

HEALTHCARE PRACTICE LOAN APPLICATION CHECKLIST

1. Prior three (3) year's personal tax returns (signed and dated)
2. Personal financial statement (signed and dated)
3. Resume or curriculum vitae
4. Valuation analysis on the practice being purchased (if available)
5. Appraisal of fixed assets being purchased with the practice (if significant value)
6. Prior three (3) year's signed corporate or Schedule C tax returns for the practice
7. Year-to-date financial statements (P & L and Balance Sheet)
8. Accounts receivable aging report
9. Business plan (including marketing plan)
10. Breakdown of loan request (practice purchase price, working capital, equipment)
11. Office lease with landlord's name and contact person/phone number
12. Landlord waiver form (sample to be provided by bank)
13. CPA's name and phone number/Attorney's name and phone number (if available)
14. Insurance agent's name and phone number
15. Copy of Colorado professional license (if available)
16. Copy of signed Letter of Intent to Purchase (when available)
17. Copy of signed Asset Purchase Agreement (when available)
18. Life insurance and business overhead insurance (copy of policy)
19. Six character references (educational, professional and business if new graduate)
20. Fee Schedule – review

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