



SME Business Lending Application Form

How to complete the form

1 Please complete / type online, print, sign and return to your local branch or relationship manager

2 Mark circles by clicking to indicate selection



Contents

Part 1	.Business Details
Part 2	. Personal Details
Part 3	.Application Details
Part 4	. Central Credit Register Notification
Part 5 (i)	. Data Protection Notice
Part 5 (ii)	. Declaration

Three easy steps to applying for business lending with AIB

- 1. Arrange a meeting with your Relationship Manager 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 Relationship Manager will inform you if the Bank has any additional requirements).

SME – Enterprises which employ fewer than 250 persons and which have an annual turnover not exceeding EUR 50 million, and/or annual balance sheet total not exceeding EUR 43 million.

www.aib.ie/business

SME Business Lending Application Form

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 AIB Relationship Manager and complete this Business Lending Application Form. You can complete this form with the assistance of your Relationship Manager during this meeting or with the help of a Business Professional.

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

Part 1 Business Details

Please tell us about yo	our b	usin	ess.	This	info	rma	atior	n wi	ll as	sist	us i	n pi	rovi	idin	g a	pro	fess	iona	al tii	nely	y res	spor	nse.			
Business Name/ Trading Name																										
Business Address																										
Contact Person											En	nail														
Telephone											Fa	X														
Mobile											Be	est (Con	tact	Tir	ne										
Main Bank Account D	etails	S																								
Sort Code				Acc	cour	nt N	luml	oer																		
Business Type																										
Company																									5	
If Company, please provide yo	our Cor	npan	y Regis	tration	n Offi	ce Nu	umbe	r (CR	O No	. or N	Ion R	Oled	quiva	ilent),	Leg	al Ent	ity Ic	lentifi	er or	lax F	Refere	ence	Numb	oer (I	RN).	
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Other Organisation Type (If other, please specify)																										
Please provide your TRN																										
Company Incorporated																										
In (Country)																										
No. of Outlets																										
Primary																										
Business Activity																										
	Day		Mont	h .		/ear	_										7			ay		Мс	onth		Ye	ar
In Business Since		/		/				No.	of E	Emp	oloye	ees					Α	s at] /			/		
Customer Since	Day	/	Mont	h /		/ear		Bus	ines	s P	remi	ises	Sta	atus			Lea	sed			Ren	ıted				

Business Ownership Details

List the names of company or other										shares or	voting riq	ghts in the	
1. Owner Name										Director	Yes	No	
					Day		Month		Year	_			
Irish Resident	Yes	No	Date of	Birth		/		/			entage eholding		%
Address													
Occupation													
2. Owner Name										Director	Yes	No	
	.,	-			Day	1 . 1	Month	٠.	Year	Perce	ntage		
Irish Resident	Yes	No	Date of	Birth		/		/			holding		%
Address													
Occupation													
3. Owner Name										Director	Yes	No	
	\ \ \		7	.	Day	1 , 1	Month	٠,	Year	Perce	ntage		
Irish Resident	Yes	No	Date of	Birth		/		/			holding		%
Address													
Occupation													
List below any conthis company or co											ares or v	oting right	s in
1. Company Name	9												
Registered No.													
% of Shares Owner in the Company	ed			%									
2. Company Name	9												
Registered No.	-												
registered rio.													
% of Shares Owner in the Company	ed			%									

If more fields are required, please photocopy page or use a separate form.

		in (000's) e.g. for €25,000.00	
Borrowings	Financial Institution	please enter 25	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 and Investments	Financial Institution		ount Held (000's) €25,000.00 enter 25
Savings			
Deposits			
Other			
Investments			
Investment Accour	nts		
Shares			
Property	Value		
Please also indicate current property value			
Other			
Business Financ	ial Details		
Period Ending	Day Month Year	Year Accounts? Yes No	
		real Accounts: resn	
	Audited Auditor's Name Certified Management (Other	
	Value (000's)		
	e.g. €25,000.00 enter 25		
Sales/Turnover			
Gross Profit			
Net Profit			
Drawings			
Interest			
Depreciation			
Tax			

Current Values

Assets	Value (000's) e.g. €25,000.00 enter 25	Liabilities	Amount
Land and Buildings		Creditors	
Machinery and Equipment		VAT/PAYE/PRSI	
Furniture and Fittings		Other	
Stock			
Debtors			
Cash			
Deposits			
Other			
Total Assets			
Other			
Tax Status (Tax up-to-date)	Yes	No Monthly Amount of R	Pevenue Agreement
Is a revenue agreement in pl	ace? Yes	No	

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.

For partnerships – each partner must provide their PPSN / TRN. If the partnership has more than two partners, print additional copies of these pages and submit them with the application form.

Personal Details	- Pr	inci	pal	Bu	ısin	ess	Ov	vne	r																			
Surname																												
First Name													Ť															
Address											Ť		Ť															П
County																С	oun	try										
Account Number										Sc	ort (Cod	е															
PPSN / TRN (for Sole	e Trad	ers c	or Par	tner	s on	ly)																						
Contact Details																												
Email																												
Land Line												N	lo. (of [Оер	end	dan	ts										
Mobile												Α	.ge	Ra	nge	9	fro	m						to				
Best Contact Time												R	esi	der	ntia	l St	atu	s (Ow	ner			Tena	ant				
Date of Birth		Da	àУ	/	Мо	onth	/	Υє	ear			L	ivir	ng v	with	n Pa	arer	nts										
Time with Bank												N	lum	nbe	r of	Ye	ars	at A	ddr	ess								
												Ε	stir	nat	ed	Val	ue	of H	lom	ne								
Annual Salary																												
Salary Payment Fre	quei	псу																										
Previous Address																												
(if less than 3 years at current address)																												
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Personal Financ	ıal L)et	ails	- F	rır	сір	al E	Sus	ine	SS	Οv	vne	r															
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Borrowings	Fina	anc	ial Ir	nsti	itut	ion									er 25		JI 62	3,000	3.00		Мс	onth	nly F	Repa	aym	ents	5	
Mortgage																												
Personal Loan																												
Motor Loan																												
Overdraft																												
Credit & Other Cards																												
Tax Liability																												
Other																										T	Ï	П

Savings and Investments	Fin	ıan	cial	Ins	stitu	utio	n																			d (C	00	's)			
Savings	L	L	<u>JL</u>																		L				L						
Deposits																															
Other																															
Investments																															
Investment Accounts	;																														
Life Assurance																															
Shares																															
Pension																															
Property Please also indicate current property value	Valu	1e																			L										
Other		Ī	Ī																						Ï						
Personal Details -	Sec	cor	nd I	Bus	sine	ess	O۱	vne	er																						
If applicable (if more	tha	n 2,	, ple	eas€	e us	se s	epa	arate	e fo	rm	or	pho	otoc	ор	y th	is p	oag	ge).													
Surname																															
First Name																													Ī		
Address																															
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PPSN / TRN (for Sole T	rade	rs o	r Par	tner	rs on	ly)																									
Contact Details																															
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Borrowings F	inancial Institution				se ent			.,		Mon	thly	Repa	aymei	nts		
Mortgage																
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Tax Liability																
Savings and Investments Savings	Financial Institution												ld (00 enter 2			
Deposits																
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Investments																
Investment Accounts																
Shares																
Property Please also indicate	Value															
current property value Other																
Part 3 Application	Details															
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Facility 1 Overdraf		(e.	ther g. Promp emium Fi			nce										
Amount Required					Loa	n Firs	t Rep	oayme	ent Da	ate	Day	/	Mon	th /	Y	ear
Repayment Period Y	ears Month	ns	_													
Purpose of Facility e.g																
Loan Repayment Fre	quency e.g. Monthly															
Do you foresee any		? Yes		No												
If Yes, please comme	ent															
Facility 2 Overdraf	t Loan	(e.	ther g. Promp emium Fi			nce										
Amount required					Loa	n Firs	t Rep	oayme	ent Da	ate	Day	/	Mon	th /	Y	ear
Repayment Period Y	ears Month	ns					·	*				_ ′		′		
Purpose of Facility e.c																
Loan Repayment Fre	quency e.g. Monthly															

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Part 4 Central Credit Register Notifications

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.

The Central Credit Register is maintained and operated by the Central Bank of Ireland. For information on your rights and duties under the Credit Reporting Act 2013 please refer to the factsheet prepared by the Central Bank of Ireland. This factsheet is available on www.centralcreditregister.ie. Copies can also be obtained at your local AIB branch and on www.aib.ie

For further information in relation to the CCR, please refer to our website www.aib.ie/ccr

Part 5 (i) Data Protection Notice

For information about how we collect information about you, how we use it and how you can interact with us about it, see our data protection notice in branches and online. It may change from time to time.

Part 5 (ii) Declaration

To be completed by the individuals listed in part 2 – Personal Details.

I/We hereby confirm that the information which I/We have provided above is true and correct.

We will use the information you have given us to search and to share information with credit bodies, such as the Central Credit Register, to help with applications for credit and for ongoing credit review. The credit bodies will hold this information on a database and it may be accessed by other financial institutions.

Signature of First Applicant*	Signature of Joint Applicant (if any)
*Authorised representative of the Business	
Day Month Year Date / / / /	Day Month Year Date / / / /

Lending criteria, terms and conditions apply. Allied Irish Banks, p.l.c. is regulated by the Central Bank of Ireland.