

# NORTHEASTERN PENNSYLVANIA ALLIANCE REVOLVING LOAN FUND PROGRAM LOAN APPLICATION

APPLICANT FEIN # DUNS #

Address Contact Person Telephone: Email Address: Cell Phone: APPLICANT IS A: \_\_\_Corporation \_\_\_\_ Limited Liability Company \_\_\_\_Partnership \_\_\_\_ Limited Liability Partnership \_\_\_\_\_S-Corporation \_\_\_\_Proprietorship \_\_\_\_\_ IDENTIFY THE STATE OF ORGANIZATION OF THE APPLICABLE ENTITY: **MANAGEMENT and OWNERSHIP** Owns Name (attach resume) Social Security # Age Title Annual % Compensation **TYPE OF ENTERPRISE** (check appropriate space(s) for your business) Advanced Technology Research & Development Advanced Technology
Commercial (Retail/Wholesale) Warehouse or Terminal Industrial Other (specify) Manufacturing NAICS Code TYPE OF PRODUCT: **BUSINESS PROFESSIONAL SERVICE PROVIDERS** Name Contact Person Telephone Commercial Bank Address Legal Counsel Address Accountant Address

anticipated end of Year One to Year Three Projections. (WW = Work Week)								
EMPLOYMENT DATA	UN- SKILLED	SEMI- SKILLED	SKILLED	TOTAL	ANNUAL PAYROLL	AVE. WAGE	AVERAGE WW HRS	PERCENT BENEFITS
EXISTING EMPLOYMENT								

Provide employment, payroll and work week (WW) hours for your business. Data should be based on current or

NEPA Loan Request \$\_\_\_\_\_ Total Project Cost \_\_\_\_\_

Worldwide (including Pennsylvania): \_\_\_\_\_

**EMPLOYMENT** (Include parent, subsidiaries and affiliates)

Pennsylvania:

(All PA Plants)								
NEW EMPLOYMENT- YE (do not include above exis								
THIS SITE ONLY								
NEW EMPLOYMENT- YE (do not include above ex or Year 1)								
THIS SITE ONLY								
TOTAL								
PHYSICAL FACILITI Do you own/rent? Lot size in acres: Annual Rental:		ovide cop		Building in Purchase	square feet price of build ppraised va	ding:		
METHOD OF FINANC	CING							
Complete the following. Identify each project funding source in a separate column, indicate the use and amount of funds to be expended and provide the other information requested for each funding source. Use additional paper if more than four funding sources are to be used for your project.								
FINANCING	Source No NEPA LOA PROGRA	AN	Source	No. 2	Source	No. 3	Sourc	ce No. 4
Use of Funds:  1. Land/Building  2. Machinery/ Equipment  3. Working Capital TOTAL Term (years) Interest Rate (%) Collateral Contact Person Telephone No.	\$\$ \$\$ 	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$			\$ \$ \$		\$ \$ \$	
SCHEDULE OF COLLATERAL OFFERED BY THIS APPLICANT  Description Value Total Liens Lien Holder Name								
Description	Value			TOTAL LIEN	3	Liei	n Holder Na	ante
1	1		1		1	1		
2	2			2 2		2	2	
3	3			3		3		
4	4			4		4		

SECURED DEBTS OF APP	LICANT (REAL ESTATE)	*	
	Property 1	Property 2	Property 3
Amount of Debt			
Date Debt Incurred			
Original Amount Borrowed			
Current Principal Balance			
Description of Real Estate Address			
Name of Secured Party			
Monthly Payment			
Maturity Date			
SECURED DEBTS OF APP	LICANT (NON REAL EST	TATE) *	
	Item 1	Item 2	Item 3
Amount of Debt			
Date Debt Incurred			
Original Amount Borrowed			
Current Principal Balance			
Description of Secured Property and			
Name of Secured Party			
Monthly Payment			
Maturity Date			
UNSECURED DEBTS OF A	PPLICANT	1	
	Item 1	Item 2	Item 3
Amount of Debt			
Date Debt Incurred			
Original Amount Borrowed			
Current Principal Balance			
Name of Creditor Paid			
Monthly Payment			
Maturity Date			
*Please do not complete if thi	s information is included v	vithin the financial statemen	ts

WITH RESPECT TO ANY ABOVE, ARE YOU AWAR! PLEASE DESCRIBE IN DET	E OF ANY UNCURED EVE	NT OF DEFAULT BY T	HE APPLICANT? IF SO,			
PLEASE DESCRIBE IN DE I						
	1	2	3			
Name:						
Title						
Authorized Signee OR Guarantor						
SSN or TIN #						
Street Address						
City						
State						
ZIP Code						
HISTORY OF BUSINESS		<u>.</u>				
· · - ·	9	Date/State Incorporated: % Sales outside PA: Number of Customers:				
Major Customers: Major Competitors: Major Suppliers:	1 2 1 2	2	3 3			
Please answer the following	questions on separate sheets	s of paper:				
Provide a detailed detail	scription of your business					
2. Describe your production, competitive advantage and marketing strategy.						
ACKNOWLEDGMENTS						
I/We hereby apply for the loan of relevant to the Application. NEP All information contained herein belief; it is intended to induce the to the applicant.	A is hereby authorized to verify and submitted herewith, is true	with other parties and to mal and complete to the best of	ke investigations of our credit. the applicant's knowledge and			
Date		Signature and Title				
Questions and completed applic Pennsylvania Alliance, 1151 Oa			Finance Center, Northeastern			

### NORTHEASTERN PENNSYLVANIA ALLIANCE REVOLVING LOAN FUND

### **Notice to Applicants**

This notice to you is provided and required by the "Right to Financial Privacy Act of 1978." In seeking a loan through one or more of the various Revolving Loan Funds administered by the Northeastern Pennsylvania Alliance (NEPA) you hereby grant access rights to financial records held by financial institutions that are or have been doing business with you or your business, including financial institutions participating in this loan. Also, you hereby grant NEPA the right to obtain a credit report from a credit bureau service on your company and personal credit reports on any principals with twenty (20%) percent or more ownership in the company. Access rights continue for the term of any approved loan without further notice or authorization. Under certain Revolving Loan Funds, verification of employment and payment of unemployment compensation and worker's compensation will be made through the Department of Labor and Industry.

This authorizes NEPA to use or transfer financial records on an application for an approved loan as necessary to process, service or foreclose a loan or collect on a defaulted loan. No other transfer or your financial records will be permitted.

I/We authorize disclosure of all information submitted in connection with this application for an approved loan as necessary to process, service, or foreclose a loan or collect on a defaulted loan. No other transfer of your financial records will be permitted.

As consideration for any Management and Technical Assistance that may be requested, I/we waive all claims against NEPA and its consultants.

I/We give the assurance that we will comply with Sections 112 and 113 of Volume 13 of the Code of Federal Regulations. These Code Sections prohibit discrimination on the grounds of race, color, sex, religion, marital status, handicap, age, or national original by recipients of federal financial assistance and require appropriate report and access to books and records. In addition, I/we give assurance that we will comply with the requirements of Federal and State laws concerning the environment, prevailing wage rates (Davis-Beacon) for construction projects, flood protection insurance, if projects sites are located within a flood plain area, and access for the physically handicapped. These requirements are applicable to any one who buys or takes control of the business. I/We realize that if I/we do not comply with these requirements, NEPA can call, terminate, or accelerate repayment on my/our loan.

Authority to Collect Personal Information – This information is provided pursuant to Public Law 93-579 (Privacy Act of 1974).

Effects of Nondisclosure- Omission of an item means your application might not receive full consideration.

Agree of Nonemployment of NEPA personnel – I/We agree that if NEPA approves this loan application, I/we will not, for at least two (2) years, hire as an employee or consultant anyone that was employed by NEPA during the one year period prior to the disbursement of the loan.

All information is true and complete to the best of	f my knowledge.	
I/We certify that I/we have read this "Notice to Ap	oplicants" and that I/we have t	peen given a copy of it.
BY:		
(President or Duly Authorized Executive)	Company Name	Date

# **Proprietors, Partners, Principals, and Guarantors**

Signature	Social Security #	Date
Signature	Social Security #	 Date
Signature	Social Security #	 Date
Equal Credit Opportunity A	ct	
assistance in order to moning the second in the second in the second in the second in the second if you choose not to furnish	s requested by the Federal Governmention the lender's compliance with the Einformation, but are encouraged to do e basis of this information or on whether it, under Federal regulations, this lend rvation or surname. If you do not wish	qual Credit Opportunity Act. You ar so. The law requires that a lender er you choose to furnish it. Howeve der is required to note race/ethnicity
I do not wish	to furnish the below information.	
Name of Applicant*	Gender: Male Female	Race (see codes below):
Name of Co-Applicant*	Gender: Male Female	Race (see codes below):
Race: 1- American Indian or Alaska	Native: 2 – Asian: 3 – Black or African American:	1 –Native Hawaiian or Pacific Islander: 5 – Whi

Hispanic or Latino; 6 – White – Not Hispanic or Latino

\*If Applicant or Co-Applicant is a business, then the President/Owner of the business should provide this information.

NEPA is an Equal Opportunity Lender/Provider TDD/TDY

# PERSONAL FINANCIAL STATEMENT

	A5 01	,20
	nt or (2) each limited partner, shareholder, memb r (3) any other person or entity providing a guara	
Name	Business Phone ( )	
Residence Address	Residence Phone ( )	
City, State & Zip Code		
Business Name of Applicant/Borrower		

ASSETS		LIABILITIES		
	(Omit Cents)		(Omit Cents)	
Cash on hands & in banks	\$	Accounts Payable	\$	
Savings Account	\$	Notes Payable to Banks and Others (Describe in Section 2)	\$	
IRA or other Retirement Account	\$	Installment Account (Auto)	\$	
Accounts & Notes Receivable	\$	Mo. Payments \$		
Life Insurance-Cash Surrender Value Only (Complete Section 8)	\$	Installment Account (other)		
Stocks and Bonds (Describe in Section 3)	\$	Mo. Payments \$ Loan on Life Insurance	\$	
Real Estate (Describe in Section 4)	\$	Mortgages on Real Estate (Describe in Section 4)	\$	
Automobile-Present Value	\$	Unpaid Taxes (Describe in Section 6)	\$	
Other Personal Property (Describe in Section 5)	\$	Other Liabilities (Describe in Section 7)	\$	
Other Assets (Describe in Section 5)	\$	Total Liabilities	\$	
		Net Worth	\$	
TOTAL:	\$	TOTAL:	\$	

	ourc	e of Inco	<u>me</u>		Contingent Liabilities				
0.1				<b>^</b>	 			\$	
Salary				\$		As Endorser of Co-Maker			
Net Investme	· · · · · · · · · · · · · · · · · · ·				Legal Claims & J			\$	
Real Estate I	eal Estate Income \$			Provision for Fed	eral Income	e Tax	\$		
Other Income (Describe Below) \$			Other Special De	bt		\$			
<u>Description</u>	of O	ther Inco	ome in So	ection 1					
*Alimony or Chi toward total inco		oport payme	ents need r	not be disclosed in "Oth	ner Income" unless it is d	esired to have	e such pay	ments counted	
SECTION 2.				ANK AND OTHERS. statement and signe	(Use attachments d).	if necessary	. Each a	ttachment must	
Name and Addr of Noteholders	ess	Original E	Balance	Current Balance	Payment Amount	Frequency (Monthly, e	tc.)	How Secured or Endorsed Type of Collateral	
		<u> </u>				1	l		
SECTION 3.		ocks and B tement and		attachments if neces	ssary. Each attachment	must be ide	ntified as	part of this	
Number of Shar	Number of Shares Name of Securities		Cost Market Value Quotations/Exchange				Total Value		
					itely. Use attachments	if necessary.	Each atta	achment must be	
SECTION 4.				statement and signe	ed).				
	ide							Property C	
Name of Proper Name and Addr	ide rty	ntified as p		statement and signe	ed).			Property C	
Name of Proper Name and Addr	rty ress o	ntified as p		statement and signe	ed).			Property C	
Name of Proper Name and Addr Holder Date Purchased Original Cost	rty ress o	ntified as p		statement and signe	ed).			Property C	
Name of Proper Name and Addr Holder Date Purchased Original Cost Present Market Name and Addr	rty ress o	f Title		statement and signe	ed).			Property C	
Name of Proper Name and Addr Holder Date Purchased Original Cost Present Market Name and Addr Holder Mortgage Account	rty ress o	f Title		statement and signe	ed).			Property C	
Name of Proper Name and Addr Holder Date Purchased Original Cost Present Market Name and Addr Holder Mortgage Accou Mortgage Balan Amount of Payn	rty ress of	f Title  f Market		statement and signe	ed).			Property C	
Name of Proper Name and Addr Holder Date Purchased Original Cost Present Market Name and Addr Holder Mortgage Accou Mortgage Balan Amount of Payn Month/Year	value ress of the	f Title  f Market		statement and signe	ed).			Property C	
Name of Proper Name and Addr Holder Date Purchased Original Cost Present Market Name and Addr Holder Mortgage Accou Mortgage Balan Amount of Payn	value ress of the	f Title  f Market		statement and signe	ed).			Property C	
Name of Proper Name and Addr Holder Date Purchased Original Cost Present Market Name and Addr Holder Mortgage Accou Mortgage Balan Amount of Payn Month/Year	rty ress of Value ress of unt Nunce ment prage	f Title  f Market  umber  per	al Property	Property A  Property A  y and Other Assets.	ed).	pledged as s	security, s	tate name and	

SECTION 7.		
SECTION 8.	Life Insurance Held. (Give face amount an and beneficiaries).	d cash surrender values of policies – name of insurance company
I certify the aboare made for the	ove and the statement contained in the attachme	accuracy of the statements made and to determine my creditworthiness.  Into are true and accurate as of the stated date(s). These statements eing a loan. I understand FALSE statement may result in denial of credi
Signature	Date	Social Security Number
Signature	Date	Social Security Number