

Agent Loan Application/Underwriting Checklist

Below are the documents needed to apply for a loan.

New A	Agents	to Al	llstate –	- Pu	rchase*
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- □ Signed and completed loan application**
- Current resume
- ☐ Last 3 years of applicant's federal income tax returns (individual)
- □ Selling Agency: Last 3 years of agency business tax returns
- □ Selling Agency: Current year-to-date profit and loss statement
- Selling Agency: Current business metrics report in printable view in Excel format
- Selling Agency: Last 3 years of December year-end business metrics reports in printable view in Excel format (reports should include ALL agency numbers being purchased)
- Selling Agency: Last 3 years of November year-to-date Compensation Summary Reports (DASH Compensation App)
- Selling Agency: Last 2 years of December Commission Payment Notification Allstate pay statement found in Gateway
- □ Selling Agency: Current Termination Payment (TPP) summary report in Excel format (include Vested and In Vesting TPP reports for ALL applicable agency numbers)
- Selling Agency: Screenshot of current Agent Achievement Program Report Scorecard (DASH-Dashboards tab)

Existing Agents with Allstate - Purchase*

- □ Signed and completed loan application**
- Last 3 years of applicant's federal income tax returns (individual)
- □ Applicant & Selling Agency: Last 3 years of agency Business Tax Returns
- ☐ Applicant & Selling Agency: Current year-to-date profit and loss statement
- Applicant & Selling Agency: Current business metrics report in printable view in Excel format
- Applicant & Selling Agency: Last 3 years of December year-end business metrics reports in printable view in Excel format (reports should include ALL agency numbers being purchased)
- □ Applicant & Selling Agency: Last 3 years of November year-to-date Compensation Summary Reports (DASH-Compensation App)
- Applicant & Selling Agency: Last 2 years of December Commission Payment Notification Allstate pay statement found in Gateway
- □ Applicant & Selling Agency: Current Termination Payment (TPP) Summary report in Excel format (include Vested and In Vesting TPP reports for ALL applicable agency numbers)
- Applicant & Selling Agency: Screenshot of current Agent Achievement Program Report Scorecard (DASH-Dashboards tab)

Existing Agents with Allstate – Refinance and/or Line of Credit

- □ Signed and completed loan application**
- □ Applicant's last 3 years of federal income tax returns (both individual and business/agency)
- ☐ Current year-to-date profit and loss statement
- □ Current business metrics report in printable view in Excel format
- Last 3 years of December year-end business metrics reports in printable view in Excel format (reports should include ALL agency numbers)
- Last 3 years of November year-to-date Compensation Summary Reports (DASH-Compensation App)
- Last 2 years of December Commission Payment Notification Allstate pay statement found in Gateway
- Current Termination Payment (TPP) Summary Report in Excel format (include Vested and In Vesting TPP reports for ALL
 applicable agency numbers)
- Screenshot of current Agent Achievement Program Report Scorecard (DASH-Dashboards tab)

Please mail or email these documents to:

Wintrust Agent Finance 9701 W. Higgins Rd., Suite 330 Rosemont, IL 60018 855-552-LOAN (5626) agentfinance@wintrust.com

^{*} Agents considering the purchase of an existing insurance agency are encouraged to consult with their attorney to ensure the purchasing agent is adequately protected by an appropriate non-competition agreement from the selling agent.

^{**}Forms provided; signatures required on top of page 1, page 4, top of page 6, and page 8.



TERM LOAN AND LINE OF CREDIT AGENT LOAN APPLICATION

9701 W. Higgins Rd., Suite 330, Rosemont, Illinois 60018 855-552-LOAN (5626)

INDIVIDUAL	ACCOUNT	JOINT	ACCOUNT

We intend to apply for joint credit (if applicable)	Applicant Signature	Co	-Applicant Signa	ture	
APPLICANT INFORMATION	SSN:				
Name:		SSN:			
Current Home Address:					
	City	County	State	Zip	
Previous Home Address (if at current address < 2 years)): City	County	State	Zip	
Home Phone:	Personal Email <i>A</i>	Address:			
Cell Phone:	Preferred Conta	ct Method:			
Fax:	Date of Birth:				
Driver's License #:	State Issued:				
Driver's License Issue Date:	Driver's License	Expiration Date:			
How many years of insurance experience do you have?	How many years	s with Allstate?			
Are you a licensed Allstate agent?	Securities Licens	ses: 6	53	7	
Are you an approved Allstate agency buyer?	If yes, when wer	If yes, when were you approved?			
Have you acquired any books of business in the last 12 m	nonths? If yes, how many	?			
AGENCY INFORMATION (APPLICANT'S AGENC			• • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	
Legal Name of Agency:					
Agency Address:					
	City	County	State	Zip	
Tax Identification Number:	Type (S Corp, C	Corp, Sole Prop, LLC,	LLP):		
State of Organization:					
Has your Agency Type ever changed? (If yes, provide de	etails):				
Name of all entity Officers:					
Work Phone:	Work Email Add	ress:			
Work Fax:	Agency # (Inclu	de all):			
Year agency was established:	Length of your o	wnership:			
Do you have any debt on your agency?	If yes, what is th	e amount?			
Lender Name:	Loan Maturity: _		Loan Rate:		
How many licensed staff do you employ?(Please include yourself in the count)	How many unlic				

Once application is completed along with all accompanying documents (Questions call 855-552-LOAN (5626)):
Mail to: Wintrust Agent Finance Attn: Loan Underwriting (Confidential), 9701 W. Higgins Rd., Suite 330, Rosemont, Illinois 60018 or email to agentfinance@wintrust.com
To ensure overnight delivery please use Federal Express vs. US Post Office Express Mail

LOAN INFORMATION

Requested Term Loan Amount \$	Requested Loar	n Term (years): 3 _	57_	10
Requested Line Amount (\$25,000 - \$100,000) \$				
Loan Purpose:				
For purchase transactions, select most appropriate situation: Initial				
Anticipated Loan Closing Date:				
Describe assets being offered as collateral, including current estima				
Is agency pledged to another financial institution or individual? If ye				
Purchase Price of Agency Book:				
Amount of Down Payment \$				
•				
Explain source of down payment:				
How did you hear about this Lending Program?				
Please answer the following questions about your financial records. If the	e answer to any question	n is yes, please attac	ch details.	
Are you:	☐ Single	☐ Married	☐ Separated	\square Divorced
Do you have any tax liens or contested taxes?	□ Yes	□No		
Have you ever been convicted of a felony?	☐ Yes	□No		
Are you a defendant in any suits or legal actions?	☐ Yes	□No		
Has the applicant or any guarantor ever obtained credit under another name?	□Yes	□No		
If yes, please explain:				
Does the applicant or guarantor have tax obligations, including payroll and sales taxes, past due?	☐ Yes	□No		
Have you ever filed for or taken bankruptcy, composition, settlement or assignment for benefit of creditors?	☐ Yes	□No		

EMPLOYMENT AND EDUCATION HISTORY

WORK EXPERIENCE: (Include	20 years of employment or last 5 en	nployers. If more space is needed,	provide an attachment.)
Employer Name	Address	Position/Title	Dates of Employment
EDUCATION:			
	Schoo	l Name	Year Completed
High School			
College			
Other			

CERTIFICATE OF BENEFICIAL OWNER(S)

To help the government fight financial crime, federal regulation requires certain financial institutions to obtain, verify and record information about the beneficial owners of legal entity customers. Legal entities can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corruption, fraud and other financial crimes. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforcement investigate and prosecute these crimes.

The information below must be completed by the person opening a new account on behalf of a legal entity with any of the following U.S. financial institutions: (i) a bank or credit union; (ii) a broker or dealer in securities; (iii) a mutual fund; (iv) a futures commission merchant; or (v) an introducing broker in commodities. For purposes of this form, a legal entity includes a corporation, limited liability company, or other entity that is created by a filing of a public document with a Secretary of State or similar office, a general partnership, and any similar business entity formed in the United States or foreign country. Legal entity does not include sole proprietorships, unincorporated associations or natural persons opening accounts on their own behalf.

Control Person: Please provide the following requested information. All information is required unless otherwise noted and must be completed by a person with the intent to open an account or apply for credit. Additional information may be requested based upon the response provided. The following information for <u>one</u> individual with significant responsibility for managing the legal entity listed above, such as:

- o An executive officer or senior manager (e.g., Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, Treasurer); or
- o Any other individual who regularly performs similar functions. (If appropriate, an individual listed above may also be listed in this section.)

Legal Name			Position/Title
Date of Birth		SSN/Tax ID#	Address (Residential or Business Street Address)
Residency Status	□U.S. Citizen	☐ Resident Alien ☐ Non-Resident Alien	For Foreign Persons, Passport Number and Country of Issuance, or other similar identification number.

Please note: The Lender may ask to see a copy of the driver's license or other form of government issued identification for each owner/guarantor and the controlling individual. In lieu of a passport number, foreign persons may also provide an alien identification card number, or number and country of issuance of any other government-issued document evidencing nationality or residence and bearing a photograph or similar safeguard.

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.

If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact your loan officer at the address or phone number listed on the first page of this form within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement.

NOTICE: The federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a 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 compliance with this law concerning this creditor is Office of the Comptroller of the Currency, Customer Assistance Group, P.O. Box 53570, Houston, TX 77052.

Section 1014 of Title 18 of the United States Code was amended to make it a federal crime for any person to knowingly make any false statement or report, or willfully overvalue any land, property or security for the purpose of influencing in any way the action of any bank the deposits of which are insured by the Federal Deposit Insurance Corporation.

Sharing Information within the Wintrust Organization. Wintrust Agent Finance, a division of Lake Forest Bank & Trust Company, N.A. ("Lender") may share within the Wintrust organization information about Guarantor's or Customer's transactions or experiences with the Lender, information Guarantor or Customer supplies on applications, and information the Lender receives from third parties. Guarantor or Customer has the right to instruct the Lender not to share within the Wintrust organization certain information (other than information about Lender's transactions and experiences with Guarantor or Customer) from Guarantor's or Customer's application or information the Lender receives from third parties. If Guarantor or Customer does not want the Lender to share this information, please contact the Compliance Officer at the address or phone number listed on the first page of this form. The Wintrust organization means the Lender and all other banks and non-bank companies affiliated with the Lender by common ownership or control.

REPRESENTATION & AUTHORIZATION

I/We, the undersigned, for myself/ourselves and as owners(s)/officer(s)/partner(s)/member(s) of the applicant and/or guarantor(s) jointly and severally certify to Wintrust Agent Finance, a division of Lake Forest Bank & Trust Company, N.A., (the "Lender") that the information provided in this application (and in any related documents submitted in connection with this application) is true and correct in all respects and may be relied upon by the Lender in determining whether or not to extend credit to the undersigned. I/We understand that this application is subject to credit approval. I/We acknowledge our obligation to promptly notify the Lender of any changes to the information provided. I/We understand that this application and attachments are the property of the Lender, and will remain so, even if the loan is declined. I/We for ourselves and as owner(s)/officer(s)/partner(s)/member(s) of the applicant and/or guarantor(s) authorize the Lender to obtain any information the Lender requires relating to my/our creditworthiness from any source, including financial institutions and credit reporting agencies, now and any time during the term of the loan or while any balance is outstanding. Upon my/our request, the Lender will provide me/us with the name and address of any credit reporting agency from which the Lender obtained a report. I/We authorize the Lender to report to any of its affiliates and/or a credit reporting agency information about the applicant(s), including the following: the timeliness of payments, any collateral position taken by the Lender, the balance due under any loan outstanding, any default that has occurred or any other matter related to the loan. I/ We understand that personal and/or other guarantees will be required if the application is approved. The credit being applied for is intended solely for business or commercial purposes, and not for household, personal, family or consumer purposes. Each of the undersigned certifies that he/she is signing in the capacity indicated next to each sig

Note: The applicant and guarantors must sign below (in addition, each guarantor other than the applicant is required to complete Exhibit C, page 10 of this application; the applicant is to complete Exhibit A, page 6). If a partnership, all partners must sign or evidence of partnership authorization must be provided.

Authorized Signer	Title	Date
Authorized Signer	Title	Date
Authorized Signer	Title	Date

3-YEAR AGENCY PROJECTIONS — REQUIRED FOR ALL LOAN APPLICANTS!

Please use this form to prepare projections for your existing agency and/or the agency you are looking to purchase.

	Projected Year 1	Projected Year 2	Projected Year 3
Income			
End of Year Earned Premium — Existing Book	- <u></u>		
Annual Commission — Existing Book	- <u></u>		
Allstate Financial Income — Existing Book			
Bonus Compensation — Existing Book			
Other Income — Existing Book			
End of Year Earned Premium — New Book			
Annual Commission — New Book			
Allstate Financial Income — New Book			
Bonus Compensation — New			
Other Income — New			
Total Income			
Operating Expenses			
Officer Salaries (\$ to cover personal expenses)			
Rent/Lease & Utilities			
Salaries and Wages			
Marketing/Advertising/Postage Expense			
Automobile Expense			
Insurance	- <u></u>		
Telephone	- <u></u> -		
Travel & Entertainment	- <u></u> -		
Pension, Profit-Sharing	- <u></u> -		
Taxes & Licenses			
Other:	- <u></u> -		
Other:			
Office Expense			
Professional Fees			



Exhibit A to Credit Application

FINANCIAL STATEMENT

9701 W. Higgins Rd., Suite 330, Rosemont, Illinois 60018 855-552-LOAN (5626)

We intend to apply for joint credit (if app	licable) App	pplicant Signature Co-Applicant Signature		
USA Patriot Act requires all financial institution	ns to obtain, verify, and record informat al address, date of birth, taxpayer ident	JNT To help the government fight the funding of terrorisment tion that identifies each person who opens an account. Wification # and other information that will allow us to identify the information is required.	/hat this means for you: When you open an	
Р	repared as of:	, 20		
Complete this form for (1) each agent applied entity-providing a guaranty on the loan.	icant, or (2) each limited partner/me	ember/owner and each general partner, if any, or (3)	each stockholder, or (4) any person or	
Name:				
Residence Address:				
City, State, Zip:	(Omit Cents)	 LIABILITIES	(Omit Cents)	
Cash on hand & in banks ¹	\$	Accounts Payable	\$	
Savings Account ¹	\$	Notes payable to banks & others (Describe in Section 2)	\$	
IRA or other retirement account ¹	\$	— Automobile Loan(s)	\$	
Life Insurance		Monthly Payments \$	Ψ	
Cash Surrender Value Only (Complete Section 8)	\$	Credit Card Debt Monthly Payments \$	\$	
Stocks & Bonds ¹ (Describe in Section 3)	\$	Mortgages on Real Estate (Describe in Section 4)	\$	
Automobile(s) — present value	\$	Unpaid Taxes (Describe in Section 6)	\$	
Real Estate (Describe in Section 4)	\$	— Loan(s) on life insurance	\$	
Market value of existing Ins. Book	\$	Other Liabilities (Describe in Section 7)	\$	
Other personal property (Describe in Section 5)	\$	— Total Liabilities	\$	
¹ Please provide most recent statement if indiv	idual balances exceed \$5,000.	Net Worth	\$	
Total	\$	Total	\$	
Section 1. Sources of Inco	me	Section 1. Sources of Incom	ne	
Salary	\$	— As Guarantor, Endorser or Co-Maker	\$	
Net Investment Income	\$	— Legal Claims & Judgments	\$	
Real Estate Income	\$		\$	
Other (describe below*)	\$	Other Specific Debt	\$	
Indicate your planned annual salary	level you are seeking from you	<u> </u>		

IMPORTANT: Please indicate if any assets or sources of income are jointly owned by applicant and another person or wholly owned by another person. *Alimony or child support payments need not be disclosed on "Other Income" unless it is desired to have such payments counted toward total income.

Exhibit A to Credit Application

FINANCIAL STATEMENT

Name & Address of Note Holder(s)	Original Balance	Current Balance	Payment Amount	Maturity Date	Interest Rate	How secured or endorsed; type of collateral
()						9,700.00.00.00.00.00
Section 3. Stocks and Bonds ((Use attachmen	ts if necessary. Ea	ch attachment mu	ıst be identified as part	of this statement a	ind signed.)
Name of Security/Ticker/CUSIP	Number Shares	Cost	Market Value	Pledged (Yes or No)		Total Value
Section 4. Real Estate Owned	l					
		Property A		Property B		Property C
Type of Property						
Address						
Date Purchased						
Original Cost						
Present Market Value						
Name/Address of Mortgage F	Holder					
Monthly Rental Income						
Mortgage Balance						
Monthly Mortgage Payment (Principal & Interest plus Taxe	es)					
Status of Mortgage						

(Please photocopy this sheet if additional space is required)

Exhibit A to Credit Application

FINANCIAL STATEMENT

	ersonal Property & As elinquent, describe delir		ail; and if any is pledge	ed as security, st	ate name ar	nd lien holder amoui	nt of all lien terms
	<u> </u>						
Section 6. Unpaid	Taxes (Describe in deta	ail; ad to type, to who	m payable, when due, o	and to what prop	perty, if any,	a tax lien attaches.)
Section 7. Other Li	abilities, including No	otes or Debts Guara	nteed (Describe in det	ail.)			
Section 8. Life Insu	ırance Held						
Company	Policy #	Face Amount	Cash Surrender Value	Policy Loan (Yes	or No) Ple	edged (Yes or No)	Beneficiary
11 21 A 1			D 1 3			0.12	
Has either Applic	cant ever filed Bankruptcy?		Date?			Outcome?	
REPRESENTATION	NS AND WARRANTIES						
("Lender") on behalf of t	ed in this statement is provided the undersigned or persons, firm	ms, or corporations on whose	behalf the undersigned may e	either severally or joir	tly with others	execute a guaranty in the	Lender's favor. Each
undersigned represents a change is given to the l	s that the Lender is relying on t and warrants that the informat Lender by the undersigned. The	ion provided is true and com Lender is authorized to mak	plete and that the Lender may se all inquiries deemed necess	consider this statem ary to verify the accui	ent as continuin racy of the state	ng to be true and correct un ements made herein and to	ntil a written notice of odetermine each
	thiness. The Lender is authoriz is. Late payments, missed payn					ort information about eac	h undersigned's
	APPRAISAL COPY: Application of the give you a copy of any application.						e you for this
the statement, please co	REASONS FOR ACTIONS TAK ontact your loan officer at the L tatement of reasons for the der	ender address and phone nu	umber listed on the first page	of this document wit			
	onsin Applicants: No provision e creditor unless the creditor, p the adverse provision.						
(provided the applicant I good faith exercised any	al Credit Opportunity Act prohi has the capacity to enter into a right under the Consumer Cre istance Group, P.O. Box 53570	binding contract); because a dit Protection Act. The feder	all or part of the applicant's inc	come derives from any	y public assistar	nce program; or because th	ne applicant has in
Section 1014 of Title 18	of the United States Code was	amended to make it a feder					lue any land,
property or security for	the purpose of influencing in a	my may the action of any bar	in the deposits of which are in	isured by the rederal	Берозіспізата	mee corporation	
Signature:		Date:			SSN:		
Signature:		Date:			SSN:		

Exhibit B to Credit Application

INSURANCE AGENT/AGENCY QUESTIONNAIRE

(Use attachments if needed to fully respond)

ABOUT AGENCY BEING PURCHASED

Owner's Name: Selling Agent Number:					
Legal Name of Agency:					
Agency Address:					
		City	County	State	Zip
Agency Phone/Email: () Office phone	Office fax			Email add	ress
Owner's Phone/Email: () Personal cell phone			Personal email ad	dress	
When was the agency established?		How long has t	the seller owned it?		
Is there any debt on the agency?		If yes, Lender N	Name:		
Loan Balance:	Loan Maturity:		Loan Rate:		
What is the owner's reason for selling? _					
How many licensed staff (other than age	ent on record) are employed at	the agency?	How mar	y unlicensed?	
PLEASE COMPLETE THE FOLLOWII	NG FOR FACH ROOK OF RI	ISINESS YOU H	IAVE ACQUIRED IN	THE PAST 3 V	/FΔRS
Seller's Name:					
Legal Name of Agency:					
Agency Address:		City	County	State	Zip
Purchase Price of Agency:		Date the book	was transferred:		
Amount Financed:			APR) on the loan:		
Lender Name:					
Monthly Payments:			nths remaining on loan		
Collateral provided for loan:					
·					
When was agency established?		How long had t	the seller owned it? $_$		
What was the owner's reason for selling?					
Time was the owner's reason for sening.	?				

(Please photocopy this sheet if additional space is required)

Note: Please complete this page for each corporate officer identified other than applicant, in the Agency Information section on page 1 of this application. In addition, all Guarantors must sign pages 1, 4, 6, and 8 of this application.

Exhibit C to Credit Application

GUARANTOR QUESTIONNAIRE

Name of Applicant Requesting Cred	dit:			
GENERAL INFORMATION				
Guarantor's Name:				
Home Address:				
City, State, Zip:				
Social Security Number:		Date of Birth:		
Home Phone:		Work Phone:		
Email Address:		Fax Number:		
Driver's License Number:		State Issued:		
Driver's License Issue Date:		Driver's License Expiration Date:	Driver's License Expiration Date:	
EMPLOYMENT AND EDUCAT	ral income tax returns for the last			
		5 employers. If more space is needed, p	T	
Employer Name	Address	Position/Title	Dates of Employment	
EDUCATION:				
	School Name	Year Completed	Degree	
High School				
College				
Other				