Self-Employed

Business Narrative Form

This form to be completed by an employee (non-relative) of the borrower's business, with knowledge and information of the operations and finances of the business. Typical positions held by this employee would include: Controller, Treasurer, V.P. Finance, Finance Manager, Accounting Manager or Human Resources Manager. This form can also be completed by a third-party individual with direct knowledge of the borrower's business, such as Certified Public Accountant or an IRS Enrolled Agent.

1. Using the North American Industry Classification System (NAICS) below, please check the industry that best describes this business:

   ☐ Retail Trade   ☐ Mining-Quarrying-Oil & Gas Extraction
   ☐ Wholesale Trade   ☐ Other Services
   ☐ Accommodation-Food Service   ☐ Administrative-Support-Waste Management
   ☐ Agriculture-Forestry-Fishing-Hunting ☐ Information
   ☐ Construction (Home & Remodeling)   ☐ Real Estate-Rental and Leasing
   ☐ Manufacturing   ☐ Arts-Entertainment-Recreation
   ☐ Transportation-Warehousing   ☐ Professional-Scientific-Technical Service
   ☐ Utilities   ☐ Health Care-Social Assistance
   ☐ Educational Services   ☐ Finance and Insurance

2. Name of business:
3. Number of owners:
4. Service or Product provided:
5. Date business started:
6. Business legal structure: ☐ Partnership ☐ Corporation ☐ Sub-S Corporation ☐ Limited Liability Company
7. Business location: (insert address of primary location)
   a. Is the space a ☐ residence or ☐ commercial/warehouse?
8. Number of business locations: ☐ one   ☐ 2-5   ☐ greater than 5
9. Are these locations ☐ owned or ☐ leased?
10. Number of employees: ☐ 0-5 ☐ 6-10 ☐ 11-25 ☐ greater than 25
11. Describe any machinery or equipment required for business operations:
12. Does the business require inventory (raw material or finished goods) to generate sales?
    ☐ Yes ☐ No
    a. If yes, describe the inventory and turnover ratio:

Date: _____

Title: _____

Email & Phone No.: _____

Signature: _____