

Dear Loan Applicant,

Thank you for your interest in South Central Planning and Development Commission's Revolving Capital Fund, Revolving Loan Fund and/or LA Innovations. Attached are the necessary forms to be completed for consideration for financial assistance via SCPDC. The purpose of the Programs is to foster economic development within our Parish and to assist businesses during setup or growth phase, thereby, creating jobs in our community.

One requirement for approval of this loan is that you first visit a banking institution for preliminary funding. Once you have done so, you must either provide us with a denial letter from the bank or a letter proposing Parish participation.

In addition to the attached forms, the following documents are also necessary to facilitate the application process:

- Previously mentioned letter from the bank
- A **signed** copy of your last three (3) years personal and business (if yours is an established business) tax returns
- Current (the last two quarterly) financial statements (if yours is an established business)
- Proof of business/ownership structure
- Current Articles of Incorporation (if applicable)
- Business Plan
- Resumes of company owner/partners

If you have any questions regarding this application package, please feel free to contact me at (985) 851-2900 ext. #2065. Again, thank you for your interest on our Loan Programs.

Best Regards,
SOUTH CENTRAL PLANNING AND
DEVELOPMENT COMMISSION

Cullen Curole

Cullen Curole, Administrator
Economic Development Department

Enclosures

Revised 02/06/14

HOW TO APPLY FOR
THE SOUTH CENTRAL PLANNING AND DEVELOPMENT COMMISSION
SMALL BUSINESS LOANS

The Loan Programs is administered by:
South Central Planning and Development Commission (SCPDC)

The following are summarizations of the step-by-step procedures to be followed in applying for either a new or existing business loan:

A. For a New Business

1. Write a detailed description of the business to be established. This is called a business plan and all banks will require it.
2. Describe your experience and management capabilities. This should include a resume of all key personnel.
3. Prepare an estimate of how much money you and/or others have to invest in the business, and how much you will need to borrow. (See Application Page 2)
4. Prepare a current personal financial statement listing all your personal assets and liabilities. We have forms that can make it easy to follow.
5. Prepare a detailed projection of earnings anticipated for your first three years in business. This most likely will be a part of your business plan.
6. List collateral you can offer as security for the loan, including an estimate of the present market value of each item. This could come from your personal assets, other business assess or from outside sources (family, etc.).
7. Take all the above with you to your banker and ask for a loan. If the loan is declined, then obtain all of the refusals in writing. If a bank offers to fund a portion of the project, then you would need written evidence of their commitment to fund some level of the total project cost.

HOW TO APPLY FOR
THE SOUTH CENTRAL PLANNING AND DEVELOPMENT COMMISSION
SMALL BUSINESS LOANS

B. For an Established Business

1. Write a detailed description of the business, of the scope of the expansion and/or of the project or plan that will help to keep you in business. This is called a business plan and all banks will require it.
2. Describe your experience and management capabilities. This should include a resume of all key personnel.
3. Prepare an estimate of how much money you and/or others have to invest in the business, and how much you will need to borrow. (See Application Page 2)
4. Prepare a current financial statement (balance sheet) listing all assets and liabilities of the business. In addition, prepare a profit and loss statement of the business which reflects the same time period; do not include personal items.
5. Prepare a current personal financial statement listing all your personal assets and liabilities for all owners of 20% > ownership. We have forms that can make it easy to follow.
6. Prepare a detailed projection of earnings anticipated for your first three years in business. This most likely will be a part of your business plan.
7. List collateral the business can offer as security for the loan, including an estimate of the present market value of each item.
8. Take the above with you to your banker and ask for a loan. If the loan is declined, then obtain all of the refusals in writing. If a bank offers to fund a portion of the project, then you would need written evidence of their commitment to fund some level of the total project cost.
9. If it is determined by SCPDC that your request fits the criteria of any of the loan programs, then you will be asked to return to one of the previous banks to gain their support in writing with the expectation of some level of participation of the RCF which generally will not exceed 35% of the total project cost.



In Need of Assistance with your Business Plan?

Please Contact Us

LSBDC at Nicholls State University

Thibodaux

(NSU SBDC)
322 Audubon Drive
Thibodaux, LA 70301
Tel: 504-831-3730

Monday thru Friday
By Appointment ONLY

Greater New Orleans Region

Metairie

UNO Jefferson Center
3330 N. Causeway Blvd, Suite 447
Metairie, LA 70002
Tel: 504-831-3730

Monday thru Friday
8:30 AM to 4:30 PM

St John the Baptist Parish Business Training Center

South Central Louisiana Technical College, River Parishes Campus

181 Regala Park Road
Reserve, LA 70084
Tel: 985-479-1247

Monday, Tuesday & Thursdays
9:00 AM – 3:00 PM
Wednesdays
9:00 AM – 7:00 PM
Fridays – by Appointment ONLY

LSBDC at University of Louisiana at Lafayette

LSBDC at University of Louisiana at Lafayette

2250 Johnston Street, 2nd Floor
Lafayette, LA 70503
Tel: 337-482-6312

Monday thru Friday
8:00 AM to 5:00 PM

Visit on line:

www.lsbdc.org

Outline of a Typical Business Plan

I. Cover Letter

- A. Name of the bank contacted
- B. Name of the banker contacted
- C. Dollar amount requested
- D. Terms and timing of loan request
- E. Type and price of securities (collateral)

II. Summary

- A. Business description
 - 1. Name
 - 2. Location and plant description
 - 3. Product
 - 4. Market and competition
 - 5. Management goals
- B. Business goals
- C. Summary of financial needs and application of funds
- D. Earnings projections and potential return to investors

III. Market Analysis

- A. Description of total market
- B. Industry trends
- C. Target market
- D. Competition

IV. Products or Services

- A. Description of product line
- B. Proprietary position: patents, copyrights and legal and technical considerations
- C. Comparison to competitors' products

V. Manufacturing Process (if applicable)

- A. Materials
- B. Sources of supply
- C. Production methods

VI. Marketing Strategy

- A. Overall strategy
- B. Pricing Policy
- C. Sales terms
- D. Method of selling, distributing and servicing products

VII. Management Plan

- A. Form of business organization
- B. Board of directors composition
- C. Officers: organization chart and responsibilities

- D. Resumes of key personnel
- E. Staffing plan/number of employees
- F. Facilities plan/planned capital improvements
- G. Operating plan/schedule of upcoming work for the next one to two years

VIII. Financial Data

- A. Financial history (five years to present) - See NOTE 1*
- B. Five-year financial projections (first year by quarters; remaining years annually)
 - 1. Profit and loss statements
 - 2. Balance sheets
 - 3. Cash flow charts
 - 4. Capital expenditures estimates
- C. Explanation of projections
- D. Key business ratios
- E. Explanation of use and effect of new funds
- F. Potential return to investors compared to competitors and industry in general.

***NOTE 1:**

ALL FINANCIAL STATEMENTS MUST MEET GENERALLY ACCEPTED ACCOUNTING PRACTICES (GAAP).

****NOTE 2:**

SUBMIT COMPLETED PLAN TO BANK. THEN, SUBMIT A COPY TO THE LOUISIANA ECONOMIC DEVELOPMENT CORPORATION, WITH BANK AND CONTACT PERSON AT THE BANK.



Appendix C

Loan Application Form

BUSINESS INFORMATION:

INDUSTRY CODE (from taxes): _____

Business Name: _____

Mailing Address: _____ City: _____ State: _____ ZIP Code: _____

Physical Address: _____ City: _____ State: _____ ZIP Code: _____

Name of Principal in Charge: _____ Title/Position: _____

Phone #'s Home: () _____ Business Phone: () _____

Cell: () _____ Date Business Established: _____

Type of business: _____

Employer ID #: _____ Email: _____

How did you hear about us? _____

STRUCTURE OF BORROWING ENTITY:

Name of Borrower: _____

When was your entity established? (date) _____ Type of Entity (check one):

- 1. _____ Corporation President: _____ Secretary: _____
- 2. _____ Partnership Vice: _____ Treasurer: _____
- 3. _____ Sole Proprietorship Managing Members _____ %
- 4. _____ Limited Liability Company (Names) _____ %
- _____ %
- _____ % 100%Total

Is the business: _____ Industrial Firm _____ A Service Provider
_____ A Manufacturer _____ Retailer

BUSINESS SUMMARY:

IF YOU ARE PURCHASING AN EXISTING BUSINESS, ANSWER ADDITIONAL QUESTIONS ON PAGE 6

- 1. What products or services do you sell (enclose any catalogs and/or brochures)?

- 2. What is your geographic market area? _____
- 3. How do you market your product or service? _____
- 4. List competition _____
- 5. How will the business benefit the community? _____

FRANCHISE:

IF YOU ARE PURCHASING A FRANCHISE, ANSWER ADDITIONAL QUESTIONS ON PAGE 7

Is your business a franchise? _____ Yes _____ No
If so, include a copy of the Franchise Agreement and the Franchisor's FTC Disclosure Statement.

TOTAL PROJECT COST COMPONENTS

(ESTIMATES REQUIRED)

****Contribution**:** borrower's cash or inkind injection

	Use of Funds	RLF	RCF	INN	**Contribution**
Land Acquisition:	\$	Y	Y	Y	\$
Building Acquisition Existing on Site:	\$	Y	Y	Y	\$
Modular/Mobil:	\$	N	Y	Y	\$
Small Scale Renovation:	\$	N	Y	Y	\$
Full Scale New Construction:	\$	N	N	Y	\$
*Purchase of Inventory:	\$	Y	Y	Y	\$
*Purchase of Machinery/Equipment:	\$	Y	Y	Y	\$
Associated Installation Cost: ___No ___Yes	\$	Y	Y	Y	\$
Will installation require modification of building?	If Yes ___	N	Y	Y	
	If No ___	Y	Y	Y	
Working Capital:					
Lease of Machinery/Equipment:	\$	Y	Y	N	\$
Associated Installation Cost: ___No ___Yes	\$	Y	Y	N	\$
Will installation require modification of building?	If Yes ___	N	Y	N	
	If No ___	Y	Y	N	
* Lease of Building/Property:	\$	Y	Y	N	\$
* Rent of Building/Property:	\$	Y	Y	N	\$
Refinance of Existing Debt:	\$	Y/N	Y/N	N	\$
Payroll:	\$	Y	Y	N	\$
Payroll Taxes (CANNOT pay delinquent taxes):	\$	Y	Y	N	\$
Permits:	\$	Y	Y	Y	\$
Licenses:	\$	Y	Y	N	\$
Insurance:	\$	Y	Y	N	\$
Office Expenses:	\$	Y	Y	N	\$
Other:	\$?	?	?	\$
TOTAL PROJECT:	\$				\$

*** Quotes for equipment/inventory purchases as well as documentation of current rental/lease agreement is required***

SOURCE OF EQUITY INJECTION

___Cash: \$ _____ Other: \$ _____ Describe _____

EQUIPMENT PURCHASED within the past 12 months pertaining to the business can be used.

Invoices and/or receipts of purchase will be required.

List collateral you can offer as security for the loan, including an estimate of the present market value of each item.
(This will come from your personal financial statement.)

HISTORY AND NATURE OF YOUR BUSINESS

PROJECT INFORMATION

Physical Address of Project Site: _____

City: _____ Parish: _____ State: _____ Zip : _____

1. Are you purchasing land? _____ No _____ Yes *If yes, then an environmental form is to be completed*
2. Are you purchasing a building? _____ No _____ Yes *If yes, then a recent appraisal is required (w/in 12 months)*
3. Is construction being done? _____ No _____ Yes *If yes, then a building development permit is required*
4. If expanding, what will be the size of your new (or enlarged) facility? _____
5. How will this new (or remodeled) facility help your business (please be specific, e.g. increased revenues, add new products/services, improve efficiency, etc.)? _____
6. If you are moving to a new location, how will this effect your business? _____
7. Realistic timetable of project:
 Start date: _____ completion date: _____

BUILDING SIZE AND OCCUPANTS

1. What is the square footage of this building? _____
2. Tenants:
 - a. Are there any existing tenants that will remain in the building? _____ Yes _____ No
 - b. Do you intend to lease out any space? _____ Yes _____ No

If you answered "YES" to either question, complete the information below:

<i>Tenant</i>	<i>Square Footage</i>	<i>Lease Expires</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

EMPLOYMENT

Current Number of Employees: _____ Anticipated New Jobs: _____

Number of new employees anticipated as a result of this project within the next two years:

<i>Number of new employees</i>	<i>Job Category</i>	<i>Hourly Rate</i>
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

PLEASE ANSWER THE FOLLOWING QUESTIONS, AND PROVIDE THE APPROPRIATE INFORMATION, IF APPLICABLE

Do you have any affiliate and/or subsidiary firms? _____ Yes _____ No
 If yes, please list below and provide the last fiscal year end financial statements for each firm.

- Name of affiliate and/or subsidiary firm: _____
- Name of affiliate and/or subsidiary firm: _____
- Name of affiliate and/or subsidiary firm: _____
- Name of affiliate and/or subsidiary firm: _____

Provide a schedule of any previous government financing by any principals or affiliates, i.e. SBA, BRGL, etc.

1. Name of Agency: _____ Original Amount: _____
 Date of Request: _____ Approved: _____ Declined: _____
 Outstanding balance: _____ Status: _____

2. Name of Agency: _____ Original Amount: _____
 Date of Request: _____ Approved: _____ Declined: _____
 Outstanding balance: _____ Status: _____

3. Name of Agency: _____ Original Amount: _____
 Date of Request: _____ Approved: _____ Declined: _____
 Outstanding balance: _____ Status: _____

4. Name of Agency: _____ Original Amount: _____
 Date of Request: _____ Approved: _____ Declined: _____
 Outstanding balance: _____ Status: _____

5. Name of Agency: _____ Original Amount: _____
 Date of Request: _____ Approved: _____ Declined: _____
 Outstanding balance: _____ Status: _____

6. Name of Agency: _____ Original Amount: _____
 Date of Request: _____ Approved: _____ Declined: _____
 Outstanding balance: _____ Status: _____

If not applicable, check here _____

BANK AND TRADE REFERENCES

BANK INFORMATION(Business and/or Personal; circle appropriate response for each):

SEE ALSO FORM F

1. Name of Bank: _____	Account Officer: _____	_____
Account # _____	Business/Personal _____	Phone #: () _____
2. Name of Bank: _____	Account Officer: _____	_____
Account # _____	Business/Personal _____	Phone #: () _____
3. Name of Bank: _____	Account Officer: _____	_____
Account # _____	Business/Personal _____	Phone #: () _____
4. Name of Bank: _____	Account Officer: _____	_____
Account # _____	Business/Personal _____	Phone #: () _____

PARTICIPATING FINANCIAL INSTITUTION (IF APPLICABLE):

Name: _____ Contact Name: _____
 Phone #: () _____ Email: _____
 Address: _____
 City: _____ State: _____ ZIP Code: _____

TRADE REFERENCES

Company	Contact Person and Phone #
_____	_____
_____	_____
_____	_____

PLEASE LIST ALL EXISTING BUSINESS and PERSONAL DEBTS

DEBT SCHEDULE

* Date: _____

Creditor (Name & Address)	Original Amount	Original Date	Present Balance	% Rate	Maturity Date	Monthly Payment	Security	Current or Delinquent
** Total Present Balance:				Total Monthly Payments:				

* Should be the same date as current financial statement
 ** Total must agree with balance shown on current financial statement.

BUYING A BUSINESS

1. Why is the business for sale? _____
2. What is the value of the business? _____
3. What are the company's products and services? _____
4. Who started the business? _____
5. What is the history of the business? _____
6. Where is it located and where are its customers located? _____
7. Has the competition increased or changed? _____
8. What sales and marketing plans have you seen? _____
9. What are the business' sales trends? _____
10. How will you increase sales? _____
11. Will you hire new employees and managers or use the existing staff?

12. CHECKLIST for buying a business:

- _____ Talk to the business' customers and suppliers.
- _____ Review financial statements and tax returns from the last 3 years.
- _____ Develop a purchase and sale agreement which shows:
 - The purchase price components – down payment, allocation of the price, and how it will be financed
 - How the business will be conducted until purchased
 - The liabilities you are assuming including accounts payable, loans, leases, contracts, taxes, and legal
 - The value of the assets you are buying including Accounts Receivable (quality & age of invoices), inventory (value & age), machinery/equipment/furniture (age, condition & value), patents/trademarks, & real estate
 - That the purchase and sale agreement is subject to financing and inspections
- _____ Know how you will finance the business. Is the seller willing to finance all or any of the business (especially the goodwill – the difference between the value of hard assets and the business' purchase price)? What are the terms, rates, and conditions? Develop a Loan Request
- _____ Determine who will pay for closing costs including legal services, points, appraisals and environmental inspections.

PLEASE NOTE - any one or more of the following may be required as part of your loan application:

- | | |
|-----------------------------------|--|
| pictures of the business location | detailed description and appraised value of the building |
| inventory and equipment purchases | assets and liabilities |
| inspection reports | any patents/trademarks |
| purchase-and-sale agreement | any legal documents |

AS PER OUR POLICY: WE REQUIRE A DATED & SIGNED LETTER (on company letterhead, if applicable) STATING THE BUSINESS WILL CLOSE AND THE NUMBER OF JOBS LOST IF IT IS NOT PURCHASED.

BUYING A FRANCHISE

1. How many franchises are there and how many in your area? _____
Don't be afraid to ask for a list, then visit as many as you can.
If possible, speak with the owner(s) about some of the real-world realities of running the business.
2. How long has the franchiser been in the industry? _____
Ask how long they have been selling franchises.
3. How financially healthy is the franchiser? _____
You have a right to see their financial statements, which should be included in the Disclosure Document.
Make sure you are comfortable with all the numbers.
4. What does your initial cost cover? _____
Discuss things like the licensing fee, training, equipment, starting inventory and promotional fees.
Find out if the land will be purchased or leased, and whether the building will be constructed or renovated.
5. Will the franchiser help finance the business? _____
If so, you still need to develop a business plan with financial projections.
6. What ongoing costs will you pay the franchiser? _____
Discuss royalties, training, insurance and advertising.
7. Will you be required to buy supplies from the franchiser or their designated supplies? _____
Will prices be competitive? _____
8. Do any restrictions apply when competing with the competition? _____
9. What is the length of the partnership? _____
Be clear about the terms covering renewal rights.
10. Do you have the right to resell the franchise? _____

BUYER, BE AWARE

A franchise is a legal, business relationship between a franchiser (Burger King, for example) and the franchisee (you). The franchiser owns the right to the business name, and sells that right to you. In return, you sell products and services supplied by the franchiser.

The advantages of buying a franchise can be appealing. You get an established business presence. And since many of the decisions and products come from the franchiser, your risks are reduced. You are also provided with range of support services, such as site selection, training, supplies, and advertising/marketing plans.

THE DISCLOSURE DOCUMENT: READ IT CAREFULLY

The Federal Trade Commission (FTC) requires sellers of franchises and other business-opportunity ventures to provide a Disclosure Document to prospective buyers. In it, you should find detailed information that explains how business between you and the franchiser will be conducted.

It is crucial that you read this document very carefully, as many times as you need to, because it contains important information - audited financial statements, your start-up and ongoing costs, and locations of other franchises. It will clearly explain the responsibilities of the buyer and the seller. Have your attorney read through it as well.

The Disclosure Document must be given to you in advance so you can gather and consider any and all information you need to be sure your decision is an informed one.

*****PLEASE PROVIDE THE FOLLOWING DOCUMENTATION FOR ALL THAT ARE APPLICABLE******

When necessary, SCPDC required forms may be duplicated for multiple applicants.

- _____ Loan Application
- _____ Last 3 years Personal Tax Returns (*on each individual*)
- _____ If existing business, past 3 years Business Tax Returns
- _____ Current Personal Financial Statement (*on each individual*)
- _____ Individual Profile Form (*on each individual*)
- _____ Personal Resume' - typed & signed (*on each individual*)
- _____ If existing business, Current Financial Statement
- _____ If existing business, Articles of Incorporation and By-laws
- _____ Credit Authorization Form (*on each individual*)
- _____ Business Plan (*to include projections for a minimum of 3 years*)
- _____ Documentation of Lease or Rental Agreement (*copy for file*)
- _____ Estimates for Equipment and Renovations
- _____ Letter from Bank stating their Intentions (*denial*)
- _____ W9 Form
- _____ If existing business, Articles of Incorporation and By-laws
- _____ Current Occupational License
- _____ Balance sheet and income statement with aging of Accounts Receivable and Payable
- _____ Names of affiliated/subsidiary businesses; 2 fiscal year-end financial statements & a current statement
- _____ Appraisal/Comparative Market Analysis
- _____ Documentation of commitment of all sources of funding (equity/other sources of financing)
- _____ Copy of current government-issued identification for all owners/principals
- _____ Proof of business/ownership structure
- _____ Proof of number of employees (*copy of 941*)
- _____ Proof of address (*copy of utility bill, i.e. electric, water, phone, etc.*)
- _____ Business LMI Form (*and Personal, if applicable*)

TO THE BEST OF MY KNOWLEDGE, ALL INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND ACCURATE

Applicant's Signature _____

Date _____

PERSONAL FINANCIAL STATEMENT

South Central Planning and Development Commission

As of _____, 20_____

Complete this form for: (1) each proprietor, or (2) each limited partner who owns 20% or more interest and each general partner, or (3) Each stockholder owing 20% or more of voting stock and each corporate officer and director, or (4) any other person or entity providing a guaranty on the loan.

Name: _____ Business
 Phone: _____
 Residence Address: _____ Residence
 phone: _____
 City, State, & Zip _____
 Code: _____
 Business Name of _____

	Assets	(omit cents)		LIABILITIES	(omit cents)
Cash on hand & in banks	\$		Accounts payable	\$	
Savings Accounts	\$		Notes payable to banks and others (Describe in Section 2	\$	
IRA or other Retirement Account	\$		Installment Account (auto) Mo. Payments \$ _____	\$	
Accounts & Notes Receivable	\$		Installment Account (other) Mo. Payments \$ _____	\$	
Life Insurance-Cash Surrender Value Only (Complete Section 8)	\$		Loans on Life Insurance	\$	
Stocks and Bonds (describe in Section 3)	\$		Mortgage on Real Estate (describe in Sect. 4)	\$	
Real Estate (Describe in Section 4	\$		Unpaid Taxes (Describe in Section 6)	\$	
Automobile-Present Value	\$		Other Liabilities (Describe in Section 7)	\$	
Other Personal Property (describe in section 5)	\$		Total liabilities	\$	
Other Assets (describe in Section 5)	\$				
Total	\$				

Section 1 Source of Income		Contingent liabilities	
Net Investment Income	\$	Legal Claims & Judgments	\$
Real Estate Income	\$	Provisions for Federal Income Tax	\$
Other Income (Describe Below)	\$	Other Special Debt	\$

Description of other income in Section 1

*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward income.

Section 2: Notes Payable o Bank and other: (Like attachments if necessary. Each attachment must be identified as part of this statement and signed.

<i>Name and Address of Note Holder(s)</i>	Original Balance	Current Balance	Payment Amount	Frequency (mo. Etc.)	How Secured or Endorsed Type of collateral

Section 3 Stocks and Bonds. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Number of shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value

Section 4. Real Estate Owned (List each parcel separately. Use attachment if necessary. Each attachment must be identified as part of this statement and signed.)

	Property A	Property B	Property C
Type of Property			
Name & Address of Title Holder			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Amount of Payment per Month/Year			
Status of Mortgage			

Section 5: Other Personal Property and Other Assets (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.)

Section 6: 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 7: Other Liabilities. (Describe in detail)

Section 8: Life Insurance held. (Give face amount and case surrender value of policies-name of Insurance Co. & beneficiaries)

I authorize South Central Planning and Development Commission 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. I understand FALSE statements may result in forfeitures of benefits and possible prosecution by the US Attorney General (Reference 1B USC 1001)

Appendix E
Individual Profile Form

1. OWNER/STOCKHOLDER NAME: _____
BUSINESS NAME: _____

2. Personal banking relationships: List all banks where you currently have personal depository
And/or borrowing relationships:

<u>Name of Bank/Branch</u>	<u>Account No.</u>	<u>High Borrowing</u>	<u>Balance</u>	<u>Date Paid Out</u>
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3. If applicable, indicate any previous government financing:

<u>Agency Name</u>	<u>Account No.</u>	<u>High Borrowing</u>	<u>Balance</u>	<u>Date Paid Out</u>
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4. List all businesses in which you now have, or have had, an equity interest over the past
Five years.

5. If any of the following questions are answered yes, it will not necessarily qualify you.
However, a false or inaccurate answer will probably cause disqualification.

a. Are you presently under indictment, on parole, or probation? (NOTE: The
Revolving Loan Fund may require a back ground check, and your signature
On this form constitutes authorization to conduct such a search of records, at
The discretion of the Revolving Loan Fund/Board).

YES NO If yes, furnish details in a separate exhibit. List name(s) under
Which held, if applicable?

b. Have you ever been charged with, or arrested for, any criminal offense other than
A minor motor vehicle violation?

YES NO If yes, furnish details in a separate exhibit. List name(s) under
Which charged, if applicable?

c. Have you ever been convicted of any criminal offense other than a minor motor
Vehicle violation?

YES NO If yes, furnish details in a separate exhibit. List name(s) under
Which convicted, if applicable?

- d. Have you ever filed bankruptcy personally, or have any of the businesses that you have, Or had ownership interest in, ever filed bankruptcy?
YES NO If yes, furnish details as to the circumstances in a separate exhibit.
- e. Do you or your company currently have any suits, judgments, or liens filed against you Or any of your assets?
YES NO If yes furnish details in a separate exhibit.
- f. Do you, or does anyone in your family (i.e., spouse, children, parents, brothers or sisters), Work for South Central Planning and Development Commission or for one of its member Governments (the Parishes of Assumption, Lafourche, St. Charles, St. James, St. John the Baptist, and Terrebonne; the Municipalities of Golden Meadow, Gramercy, Lockport, Lutcher, Napoleonville, Thibodaux)?
YES NO If yes, furnish names and positions held on a separate page.
- g. Do you, or does anyone in your family, serve as a consultant, officer, elected official, or appointed official for South Central Planning and Development Commission or any of its member governments?
YES NO If yes, furnish names and positions held on a separate page.

Signature

Date

Inquiry Form

Name of CPA/Accountant: _____

Address: _____

Phone: _____

Email: _____

I _____, do authorize South Central Planning and Development Commission to contact and request financial information and data including but not limited to financial statements and tax returns for _____ through the term
(Name of Company)
of the loan _____. I agree to contact South Central Planning if the above CPA/Accountant information changes.

Signature

Date

TO: _____

_____ Account(s) # _____

_____ Loan(s) # _____

Dear Sir or Madam;

Your institution is authorized to release information to South Central Planning and Development Commission regarding the above listed accounts or loans.

Date Opened	High Credit	Current Balance	Terms	Collateral	Status of Account
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Please forward this information either verbally, in writing, or by fax to:

Revolving Loan Fund Program

South Central Planning and Development Commission

P.O. Box 1870

Gray, LA 70359

Phone (985) 851-2900

(Fax) (985) 851-4472

Thank you for your prompt cooperation.

Name of Company or Individual

Authorized Signature & Title

Date

Personal Resume Form TO BE COMPLETED BY EACH PRINCIPAL INVOLVED IN THE LOAN.

Name _____
FIRST MIDDLE MAIDEN LAST

Date of birth* _____ Place of birth _____ Race* _____ Social Security No. _____

U.S. Citizen -- if not, please provide alien registration number _____

Home address _____ City _____ State _____ Zip _____

From _____ To _____ Home phone _____ Business phone _____

Immediate past address _____ City _____ State _____ Zip _____

From _____ To _____

Are you employed by the U.S. Government? _____ If so, give the name of the agency and position _____

Spouse's name _____
FIRST MIDDLE MAIDEN LAST

Date of birth _____ Place of birth _____ Race _____ Social Security No. _____

Personal information

Be sure to answer the next three questions correctly because they are important. The fact that you have an arrest or conviction record will not necessarily disqualify you; an incorrect answer will probably cause your application to be turned down.

Are you presently under indictment, on parole or probation? _____ Yes No

Have you ever been charged with or arrested for any criminal offense other than a minor vehicle violation? Include offenses which have been dismissed, discharged, or nolle prosequi. (All arrests and charges must be disclosed and explained on an attached sheet) _____ Yes No

Have you ever been convicted, placed on pretrial diversion, or placed on any form of probation, including adjudication withheld pending probation, for any criminal offense other than a minor motor vehicle violation? _____ Yes No

If yes to any of the above, furnish details in a separate exhibit. List name(s) under which held.

Military service background

Branch _____ From _____ To _____

Rank at discharge _____ Honorable? _____

Job description _____

* This data is collected for statistical purposes only. It has no bearing on the credit decision. Disclosure is voluntary.

Personal Resume Form CONTINUED

Work experience

List chronologically, beginning with present employment

Name of company _____ % of business owned _____
Full address _____ City _____ State _____ Zip _____
From _____ To _____ Title _____ Duties _____

Name of company _____ % of business owned _____
Full address _____ City _____ State _____ Zip _____
From _____ To _____ Title _____ Duties _____

Name of company _____ % of business owned _____
Full address _____ City _____ State _____ Zip _____
From _____ To _____ Title _____ Duties _____

Education (College or Technical Training)

Name and Location	Dates Attended	Major	Degree or Certificate
1. _____	_____	_____	_____
Comments _____			
2. _____	_____	_____	_____
Comments _____			
3. _____	_____	_____	_____
Comments _____			
4. _____	_____	_____	_____
Comments _____			

AUTHORIZATION FORM

I HAVE APPLIED FOR A Business Loan.

This form will authorize South Central Planning and Development Commission to:

1. Order a credit report on said individual including all 20% owners from any credit agency of SCPDC's choice (a separate form to be filled out on each owner).
2. Obtain any information from any source necessary in underwriting this application
3. Obtain any sales/use tax information necessary.

I am aware that the process for the loan approval means that this information becomes part of what can be considered public information.

Print Full Name of Individual: _____
First Middle Last

Current Mailing Address: _____
City _____ State _____ Zip _____

Current Physical Address: _____
City _____ State _____ Zip _____

Previous Address: _____
City _____ State _____ Zip _____

Social Security Number: _____

Date of Birth: _____

I attest that all information contained here with in understood by me, the undersigned.

Signature

Date

Rev. 03/18/15

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States:

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Publication 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),

3. The IRS tells the requester that you furnished an incorrect TIN,

4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code* on page 3 and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships* above.

What is FATCA reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code* on page 3 and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account, list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note. ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C Corporation, or S Corporation.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box in line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box in line 3.

Limited Liability Company (LLC). If the name on line 1 is an LLC treated as a partnership for U.S. federal tax purposes, check the "Limited Liability Company" box and enter "P" in the space provided. If the LLC has filed Form 8832 or 2553 to be taxed as a corporation, check the "Limited Liability Company" box and in the space provided enter "C" for C corporation or "S" for S corporation. If it is a single-member LLC that is a disregarded entity, do not check the "Limited Liability Company" box; instead check the first box in line 3 "Individual/sole proprietor or single-member LLC."

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space in line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2—The United States or any of its agencies or instrumentalities
- 3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5—A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8—A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10—A common trust fund operated by a bank under section 584(a)
- 11—A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

- A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)
- B—The United States or any of its agencies or instrumentalities
- C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)
- E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)
- F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state
- G—A real estate investment trust
- H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940
- I—A common trust fund as defined in section 584(a)
- J—A bank as defined in section 581
- K—A broker
- L—A trust exempt from tax under section 664 or described in section 4947(a)(1)
- M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note. You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on this page), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, or 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code* earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²
4. a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee ¹ The actual owner ¹
5. Sole proprietorship or disregarded entity owned by an individual	The owner ²
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor [*]
For this type of account:	Give name and EIN of:
7. Disregarded entity not owned by an individual	The owner
8. A valid trust, estate, or pension trust	Legal entity ⁴
9. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
10. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 2.

*Note. Grantor also must provide a Form W-9 to trustee of trust.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: spam@uce.gov or contact them at www.ftc.gov/idtheft or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

RESOLUTION

BE IT KNOWN, that on the date hereinafter mentioned, personally came and appeared (NAME OF INDIVIDUAL), Owner/Member of (BUSINESS/COMPANY) (“Company”) a Limited Liability Company organized and existing under the laws of the State of Louisiana, and domiciled in the Parish of (NAME OF PARISH), State of Louisiana, at (COMPLETE ADDRESS).

BE IT RESOLVED that the Appearer is the sole voting member/authorized officer of (BUSINESS/COMPANY) and that they did meet and authorize, empower and direct (NAME OF INDIVIDUAL), Owner/Member, to effect the following transaction:

- 1) To perfect a loan on behalf of (BUSINESS/COMPANY) from one or more of South Central Planning and Development Commission, Inc.’s Loan Program Funds in an amount not to exceed **\$000,000.00 (DOLLAR AMOUNT SPELLED OUT and 00/100 dollars)**, to bear interest in an amount not to exceed 4% per annum, such documents to contain such other terms, conditions and stipulations as said operating Manager might deem wise and expedient in his sole and uncontrolled discretion.
- 2) To perfect a loan on behalf of (BUSINESS/COMPANY) from one or more of South Central Planning and Development Commission, Inc.’s Loan Program Funds in an amount not to exceed **\$00,000.00 (DOLLAR AMOUNT SPELLED OUT)**, to bear interest in an amount not to exceed 4% per annum, such documents to contain such other terms, conditions and stipulations as said operating Manager might deem wise and expedient in his sole and uncontrolled discretion.
- 3) To execute any and all documents he/she deems necessary whether now or in the future, for such consideration as may deem appropriate, to buy, acquire, sell, lease, convey, exchange, agree to sell or buy, dispose of, transfer, alienate, mortgage, manage, lease or operate real or **immovable property, personal or movable property, whether tangible, intangible, corporeal or incorporeal**, including all property now owned or hereinafter acquired by the Company, whether now or in the future, for such consideration as may deem appropriate, including for cash, credit and combination of both or exchange of property rights, with such acts to contain such terms and conditions as he may deem necessary, proper and/or advisable in his sole discretion; (Specifically, but not limited to **(COMPLETE ADDRESS)**).

BE IT FURTHER RESOLVED that said member(s) in completing any of the activities in the preceding paragraph in no way violates the Articles of Organization or Operating Agreement of (BUSINESS/COMPANY); and third parties are authorized to rely on this expression of authority by Appearers in this certificate until said certificate is rescinded in writing and recorded into the Conveyance Records of (NAME OF PARISH) Parish, Louisiana.

PRESIDENT/MANAGING MEMBER

I, (NAME OF INDIVIDUAL) SECRETARY/MEMBER of (BUSINESS/COMPANY), a Limited Liability Company, organized and chartered under and by virtue of the laws of the State of Louisiana, do hereby certify that the foregoing is a true and correct copy of the Resolution adopted by the BOARD OF DIRECTORS of said company at a meeting held on (DATE), at which meeting a quorum was present and voting.

Member-Owner