



RENO OFFICE:
 6572 S McCarran Blvd
 Reno, NV 89509
 Phone: (775) 770-1200

LAS VEGAS OFFICE:
 1551 Desert Crossing Ct Ste 100
 Las Vegas, NV 89144
 Phone: (702) 877-9111

www.nsd.com

INFORMATION REQUIRED FOR OWNERS / OFFICERS / MANAGERS AND/OR KEY EMPLOYEES:

First Name: _____
 Middle Name: _____
 Last Name: _____
 Date of Birth: ____/____/____
 Social Security Number: _____

If applicable, please list all other name(s) used and the period(s) of time used (i.e. 2000 – 2010): _____

Current Address: _____

Previous Address (can be **OMITTED** if more than 10 yrs at current address): _____

Length of time at address:
 (From): _____
 (To): _____

Length of time at address:
 (From): _____
 (To): _____

Home Phone Number: _____
 Work Phone Number: _____
 Cell Phone Number: _____
 Email address: _____
 Marital Status:(Married/Unmarried Separated) _____

Are you an honorably discharged Veteran of the U.S. Military? _____
 If yes, please provide the following information:
 Branch of Military: _____
 Rank at Discharge: _____
 Service Disabled? _____ Vietnam Veteran? _____

The following information is requested by the U. S. Small Business Administration for all SBA business loan applicants in order to determine the participation of various groups. Completion of this section is voluntary. With which ethnic group does the owner of the business most closely identify? (Choose only one.)

- White Native American (other than Eskimo or Aleut) Eskimo or Aleut Asian, Pacific Islander Hispanic African American

For any criminal offense – other than a minor vehicle violation – have you ever: 1) been convicted; 2) plead guilty; 3) plead nolo contendere; 4) been placed on pretrial diversion; or 5) been placed on any form of parole or probation (including probation before judgment – Please Initial) YES____ | NO____

Are you a U.S. Citizen or a Lawful Permanent Resident (LPR) of the U.S.: _____ (attach a copy of LPR documentation if applicable)

EDUCATION AND WORK EXPERIENCE:

Education: Name & Location	Dates Attended: From To	Major:	Degree Earned (indicate N/A if did you didn't graduate):
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Work History & Experience:

Name of Company: _____
 Location (City and State): _____
 Dates of Employment: From: _____ To: _____ Title: _____
 Duties & Responsibilities: _____

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SIGNATURE: _____ DATE: _____