Capital Resources
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Capital Resources, LLC
7960 W 135th Street, Suite 200
Overland Park, KS 66223
Toll Free: 1-866-523-6641
Fax: 913-469-1635

ALLSTATE® CREDIT APPLICATION:

Date of Application: ______________ APPLYING AS: ☐ Individual ☐ Joint (sign both lines on page 3)

PRIMARY APPLICANT INFORMATION:

Primary Applicant's Name: ______________________________ Current Occupation: ____________________

Years of Insurance Experience: _____ Social Security Number: ____________________ Birthdate: ____________

E-mail Address: ______________________________ Primary Phone: ______________________

Secondary Phone: ____________________ Drivers License #: ____________________ State: ________

Address: ____________________ City: ____________________ State: ______ Zip: ________

JOINT APPLICANT INFORMATION:

Note, If the proposed borrower is a corporate entity, Lender requires anyone with 5% or more ownershipin that entity to be a co-borrower with the entity.”

Joint Applicant’s Name: ______________________________ Current Occupation: ____________________

Years of Insurance Experience: _____ Social Security Number: ____________________ Birthdate: ____________

E-mail Address: ______________________________ Primary Phone: ______________________

Secondary Phone: ____________________ Drivers License #: ____________________ State: ________

Check if Joint Applicant Address is the same as Primary Applicant address ☐ (If not, please complete below)

Joint Address:____________________ City: ____________________ State: ______ Zip: ________

DESIRED LOAN INFORMATION:

Loan Purpose (check all that apply):

☐ Allstate Agency Acquisition ☐ Refinance of Existing Debt* ☐ Working Capital

Proposed Loan Origination Date: ______________ Requested Loan Term: ____________ Total Requested Loan Amount: $____________________

☐ Capital will be used to pay off existing debt (Agency debt, Seller note, Credit Cards, Taxes, Loans)
***** Please fill out corresponding Schedules found on the separate **Personal Financial Statement**

☐ Distribution of Capital will be used for Agency expenses (upgrades, staffing, advertising,etc): ______________________________

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IF PROPOSED COLLATERAL IS ALLSTATE AGENCY ALREADY ***OWNED*** THEN:

Note: In addition to proposed collateral, lender will require a collateral assignment of life insurance policy equal to the proposed loan amount.

Exact name listed on your R3001 Contract: ______________________ Effective date of your R3001: ______________

Entity Type (Corp, Sole Prop, LLC): __________ State of Org: ______ Tax ID #:__________ Agent #:__________

Agency Phone: ______________ Agency Email: ______________

Agency Address: ______________ City: ______________ State: ______ Zip: ______

Annual Commission Revenue: $______________ Current TPP Amount: $______________

Years of Agency Existence: ______ Years of Ownership: ______ Approx. Value of Agency: $______________

Is Agency Currently Encumbered? ☐ NO ☐ YES If **YES**, Please complete **Section E** on separate Personal Financial Statement

IF PROPOSED COLLATERAL IS ALLSTATE AGENCY BEING ***ACQUIRED*** THEN:

Note: In addition to proposed collateral, lender will require a collateral assignment of life insurance policy equal to the proposed loan amount. Lender reserves the right to require an individual borrower to form a business entity.

NOTE: Minimum Down Payment Requirement= **15%** Purchase Price before down Payment: ______________ Targeted Acq. Date: __________

Proposed Down Payment: (Specify cash Amount of Purchase Price) $______________ Source of Down Payment: (Specify Cash, Sellers Note, Agency, etc) ______________

Annual Commission Revenue: $______________ Current TPP Amount: $______________

Years of Agency Existence: ______ Reason the Agent is selling?(Retire, Relocation, etc): ______________

Agency Address: ______________ City: ______________ State: ______ Zip: ______

SELECT ONE

☐ Merging Seller's Agency into my currently owned Agency

☐ Merging my Agency into the Seller's Agency

SELECT ONE

☐ Post Acquisition, Agency will stay at Seller's Location

☐ Post Acquisition, Agency will be relocating to new location below

Relocation Address: ______________ City: ______________ State: ______ Zip: ______

IF YOU HAVE ALREADY CREATED YOUR ENTITY PLEASE COMPLETE BELOW:

** If you have not created your entity you may skip this step. Must provide this information to Capital Resources upon completion.*

*Exact name that is/will be issued on your R3001 Contract: ______________________ *Effective date of your R3001: ______________

*Entity Type (Corp, Sole Prop, LLC): __________ *State of Org: ______ *Tax ID #:__________ *Agent #:__________

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INDIVIDUAL OR JOINT CREDIT

I/We are applying for $________________________________ on ________________ with Capital Resources, LLC.
(total requested amount) M/D/YY

☐ I am applying for individual credit in my own name and I am relying on my own income and assets and not the income and assets of another person. As such, the attachments to this Credit Application reflect my income and asset only.

☐ I am applying for individual credit and I am relying on my own income or assets, as well as income or assets from another source.

☐ We are applying for joint credit. (Both signatures required)

DATE: _____________ SIGNATURE OF APPLICANT:________________________________

DATE: _____________ SIGNATURE OF JOINT APPLICANT:____________________________

ACKNOWLEDGMENT

I acknowledge that acceptance of this Credit Application should not be considered as a commitment by Capital Resources to extend credit and that I shall be notified of the approval or denial of the credit applied for herein by Capital Resources. I certify that the answers to the questions on this application and the information provided in connection therewith (including business and financial information, and that information contained in any attachments hereto) are true and complete and that I (we) intend to apply for joint credit (if proper box is checked at top of page #1 of this application). Permission is granted to Capital Resources, and/or its affiliates, to investigate my personal history (including criminal history, Executive Order 13224 and the US PATRIOT Act), business history, employment history, credit history, education and backgrounds, and authorize any school, former employer, reference, or other individual or entity to respond to such inquiries. Permission is granted to Capital Resources, and/or its affiliates, to obtain information about me from Allstate Insurance Company, including, but not limited to my agent name as listed on my R3001 Agreement, my agent number(s), my R3001 contract date and any active Security Agreements or Assignments of Commission. This permission extends to any entities of which I am a principal or member of. Permission is also granted to provide information about me to Capital Resources, its affiliated companies, financers, suppliers and professional consultants. I agree to hold harmless any person or entity which provides information to you from any claims, liability, damages or other amounts incurred as a result of doing so. I represent and warrant that neither I, nor any owner, affiliate, partner, director, officer or manager of an entity of which I am a principal or member of, nor any affiliate, parent, child or spouse of any individual applicant and/or guarantor (collectively for this paragraph, “Applicant”) supports terrorism, provides money or financial services to terrorists, or is engaged in terrorism, is on the current U.S. government list of organizations that support terrorism, nor has engaged in or been convicted of fraud, corruption, bribery, money laundering, narcotics trafficking or other crimes, and all are eligible under applicable U.S. immigration laws to be in the U.S. and perform contracts in the U.S. Applicant further warrants and represents that applicant is not identified by a government or legal authority as a person with whom Capital Resources would be prohibited from transacting business and that Applicant will notify Capital Resources in writing immediately of the occurrence of any event that renders the foregoing representations and warranties incorrect. I understand and agree that any misrepresentation by me on this application or in the information provided in connection therewith, will result in cancellation of the application and that Capital Resources shall not be held liable in any respect if false statements or omissions made by me in this application or in the information provided in connection therewith are made. If I am approved for the loan requested hereby, I hereby agree to comply with all policies and procedures set forth in the loan documents executed by me in conjunction therewith.

DATE: _____________ PRINTED NAME OF APPLICANT:______________________________

SIGNATURE OF APPLICANT:________________________________

DATE: _____________ PRINTED NAME OF JOINT APPLICANT:__________________________

SIGNATURE OF JOINT APPLICANT:____________________________

CHECKLIST:

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FROM THE LOAN APPLICANT:

- ☐ 1- Fully completed and signed Credit Application (only accepted on the CR form).
- ☐ 2- Fully completed and signed Personal Financial Statement(s) (only accepted on the CR form).
- ☐ 3- A current resume/bio for applicant(s). Please include work history with cities and dates, insurance licenses held and insurance industry honors.
- ☐ 4- Last 3 years of Personal tax returns of applicant(s) with all supporting schedules. FEDERAL ONLY

IF APPLICANT OWNS AN ALLSTATE AGENCY NOW:

- ☐ 5- Last 3 years of Agency tax returns with all supporting schedules. FEDERAL ONLY
  - ☐ 5a- If the most recent December year-end tax return is not yet filed, a December year-end Profit & Loss statement for the agency/agencies currently owned is required.
- ☐ 6- Current year-to-date Profit & Loss statement of agency/agencies currently owned.
- ☐ 7- The following ALLSTATE reports: (see next page for instructions to find these reports)
  - ☐ 7a- Current Termination Payment Statement (TPP).
  - ☐ 7b- Year-to-date Business Metrics Report.
  - ☐ 7c- Last 3 years of December year-ending Business Metric Reports.
  - ☐ 7d- Year-to-date Commission Payment Notification (CPN)
  - ☐ 7e-Last 3 years of December year-ending Commission Payment Notifications (CPN).

FROM THE AGENCY SELLER: (FOR ACQUISITION LOANS ONLY)

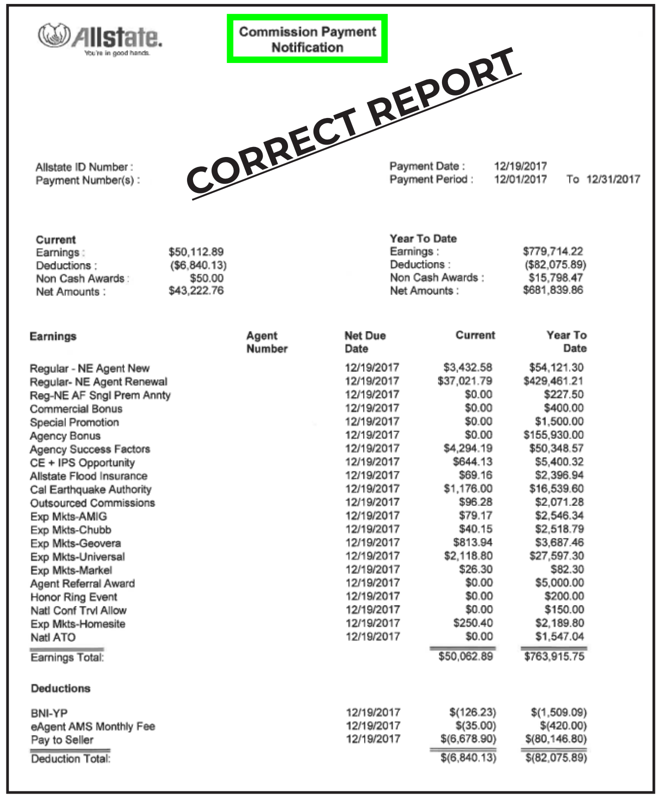
- ☐ 8- Last 3 years of Agency tax returns with all supporting schedules. FEDERAL ONLY
  - ☐ 8a- If the most recent December year-end tax return is not yet filed, a December year-end Profit & Loss statement for the agency/agencies currently owned is required.
- ☐ 9- Current year-to-date Profit & Loss statement of agency/agencies currently owned.
- ☐ 10- The following ALLSTATE reports: (see next page for instructions to find reports needed)
  - ☐ 10a- Current Termination Payment Statement (TPP).
  - ☐ 10b- Year-to-date Business Metrics Report.
  - ☐ 10c- Last 3 years of December year-ending Business Metric Reports.
  - ☐ 10d- Year-to-date Commission Payment Notification (CPN)
  - ☐ 10e- Last 3 years of December year-ending Commission Payment Notifications (CPN).

INSTRUCTIONS TO ACCESS THE COMMISSION PAYMENT NOTIFICATION (CPN)

Capital Resources can only accept the CPN.
The **Compensation Summary Report** cannot be accepted.

1. Access **GATEWAY**
2. Go to **My Info** (tab)
3. Select **Payment Notification**
4. Choose the **Month & Year**
5. Select Link that Appears

This will generate the a PDF you may now save to your computer to print or attach in an email.


Allstate. You're in good hands.

Commission Payment Notification

CORRECT REPORT

Allstate ID Number :		Payment Date :	12/19/2017
Payment Number(s) :		Payment Period :	12/01/2017 To 12/31/2017

Current		**Year To Date**	
Earnings :	$50,112.89	Earnings :	$779,714.22
Deductions :	($6,840.13)	Deductions :	($82,075.89)
Non Cash Awards :	$50.00	Non Cash Awards :	$15,798.47
Net Amounts :	$43,222.76	Net Amounts :	$681,839.86

Earnings	Agent Number	Net Due Date	Current	Year To Date
Regular - NE Agent New		12/19/2017	$3,432.58	$54,121.30
Regular- NE Agent Renewal		12/19/2017	$37,021.79	$429,461.21
Reg-NE AF Sngl Prem Annty		12/19/2017	$0.00	$227.50
Commercial Bonus		12/19/2017	$0.00	$400.00
Special Promotion		12/19/2017	$0.00	$1,500.00
Agency Bonus		12/19/2017	$0.00	$155,930.00
Agency Success Factors		12/19/2017	$4,294.19	$50,348.57
CE + IPS Opportunity		12/19/2017	$644.13	$5,400.32
Allstate Flood Insurance		12/19/2017	$69.16	$2,396.94
Cal Earthquake Authority		12/19/2017	$1,176.00	$16,539.60
Outsourced Commissions		12/19/2017	$96.28	$2,071.28
Exp Mkts-AMIG		12/19/2017	$79.17	$2,546.34
Exp Mkts-Chubb		12/19/2017	$40.15	$2,518.79
Exp Mkts-Geovera		12/19/2017	$813.94	$3,687.46
Exp Mkts-Universal		12/19/2017	$2,118.80	$27,597.30
Exp Mkts-Markel		12/19/2017	$26.30	$82.30
Agent Referral Award		12/19/2017	$0.00	$5,000.00
Honor Ring Event		12/19/2017	$0.00	$200.00
Natl Conf Trvl Allow		12/19/2017	$0.00	$150.00
Exp Mkts-Homesite		12/19/2017	$250.40	$2,189.80
Natl ATO		12/19/2017	$0.00	$1,547.04
Earnings Total:			$50,062.89	$763,915.75
Deductions				
BNI-YP		12/19/2017	$(126.23)	$(1,509.09)
eAgent AMS Monthly Fee		12/19/2017	$(35.00)	$(420.00)
Pay to Seller		12/19/2017	$(6,678.90)	$(80,146.80)
Deduction Total:			$(6,840.13)	$(82,075.89)

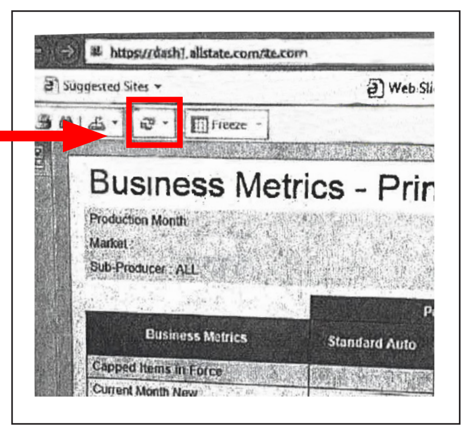
Capital Resources can only accept the CPN.
The **Compensation Summary Report** cannot be accepted.

INSTRUCTIONS to ACCESS the PREVIOUS MONTH REPORTS:

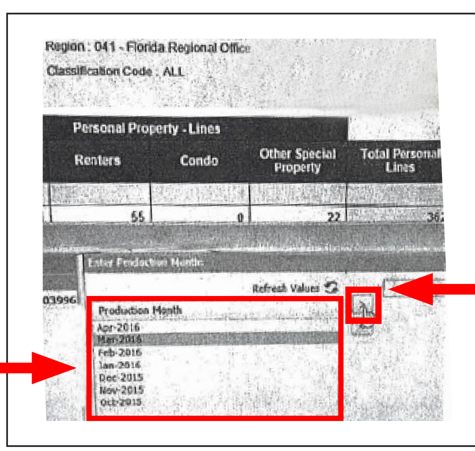
Please send the correct reports to expedite the loan process. If you do not have access to past reports, please contact your FSL or Seller's Agency for assistance. Capital Resources has no access to the Dash or Gateway.
Use these instructions to find the reports for:

- Business Metric - Printable View - Agent
- Termination Payment - Summary Report

1. Within DASH, access the **current month** for either report (Business Metric or TPP)
2. Click on the box that resembles the "**Refresh**" button



3. Select the **Production Month** that is required.



4. Once Month is selected, click on the **top arrow**
5. Click **OK**

This will generate the a PDF you may now save to your computer to print or attach in an email.