie.