

Five County Economic Development District
APPLICATION FOR BUSINESS LOAN

I. APPLICANT/ INFORMATION ABOUT YOU

Name:		
Home address:		
City:	State:	ZIP Code:
Home Phone:	Cell Phone:	Fax:
E-mail:		

II. INFORMATION ABOUT YOUR BUSINESS

Name of business:		
Type of business:		
Date business established:		
IRS Employer ID #:		
Address of business:		
City:	State:	ZIP Code:
Business Phone:	Fax:	
E-mail:	Website:	
# of Employees	Present:	After Approval:

III. INFORMATION ABOUT MANAGEMENT

(LIST THE NAME OF ALL OWNERS, OFFICERS, DIRECTORS, AND/OR PARTNERS HAVING 20% OR GREATER INTEREST)

Name and Title:		
Percent Ownership:	Annual Compensation:	
Name and Title:		
Percent Ownership:	Annual Compensation:	
Name and Title:		
Percent Ownership:	Annual Compensation:	
Name and Title:		
Percent Ownership:	Annual Compensation:	
Name and Title:		
Percent Ownership:	Annual Compensation:	

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IV. HOW DO YOU PLAN TO USE THE LOAN MONEY

Total Loan Requested: \$

Proposed Term of Loan (Years/Months):

Building New: \$ Purchase: \$ Renovate: \$	Amount for Building: \$ Amount for Land: \$
Amount for New Equipment: \$	Amount for Notes Payable: \$
Amount for Working Capital: \$	Amount for Equipment Repair: \$
Amount for Accounts Receivable: \$	Other: \$

V. SUMMARY OF COLLATERAL

	Present Market Value	Present Loan Balance
Land and Building	\$	\$
Inventory	\$	\$
Accounts Receivable	\$	\$
Machinery/Equipment	\$	\$
Furniture/ Fixtures	\$	\$
Other	\$	\$
Total Collateral	\$	\$

VI. ABILITY TO MEET FIXED OBLIGATIONS: (PLEASE ATTACH A PROJECTED CASH FLOW STATEMENT COVERING ONE YEAR BY MONTH AND AN ADDITIONAL 2 YEARS BY YEAR.)

VII. INVENTORY CYCLE (PLEASE INDICATE YOUR COMPANY'S AVERAGE INVENTORY CYCLE AND PROVIDE INFORMATION REGARDING INDUSTRY STANDARDS FOR YOUR OPERATIONS.)

VIII. OTHER FUNDING SOURCES (LIST OTHER SOURCES OF FUNDING BEING USED FOR THIS PROJECT. PLEASE NOTE THAT THE BORROWER MUST INJECT AT LEAST 10% EQUITY INTO THE STRUCTURE.)

Funding Source	Loan Officer (name/phone)	Loan Amount	Maturity	Interest Rate	Approved (Y/N)

AGREEMENTS AND CERTIFICATIONS

The undersigned authorize(s) Five County EDD RLF to gather all consumer and business information, including regular and investigative reports relevant to the approval of this requested loan and relevant to the continued borrowing relationship of the undersigned and the Five County EDD RLF. The undersigned further request(s) and authorize(s) all creditors and all consumer and business reporting agencies to furnish such information to the Five County EDD RLF. The undersigned acknowledge(s) that this completed and signed application is only an application for credit. This application, even if favorably received, does not constitute a commitment on the part of the Five County EDD RLF to extend credit. The undersigned represent(s) and warrant(s) that the undersigned has (have) no knowledge of any fact that does or with the passage of time could materially adversely affect the credit worthiness of the undersigned for purposes of either obtaining or repaying this loan. The undersigned agree(s) to notify the Five County EDD RLF immediately in writing if any of the foregoing information becomes inaccurate or misleading in any respect.

I/we authorize the release to Five County Association of Governments (FCAOG) of any and all information they may require at any time for any purpose related to our credit transaction with them. I/we further authorize FCAOG to release such information to any entity they deem necessary for any purpose related to our credit transaction with them.

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS ENTIRE APPLICATION AND ATTACHMENTS AS COMPLETED AND THAT EACH RESPONSE IS TRUE AND COMPLETE TO THE BEST OF MY /OUR KNOWLEDGE AND ACCURATELY REFLECT MY INTENDED RESPONSE.

Applicant:	Date:
Co-maker:	Date:

PERSONAL FINANCIAL STATEMENT

(THIS STATEMENT IS SUBMITTED IN CONNECTION WITH THE REQUESTED BUSINESS LOAN. ANY OWNERS, OFFICERS, DIRECTORS, AND/OR PARTNERS HAVING 20% OR GREATER INTEREST IN THE BUSINESS SHALL SUBMIT A PERSONAL FINANCIAL STATEMENT.)

Personal Financial Statement as of:

Name and Address (of person and spouse submitting Statement):

Social Security #:

<i>Assets</i>		<i>Liabilities</i>	
Cash on hand and in Banks	\$	Accounts Payable	\$
Savings Account in Banks	\$	Notes Payable—Banks (Describe- Section 2)	\$
US Government Bonds	\$	Notes Payable—Others (Describe- Section 2)	\$
Accounts/Notes Receivable	\$	Installment Account (Auto) Monthly Payments: \$	\$
Life Insurance (Cash Surrender Value Only)	\$	Installment Account (Other) Monthly Payments: \$	\$
Other Stocks/Bonds (Describe- Section 3)	\$	Loans on Life Insurance	\$
Real Estate (Describe- Section 4)	\$	Real Estate Mortgages (Describe- Section 4)	\$
Automobile (Present Value)	\$	Unpaid Taxes (Describe- Section 7)	\$
Other Personal Property (Describe- Section 5)	\$	Other Liabilities (Describe- Section 8)	\$
Other Assets (Describe- Section 6)	\$	TOTAL LIABILITIES	\$
		NET WORTH	\$
TOTAL ASSETS	\$	TOTAL LIABILITIES & NET WORTH	\$

Section 1: Source of Income		Contingent Liabilities	
Salary	\$	As Endorser or Co-Maker	\$
Net Investment Income	\$	Legal Claims/Judgements	\$
Real Estate Income	\$	Provision for Federal Income Tax	\$
Real Estate Income	\$	Other Special Debt (Describe below)	\$
Other Income (Describe below)	\$		
Length of Current Employment _____ Years			
Length of Previous Employment _____ Years			
Description of items listed above:			

Section 2: Notes Payable to Banks and Others					
Name and Address of Note Holder	Amount of Loan		Payment Amount	Maturity of Loan	How Secured or Endorsed Type of Collateral
	Original Balance	Present Balance			
	\$	\$	\$		
	\$	\$	\$		
	\$	\$	\$		
	\$	\$	\$		
	\$	\$	\$		

Section 3: Other Stocks and Bonds

Provide listed and unlisted stocks and bonds. (Use separate sheet if necessary)

# of Shares	Names of Securities	Cost	Market Value	Statement Date Amount
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$

Section 4: Real Estate Owned (List each parcel separately. Use supplemental sheets if necessary. Each sheet must be identified as a supplement to this statement and signed.)

	Property A	Property B	Property C
Type of Property			
Address			
Date Purchased			
Original Cost	\$	\$	\$
Present Market Value	\$	\$	\$
Tax Assessment Value	\$	\$	\$
Mortgage Holder Name/Address			
Mortgage Balance	\$	\$	\$
Monthly Payment Amount	\$	\$	\$

Section 5: Other Personal Property (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and if delinquent, describe delinquency.)

Description of items listed above:

Section 6: Other Assets (Describe)

Section 7: Unpaid Taxes (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

Section 8: Other Liabilities (Describe in detail.)

I authorize FCAOG to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date (s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan.

Signature	Date	Social Security No.
Signature	Date	Social Security No.