



# Franchisee Loan Application

This Application may be used by U.S. Bank National Association and its affiliates. Any of the foregoing may be referred to herein as "U.S. Bank."

Each shareholder, partner or member owning 25 percent or more interest in the Business Applicant must sign a personal guaranty. A minimum of 1 guarantor is required regardless of percent ownership (unless loan is to an individual). Additional guaranties may be required. \*California only: A General Partner shall not be required to provide a personal guaranty if the loan is secured by real property.

## BUSINESS INFORMATION

Business Applicant's Name (exact legal name)			Affiliated Business Names (exact legal name and Tax Payer ID Number)		
Street Address	City	State	Zip Code	Mailing Address (if different than address listed)	
Taxpayer ID Number	Year Business Incorporated	Number of Years as an Operator	Annual Sales \$		
Business Type: <input type="checkbox"/> Individual <input type="checkbox"/> C-Corporation <input type="checkbox"/> General Partnership <input type="checkbox"/> Nonprofit Organization <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Professional Association <input type="checkbox"/> Sub-S Corporation <input type="checkbox"/> Series LLC <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Other _____					
Operator Name		Business Phone ( ) ( )		Business Fax ( ) ( )	
E-Mail Address		Mobile Phone			
Date of Most Recent Business Review:					
Results: <input type="checkbox"/> Eligible <input type="checkbox"/> Ineligible Explain:					

## OWNERSHIP INFORMATION

Name	Social Security #	Date of Birth	Title	Percent Ownership	Number of years in this line of business	Monthly Housing Payment

## LOAN REQUEST

**TERM LOAN**      Amount Requested: \_\_\_\_\_

5 Years       7 Years       Other \_\_\_\_\_

Rate Option:     Fixed             Floating

Multi-Advance     Yes             No

**LINE OF CREDIT\***      Amount Requested: \_\_\_\_\_

\* Note: \$10,000 per site (available only if financing is provided by U.S. Bank for the same location)

**EQUIPMENT REVOLVER\***      Amount Requested: \_\_\_\_\_

\* Note: \$50,000 per site (available only if financing is provided by U.S. Bank for the same location)

## LOAN PURPOSE & COLLATERAL

Loan Purpose (Include Store # and Address where funds will be utilized)	
Collateral Available* (List Store # and Address)	

\*Loans will generally be secured by all business assets unless specific assets, acceptable to U.S. Bank, are pledged. Please describe fully any such specific assets that you wish to use as collateral. Please note which assets, if any are pledged as collateral for other loans.

Please provide the following information for each store you currently own and any locations being purchased. Please feel free to copy this page if additional space is needed.

### STORE INFORMATION - BORROWER

Name of Legal Entity Owning the Store				Store Address		
Purchase Date	Open Date	National Store Number	Franchise Expiration Date	Lease Expiration Date	Annual Lease Payment	
Type of Store - <input type="checkbox"/> Free Standing <input type="checkbox"/> Walmart <input type="checkbox"/> Other _____				Has the Store been rebuilt? <input type="checkbox"/> Yes When?: _____ <input type="checkbox"/> No		
Has the Store experienced any sales interruptions in the past 2 years? <input type="checkbox"/> Yes Explain: <input type="checkbox"/> No						

Name of Legal Entity Owning the Store (if different than Borrower)				Store Address		
Purchase Date	Open Date	National Store Number	Franchise Expiration Date	Lease Expiration Date	Annual Lease Payment	
Type of Store - <input type="checkbox"/> Free Standing <input type="checkbox"/> Walmart <input type="checkbox"/> Other _____				Has the Store been rebuilt? <input type="checkbox"/> Yes When?: _____ <input type="checkbox"/> No		
Has the Store experienced any sales interruptions in the past 2 years? <input type="checkbox"/> Yes Explain: <input type="checkbox"/> No						

Name of Legal Entity Owning the Store (if different than Borrower)				Store Address		
Purchase Date	Open Date	National Store Number	Franchise Expiration Date	Lease Expiration Date	Annual Lease Payment	
Type of Store - <input type="checkbox"/> Free Standing <input type="checkbox"/> Walmart <input type="checkbox"/> Other _____				Has the Store been rebuilt? <input type="checkbox"/> Yes When?: _____ <input type="checkbox"/> No		
Has the Store experienced any sales interruptions in the past 2 years? <input type="checkbox"/> Yes Explain: <input type="checkbox"/> No						

Name of Legal Entity Owning the Store (if different than Borrower)				Store Address		
Purchase Date	Open Date	National Store Number	Franchise Expiration Date	Lease Expiration Date	Annual Lease Payment	
Type of Store - <input type="checkbox"/> Free Standing <input type="checkbox"/> Walmart <input type="checkbox"/> Other _____				Has the Store been rebuilt? <input type="checkbox"/> Yes When?: _____ <input type="checkbox"/> No		
Has the Store experienced any sales interruptions in the past 2 years? <input type="checkbox"/> Yes Explain: <input type="checkbox"/> No						

Name of Legal Entity Owning the Store (if different than Borrower)				Store Address		
Purchase Date	Open Date	National Store Number	Franchise Expiration Date	Lease Expiration Date	Annual Lease Payment	
Type of Store - <input type="checkbox"/> Free Standing <input type="checkbox"/> Walmart <input type="checkbox"/> Other _____				Has the Store been rebuilt? <input type="checkbox"/> Yes When?: _____ <input type="checkbox"/> No		
Has the Store experienced any sales interruptions in the past 2 years? <input type="checkbox"/> Yes Explain: <input type="checkbox"/> No						



**BUSINESS DEBT SUMMARY - BORROWER AND AFFILIATES (includes Capitalized Leases)**  
**(or you may attach a copy of a debt summary if available)**

Store Number	Creditor Name	Current Balance	Origination Date	Maturity Date	Monthly Payment	Interest Rate	Collateral Pledged	Will this debt be replaced with the proposed facility?
								<input type="checkbox"/> Yes <input type="checkbox"/> No
								<input type="checkbox"/> Yes <input type="checkbox"/> No
								<input type="checkbox"/> Yes <input type="checkbox"/> No
								<input type="checkbox"/> Yes <input type="checkbox"/> No
								<input type="checkbox"/> Yes <input type="checkbox"/> No
								<input type="checkbox"/> Yes <input type="checkbox"/> No
								<input type="checkbox"/> Yes <input type="checkbox"/> No

If proposed facility is replacing existing debt, please provide: Lender Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

BUSINESS CONTACT INFORMATION			
	Contact Name	Company	Phone Number
Regional Controller			
Business Accountant			
Business Attorney			
Business Insurance Agent			

DEPOSITORY ACCOUNT INFORMATION				
Financial Institution	Type of Account	Current Balance	Average Balance	Would you like to move the account to U.S. Bank?
		\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
		\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
		\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No

RELATED BUSINESS ISSUES	
Has the Applicant or any Guarantor or Co-applicant ever declared bankruptcy?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the Business Applicant or any Guarantor or Co-applicant a party to any claim or lawsuit?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there any state or federal tax liens filed against the Business Applicant or any Guarantor or Co-applicant?	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Please sign and date all documents.**

- McDonald's Franchisee Loan Application.
- Completed Personal Financial Statement (All Shareholders with ownership of 25% or more).
- Consolidated Fiscal Year-End Balance Sheet Profit and Loss Statement(s) (for all entities including management companies), as well as by entity/store, for the past 2 years (3 years are required for loan requests over \$1MM). If purchasing an existing store, include the past two fiscal year end and current interim Profit and Loss Statement from the selling operator.
- Most Recent Interim Consolidated Balance Sheet and Consolidated and Individual Profit and Loss Statements.
- Trailing twelve month Profit and Loss Statements, consolidated and by store (if available).
- Most Recently Filed Individual Federal Tax Return (All Shareholders with ownership of 25% or more).
- Two years of Pro-forma Profit and Loss Statements (if proceeds will be used for acquisition, construction, rebuild or relocation).
- Purchase and Sale Agreement (if proceeds will be used for acquisition).
- Detailed list of Project Costs and Budget (if proceeds will be used for equipment, construction, rebuild or relocation).

**AUTHORIZATION:** Each Business Applicant and each person or entity signing this Application or an Application Addendum Form ("Signer") certifies that all information provided by the Business Applicant and the Signer is true and complete and authorizes U.S. Bank to 1) obtain credit and employment information about the Business Applicant and Signer; 2) obtain credit reports and make any inquiries U.S. Bank considers appropriate in connection with this application or review of this loan account from time to time; 3) make U.S. Bank's experience with this loan account and information available to credit bureaus, other Signers or other persons who have or expect to have financial dealings with the Business Applicant and the Signer; 4) share collection information with Signer's other creditors; and 5) disclose account information as required by law. Each Signer acknowledges that additional information may be required in order to make a final credit decision. Business Applicant also acknowledges receipt of the Equal Credit Disclosures provided with this application.

**REQUIRED SIGNERS:** All Signers must also be duly authorized to sign on behalf of applicant.

**ACKNOWLEDGEMENT:** EACH SIGNER ACKNOWLEDGES THAT U.S. BANK MAY RELY ON THE STATEMENTS AND INFORMATION SET FORTH IN THIS APPLICATION AND THAT SUCH STATEMENTS AND INFORMATION MAY BE INCORPORATED BY REFERENCE IN ANY AGREEMENT ANY OF THE UNDERSIGNED MAY ENTER INTO WITH U.S. BANK. EACH OF THE UNDERSIGNED HEREBY AGREES TO NOTIFY U.S. BANK PROMPTLY OF ANY CHANGE IN ANY SUCH STATEMENT OR INFORMATION. EACH SIGNER HAS READ AND UNDERSTOOD THE TERMS OF THIS APPLICATION, INCLUDING ANY ADDENDUM, AND REPRESENTS AND WARRANTS THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

**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 who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

Borrower hereby irrevocably authorizes U.S. Bank, each of U.S. Bank's affiliates, McDonald's and each of McDonald's affiliates, to at any time and from time to time (whether or not an Event of Default shall have occurred) obtain from and disclose to each other any and all financial and other information about Borrower, including without limitation, the existence of any Default hereunder or default under the Franchise Agreement, as permitted by law. Borrower further irrevocably authorizes U.S. Bank to contact, investigate, inquire and obtain consumer reports, references and other information on Borrower from consumer reporting agencies and other credit reporting services, former or current creditors, and other persons and sources (including, without limitation, McDonald's and any Affiliate of U.S. Bank) and to provide to any references, consumer reporting agencies, credit reporting services, creditors and other persons and sources (including, without limitation, McDonald's and Affiliates of U.S. Bank) all financial, credit and other information obtained by U.S. Bank relating to the Borrower, as permitted by law.

X

Authorized Signature	Print Name	Title	Date
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X

Authorized Signature	Print Name	Title	Date
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X

Authorized Signature	Print Name	Title	Date
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**Signature of Guarantors:** (Each Shareholder, Partner, or Member owning 25 percent or more interest in the Business Applicant, sign below.)

For married Wisconsin residents: I understand the lender may be required by law to give notice of any credit transaction to my spouse. The credit applied for, if granted, will be incurred in the interest of my marriage or family.

X

Authorized Signature	Print Name	Date
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X

Authorized Signature	Print Name	Date
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X

Authorized Signature	Print Name	Date
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Please submit this complete application via email to [mcdfinance@usbank.com](mailto:mcdfinance@usbank.com) or mail to:

U.S. Bank  
McDonald's Franchise Financing  
CN-OH-W9AD  
425 Walnut Street-9<sup>th</sup> Floor  
Cincinnati, OH 45202

**We look forward to the opportunity to helping you serve your customers. For support in your application process, please contact a McDonald's lending specialist at 866-759-1282.**

ECOA Notice: Thank you for your business credit application. We will review it carefully and get back to you promptly. If your application for business credit is denied, you have the right to a written statement of the specific reasons for that denial. To obtain that statement, please write to us at: 1550 E. American Blvd, Suite 450, Minneapolis, MN 55425 within 60 days from the date that you were notified of our decision. We will send you a written statement of the reasons for the denial within 30 days of your request for the statement. NOTICE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter the binding contract), because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers our compliance with this law is the OCC Customer Assistance Group, 1301 McKinney St. Ste. 3450, Houston, TX 77010-9050.

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# PERSONAL FINANCIAL STATEMENT

You may apply for an extension of credit individually or jointly with another applicant. This statement and any applicable supporting schedules may be completed jointly by co-applicants if their assets and liabilities can be meaningfully and fairly presented on a combined basis, otherwise separate statements and schedules must be provided. If you are applying for an unsecured individual loan, you do not need to complete any information concerning a co-applicant unless another person will be permitted to use the account or you wish the co-applicant's or other person's income to be relied upon as the basis for repayment. Round all amounts to the nearest \$100.

I certify that the information provided in this statement is complete, true and correct as of the date signed. So long as I owe any sums to the Bank, I agree to give the Bank prompt written notice of any material change in my financial condition and, upon request, agree to provide the Bank with an updated personal financial statement. The Bank is authorized to retain this personal financial statement whether or not credit is approved and is further authorized to verify my credit and employment history or any other information in this statement. If credit is granted, the Bank is authorized to obtain a credit bureau report periodically. This application does not obligate the Bank to provide credit.

Applicant's Signature

Date

Co-Applicant's Signature

Date

**\*\*\*Fully complete this Statement, addressing each section.\*\*\***

APPLICANT		CO-APPLICANT	
Full Name		Full Name	
Street Address		Street Address	
City/State/Zip		City/State/Zip	
Time at Address <span style="float:right">Mo Payment</span>		Time at Address <span style="float:right">Mo Payment</span>	
Previous Address		Previous Address	
City/State/Zip <span style="float:right"><input type="checkbox"/> Owned <input type="checkbox"/> Rented</span>		City/State/Zip <span style="float:right"><input type="checkbox"/> Owned <input type="checkbox"/> Rented</span>	
Social Security Number	Date of Birth	Social Security Number	Date of Birth
Phone: Home	Work	Phone: Home	Work
Employer		Employer	
Position/Title	Since	Position/Title	Since
Previous Employer		Previous Employer	
Position/Title	How Long	Position/Title	How Long
Marital Status *		Marital Status *	

\* Do not provide this information if your application is for individual, unsecured credit.

ASSETS		LIABILITIES	
Cash (Schedule 1)		Short Term Notes Due Financial Institutions (Schedule 7)	
Securities (Schedule 2)		Short Term Notes Due to Others (Schedule 7)	
Value of Your Ownership Interest in Business		Credit Accounts and Bills Due (Schedule 8)	
Life Insurance Cash Value (Schedule 3)		Insurance Loans (Schedule 3)	
Mortgages and Contracts Held by You (Sch 4)		Installment Loans and Contracts (Schedule 7)	
Homestead (Schedule 5)		Mortgages on Home (Schedule 5)	
Other Real Estate (Schedule 5)		Mortgages on Other Real Estate (Schedule 5)	
Profit Sharing, Pension, IRA, Otr Retirement (Sch 6)		Back Taxes Owing	
		Other Liabilities (Describe)	
Automobiles (Describe)			
Personal Property			
Other Assets (describe)			
		<b>TOTAL</b>	<b>\$</b>
<b>TOTAL</b>	<b>\$</b>	(Assets - Liabilities) <b>NET WORTH</b>	<b>\$</b>

*ANNUAL INCOME	Applicant	Co-Applicant
Salary		
Bonuses/Commissions		
Dividends/Interest		
Net Real Estate Income		
*Income from alimony, child support, or maintenance payments need not be entered unless you want it considered as a basis for repayment.		
Other (List)		
<b>Total</b>	<b>\$</b>	<b>\$</b>

ANSWER EACH QUESTION YES OR NO	Applicant	Co-Applicant
Are you a Co-Maker, Endorser, or Guarantor of any other person's debt?		
Are you a defendant in any suit or legal action?		
Have you ever gone through bankruptcy?		
Have you ever had a judgment against you?		
Have you made a will?		

**SCHEDULE 1 / CASH, SAVINGS, CERTIFICATES OF DEPOSIT**

Name of Bank or Financial Institution	Type of Account	Acct Balance
<b>Total</b>		\$

**SCHEDULE 2 / SECURITIES OWNED**

Par Value or No. of Shares	Description	Registered in Name(s) of	Listed or Unlisted	Current Market Value
<b>Total</b>				\$

**SCHEDULE 3 / LIFE INSURANCE**

Insurance Company	Insured	Beneficiary	Face (redeemable) Value	Cash Value of Policy (present value if policy cancelled)	Loans

**SCHEDULE 4 / RECEIVABLES DUE TO ME ON MORTGAGES AND CONTRACTS I OWN**

Name of Debtor	Description of Property	First Lien or Second	Date of Maturity	Monthly Receivable	Balance Due
<b>Total</b>					\$

**SCHEDULE 5 / REAL ESTATE OWNED, HOME(S) FOR YOUR OWN USE**

Check box if you own investment real estate.

Property Address and Description	Year Acquired	Purchase Price	Current Market Value	Mortgage Balance	Name of Creditor	Date of Maturity	Monthly Payment
<b>Total</b>							\$

**SCHEDULE 6 / PROFIT SHARING, PENSION, IRA**

Name of Institution	Type of Account	Account Balance	Amount Totally Vested	Loans
<b>Total</b>		\$	\$	\$

**SCHEDULE 7 / INSTALLMENTS, CREDIT LINES AND NOTES**

Name of Creditor	Collateral	Date of Maturity	Monthly Payment	Balance Due
<b>Total</b>				\$

**SCHEDULE 8 / CREDIT ACCOUNTS, BILLS DUE, ALIMONY/CHILD SUPPORT, DAYCARE, etc.**

Check box if you pay/owe alimony or child support.

Name of Company	Monthly Payment	Balance Due
<b>Total</b>		\$

