APPLICATION FOR FINANCING | Check which RLF you seek: | EDA-Funded RLF | Cedar Rapids Flood RLF | Czech Village/NewBo RLF | Marion RLF | MedQuarter RLF | City of Swisher | The purpose of Revolving Loan Funds are to support business activities for which commercial credit is not otherwise available on terms and conditions which would permit completion and/or the successful operation or accomplishment of the project in the areas designated for each individual RLF. Each RLF has their own geographical restrictions. Not all applications are approved. | Your ECICOG staff contact is Robyn Jacobson at (319) 365-9941, Ext 134 or robyn.jacobson@ecicog.org.

INSTRUCTIONS:

- 1. **Applications are due no later than the last business day of the month.** Only fully completed applications received before the last business day of the month will be considered at the following month's Loan Review Committee meeting.
- 2. Please limit your responses to the application questions and your Business Plan Summary (Exhibit A) narratives to a combined total of no more than 20 pages. Applications must be typed and emailed to robyn.jacobson@ecicog.org.
- 3. Complete all sections of the application form. Show "N/A" where not applicable. Please contact the ECICOG if you need assistance. ECICOG staff will review the application at initial submission and determine if it is fully complete. Staff will provide immediate feedback if more information is required.
- 4. **Please complete the attached Ethnicity/Race/Gender Survey.** This information is not required at the time of application but is requested to ensure ECICOG's compliance with equal credit opportunity laws. Upon loan approval, ethnic, race, and gender information-reporting will be required of all loan recipients on an annual basis.

NOTICE OF REPORTING REQUIREMENTS:

Subsequent to loan approval, the following reporting information will be required:

- To verify employment data, copies of payroll reports shall be submitted semi-annually for ECICOG RLF funds.
- Financial statements (Balance Sheets and P&Ls) shall be submitted semi-annually where applicable.
- Project progress reports shall be submitted semi-annually where applicable.
- Proof of liability insurance shall be submitted annually.

- An ECICOG representative will conduct site visits over the duration of the loan terms where applicable
- Race, ethnic and gender information reporting may be required of all loan recipients on an annual basis where applicable.

All reporting requirements will be outlined in detail in the RLF Loan Agreement.

ECICOG requires all loan recipients to utilize automatic bank withdrawal for loan repayments.

APPLICATION FOR RLF ASSISTANCE

1. APPLICANT INFORMATION		Date/Revised:			
Business Name:					
Address:					
City:					
Contact Name:			Title:		
Phone: Fax:			Email:		
Tax ID Number (FE	EIN or SSN): _				
Business Structure:					
☐ Cooperative ☐ C-Corporation ☐ Partnership ☐ Sole Proprietorship					
New Business?	□ Yes	□ No	Date Established:		
Name of Individual	Completing th	is Form:			
Project Location (if	different from	above):			
2. OWNERSHIP I			or company with	h over 5% own	ership interest:
Name/Title		Address		% Ownership	Annual Compensation
Add an additional sl	heet, if necessa	ry.		l	

<i>J</i> .	BRIEFLY DESCRIBE THE BUSINESS OR PROJECT TO BE FUNDED:
	Please limit your response to ~300 words.
4.	BRIEFLY STATE THE OVERALL FUNDING NEED AND RLF NEED:
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5. JOBS:

List the jobs that will be retained and/or created as the result of this project. For retained jobs, include the <u>current</u> wage rate. For jobs to be created, including the <u>starting</u> wage rate.

Ioh Titlo	Number of	Retained (R) or	Starting or Current
Job Title	FTE* Jobs	Created (C)	Annual Wage
			\$
			\$
			\$
			\$
			\$
			\$
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*FTE = Full Time Equivalent (Total annual PT hours divided by 2080)

Total Retained FTE Jobs:	Total Created FTE Jobs:
Over what time frame will these jobs be created? _	
Employee Benefits: List key employee benefits provided over the above	re hiring time period:

(With respect to $\underline{medical}$ and \underline{dental} insurance plans, go to Exhibit H to provide more details.)

6. PROJECT BUDGET:

The budget should identify all sources of funding being considered including owner equity/investments, the primary lender for the project and the sources of any public funds (local loan funds, federal programs, city assistance, etc.)

Use of Funds	Cost	Source A	Source B	Source C	Source D	Source E
Land Acquisition	\$	\$	\$	\$	\$	\$
Site Preparation	\$	\$	\$	\$	\$	\$
Building Acquisition	\$	\$	\$	\$	\$	\$
Building Construction	\$	\$	\$	\$	\$	\$
Building Remodeling	\$	\$	\$	\$	\$	\$
Machinery	\$	\$	\$	\$	\$	\$
Furniture, Fixtures & Equip	\$	\$	\$	\$	\$	\$
Computers	\$	\$	\$	\$	\$	\$
Working Capital	\$	\$	\$	\$	\$	\$
Other (describe)	\$	\$	\$	\$	\$	\$
TOTAL	\$	\$	\$	\$	\$	\$

TERMS OF PROPOSED FINANCING					
Source of Funds	Amount	Type	Rate	Term	Conditions
Source A:	\$				
Source B:	\$				
Source C:	\$				
Source D:	\$				
Source E:	\$				
TOTAL	\$				

7. EXHIBITS:

All exhibits must be signed by the responsible party and dated.

Exhibit A: Business Plan Summary, including:

- Description of the Business.
- Description of the Target Markets
- Your Unique Proprietary Advantage
- Sales & Marketing Plan (including a brief analysis of competitors.
- Description of Operations (facilities, seasonal employment fluctuations, local sources of materials, etc.)
- Management (including brief profiles of key management personnel.)
- A minimum of three references (banking, professional or trade).

Exhibit B: A letter from the participating lender(s) stating the terms and conditions of their participation and the reason why they will not finance the entire project. (For ECICOG and CR RLF funds)

Exhibit C: EOY balance sheets and income statements for the previous three years.

Exhibit D: A current balance sheet (not over 90 days old).

Exhibit E: Three- year projected P&Ls with notes of explanation for any variances.

Exhibit F: The names of affiliates and/or subsidiary firms with the most current fiscal year-end financial statements for each.

Exhibit G: Personal financial statement of the owner(s) of the business with more than 20% ownership in the business.

Exhibit H: Preliminary plans and specifications covering new construction, and an itemized list of machinery and equipment to be purchased.

Exhibit I: A list of collateral to be offered as security for the specific loan (Note: An independent appraisal may be required.)

Exhibit J: Attach supporting documentation including credit reports, letters of intent, letters of reference, contracts, legal description, patents or pending patents, copies of leases, feasibility studies, etc. as appropriate.

company's history, make credit checks, contact the company's financial institution, and perform other related activities for the reasonable evaluation of this application.

The purpose of the RLF is to support business activities for which credit is not otherwise available on terms and conditions which would permit completion and/or the successful operation or accomplishment of the project in the respective RLF's geographical restrictive location . The lender reserves the right to recall the loan if these requirements are not met. Please consult with ECICOG.

Applications are due no later than the last business day of the month. Only fully completed applications received before the last business day of the month will be considered at the following month's Loan Review Committee meeting.

If the application is approved the undersigned agrees to pay a loan closing fee of 2.0% of the total loan amount.

Applicant (typed):	
Signature of Responsible Party:	
Signing Date:	

East Central Iowa Council of Governments:

In accordance with federal law and U.S. Department of Agriculture policy, ECICOG is prohibited from discriminating on the basis of race, color, national origin, sex, religion, age, disability, sexual orientation, or marital or family status. (Not all prohibited bases apply to all programs.)

To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-w, Whitten Building, 1400 Independence Ave., SW, Washington, DC 20250-9410 or call (202) 720-5964 (voice and TDD). USDA is an equal opportunity provider and employer.

ECICOG is an Equal Opportunity Provider.

9. ETHNICITY/RACE/GENDER SURVEY

The following information is requested by the Federal Government for certain types of loans in order to monitor the lender's compliance with equal credit opportunity. You are not required to furnish this information, but are encouraged to do so.

The law requires that a lender may neither discriminate on the basis of this information nor on whether you choose to furnish it. However, if you choose not to furnish it, under Federal regulations, this lender is required to note race/ethnicity on the basis of visual observation or surname.

If you do not wish to furnish the above information, please check the box below. I do not wish to furnish this information. **Ethnicity:** ☐ Hispanic □ Latino ☐ Other (describe) _____ **Race:** (Mark one or more) ☐ White ☐ Black or African American ☐ American Indian/Alaska Native ☐ Asian/Asian Continent ☐ Native Hawaiian or Other Pacific Islander Gender: ☐ Male ☐ Female