



Southwest Georgia
Regional Commission

www.swgrc.org
181 East Broad Street
PO Box 346
Camilla, Georgia 31703
229-522-3552
229-522-3558 (fax)

REVOLVING LOAN FUND APPLICATION

Revolving Loan Fund Application Checklist

All of the following items must be received to process your loan request. The pre-application form provided contains all of the project information required to review your loan request. Any forms not included that are needed, or appropriate, will be provided upon request. Please be sure to provide complete information and attach any other exhibits you feel necessary for the Review Committee and Board of Directors to evaluate your application (Please sign and date each exhibit.)

- _____ 1. History and description of the business.
- _____ 2. Statement detailing exact uses of the loan proceeds and project costs.
- _____ 3. Statement of personal history for each officer (if corporation) or partner (if partnership) (RDC form).
- _____ 4. Resumes of the principals involved in day to day management.
- _____ 5. Jobs Criteria and Relationship (current and projected for 2 years).
- _____ 6. Balance sheet and profit and loss statement for previous 3 years.
- _____ 7. A current balance sheet and operating statement no older than 60 days.
- _____ 8. Proforma balance sheet and profit and loss statement for 3 years.
- _____ 9. Monthly cash flow for next 12 months or 3 months beyond breakeven point.
- _____ 10. Schedule of each loan business currently has outstanding original date and amount, present balance, interest rate, monthly payment, maturity date, security pledged and status (current or delinquent).
- _____ 11. Schedule for debt financing planned for the next year beginning after the date of the current financial statement. Terms and conditions specified in item 10 should be identified (Summary Debt Financing).
- _____ 12. If a franchise, copy of franchise agreement.
- _____ 13. Current personal financial statement of each owner with 20% or more ownership as well as personal credit reports.
- _____ 14. Resolution of Board of Directors, if Corporation, to borrow or Partnership.
- _____ 15. Provide Articles of Incorporation or copy of Partnership Agreement, if applicable.
- _____ 16. Copy of purchase agreement or proposed lease or occupancy arrangement.
- _____ 17. Commitment letter from bank lender outlining amount of participation, interest rates, terms, special conditions of their portion of loan and reason why it will not finance entire amount. A definitive proposed loan agreement with participating bank is required prior to the issuance of a commitment by the RDC.
- _____ 18. Identify source of applicant business required 10% cash or equity injection in project. If funds are borrowed, identify name and address of lender, interest rate, term and collateral.
- _____ 19. If project has construction, provide cost with preliminary plans and specs and or machinery and/or list of machinery and equipment with useful life verification by vendor. (Construction projects must comply with David-Bacon wage rates of area).
- _____ 20. Independent appraisal on project, if fixed assets, on "as completed basis" acceptable to RDC.
- _____ 21. Applicant's requested loan amount, term requested and collateral offered as security.
- _____ 22. Formal business plan (start-up and existing businesses)
- _____ 23. Copy of all business licenses and certificates

REVOLVING LOAN FUND PROGRAM APPLICATION

The purpose of the Revolving Loan Fund (RLF) is to support business activities for which credit is not otherwise available on terms and conditions which would permit completion and/or successful operation or accomplishment of the project.

ALL QUESTIONS SHOULD BE ANSWERED

1. Applicant Name: _____
2. Date: _____
3. Address

4. Phone/Fax: _____
5. Email Address: _____
6. FEIN or SSN: _____
7. Were you (the applicant) ever convicted of a felony? ____ If yes, would you care to explain:

8. Type of Business. If applicant is a corporation, identify all officers, directors, and principal shareholders, giving complete names and addresses for each:

9. If applicant is a partnership, give complete name and address of each partner:

10. Date business established: _____

* The following is a list of some items that may be required to process your loan request.*

- **History and description of the business.**
- **Statement of personal history for each officer or partner.**
- **Resumes of the principals involved in day to day management.**
- **Jobs Criteria and Relationship (current and 2 year projections.)**
- **Schedule of each loan the business currently has outstanding, original date and amount, present balance, interest rate, monthly payment, maturity date, security pledged and status (current or delinquent).**
- **If a franchise, a copy of the franchise agreement.**
- **Current personal financial statements of each owner with 20% or more ownership.**
- **Resolution of Board of Directors (corporation).**
- **Articles of Incorporation or Partnership Agreement.**
- **Copy of purchase agreement or proposed lease or occupancy agreement.**
- **Commitment letter from bank lender outlining amount of participation, interest rate, terms, special conditions of their portion of loan and reason why it will not finance the entire amount.**
- **Independent appraisal on project.**

This list does not fully constitute all items that may be required and is only a guideline to some items that may be requested as part of a loan request

C. Legal and other consultants. Do you have a lawyer or other consultants? If so, please list.

FINANCE

A. Who will do your bookkeeping? _____

B. Do you have derogatory credit? If so, please give a brief explanation.

ATTACHMENTS **

Please complete the following:

- Attachment A: Formal Business Plan
- * Attachment B: Balance Sheet Previous Three Years
- * Attachment C: Profit and Loss Previous Three Years
- Attachment D: Three Year Projected Income Statement
- Attachment E: Monthly Profit & Loss Projection
- Attachment F: Balance Sheet Three Year Projection
- Attachment G: Monthly Cash Flow (for the next 12 months or 3 months beyond breakeven point)
- Attachment H: Projected Start-Up Expenses
- * Attachment I: Current Quarter Balance Sheet
- * Attachment J: Current Quarter Profit and Loss Statement
- Attachment K: Personal Financial Statement(s)
- Attachment L: Resume(s)
- Attachment M: Statement(s) of Personal History
- Attachment N: Business Debt Schedule
- * Attachment O: Copy of all Business Licenses and Certifications

* For existing businesses only.

** This is not an all inclusive list of attachments. Other attachments may be required when referring to the checklist.
Please attach as necessary.

I. PROJECT DESCRIPTION

(Generally describe the project, giving purpose of loan. Supply here any information (not specifically requested in this application) you feel is necessary to an understanding of the project. Attach an additional sheet, if necessary.)

II. PLAN FOR FINANCING PROJECT

(Note: RLF Loans will ordinarily range between \$40,000 and \$125,000. The owner must provide a minimum of 10% equity.)

A. Financing

1) Bank Loan(s) (identify)

Source _____ Amount \$ _____

Source _____ Amount \$ _____

Source _____ Amount \$ _____

2) Other Private Resources:

Source _____ Amount \$ _____

Source _____ Amount \$ _____

Source _____ Amount \$ _____

3) Microloan:

Source _____ Amount \$ _____

Source _____ Amount \$ _____

4) Other Public Resources:

Source _____ Amount \$ _____

Source _____ Amount \$ _____

5) Applicant Equity:

Existing facilities and property at appraised value: Amount \$ _____

Cash: Amount \$ _____

6) Other:

Source _____ Amount \$ _____

Source _____ Amount \$ _____

TOTAL \$ _____

B. Term of loan (Note: Working capital loans cannot exceed five (5) years and shall be amortized during its term. Fixed asset loans will not be for a greater term than the life of the fixed assets)

Repayment: _____

Requested Interest Rate: _____

C. Is this loan request for: Fixed Assets: _____

Working Capital: _____

Refinancing: _____

D. Identify all lending institutions and agencies that be been contacted concerning financing of the project, which you do not anticipate will participate in the project financing:

(1) _____
Approved financing () Disapproved financing ()

(2) _____
Approved financing () Disapproved financing ()

(3) _____
Approved financing () Disapproved financing ()

Reasons for each disapproval:

(1) _____

(2) _____

(3) _____

III. GENERAL INFORMATION

A. Is this:

(1) A New Venture? Yes:____ No:____

(2) An Expansion of an Existing Business? Yes:____ No:____

B. Does the Project Involve Relocation? Yes:____ No:____

C. (For loans to corporations) Has the Board of Directors Approved the Loan Application?

Yes:____ No:____

D. Do You Have a Market Analysis on the Effect of the Project?

Yes:____ No:____

IV. SALES INFORMATION

A. Sales

1) Last Year Sales (for established businesses only)

\$ _____

2) This Year Projected Sales (for established businesses only)

\$ _____

3) One Year Projected Sales After Disbursements of Loan (all applicants)

\$ _____

B. Income

1) Last Year Net Income (for established businesses only)

\$ _____

2) This Year Projected Income (for established businesses only)

\$ _____

3) One Year Projected Net Income After Loan is Disbursed (all applicants)

\$ _____

V. COST ELEMENTS OF PROJECT

A.	Land Improvements	\$ _____
B.	Building	\$ _____
C.	Construction (Leasehold Improvement)	\$ _____
D.	Machinery/Equipment/Inventory	\$ _____
E.	Architect/Engineer	\$ _____
F.	Other Cost Interim	\$ _____
G.	Interest	\$ _____
H.	Contingency	\$ _____
I.	Refinancing	\$ _____
J.	Working Capital	\$ _____
K.	Legal	\$ _____
L.	Accounting	\$ _____
M.	Other: _____	\$ _____
	TOTAL:	\$ _____

These estimates are based on:

Tentative Plans of Applicant: _____

Detailed Plans & Specifications: _____

Other: _____

VI. SUMMARY OF COLLATERAL OFFERED

(Attach separate sheets describing nature and value of assets offered as collateral; attach copy of deeds for real estate)

List below type of collateral being offered:

VII. PROJECTED COMMUNITY BENEFITS

A. Employment Projection and Civil Rights Data:

(For the purposes of this form, the following are considered to be minority persons:
Blacks, Hispanics, Asian, Pacific Islanders, American Indian/Alaskan Natives)

PRESENT EMPLOYEES (if now in operation)

Total of Employees			Minorities and Women Employees		
Sex			Sex		
F			F		
M			M		
Total			Total		

SIX MONTHS AFTER THE LOAN

Total of Employees			Minorities and Women Employees		
Sex			Sex		
F			F		
M			M		
Total			Total		

TWELVE MONTHS AFTER THE LOAN

Total of Employees			Minorities and Women Employees		
Sex			Sex		
F			F		
M			M		
Total			Total		

EIGHTEEN MONTHS AFTER THE LOAN

Total of Employees			Minorities and Women Employees		
Sex			Sex		
F			F		
M			M		
Total			Total		

TWENTY-FOUR MONTHS AFTER THE LOAN

Total of Employees			Minorities and Women Employees		
Sex			Sex		
F			F		
M			M		
Total			Total		

I certify that the information included in this application is true and complete to the best of my knowledge. I also grant permission to Southwest Georgia Regional Development Center to obtain information from my bank creditors, credit bureau reporting agency or other necessary sources to research and evaluate this application.

Officer or Person Responsible for Project

Name: _____

Title: _____

Telephone: _____

Signature of Owner or Principal Officer

Name: _____

Title: _____

Telephone: _____

ATTACHMENT A

FORMAL BUSINESS PLAN

**BALANCE SHEET
PREVIOUS THREE YEARS**

Business Name: _____

ASSETS

CURRENT ASSETS

	YEAR	1	2	3
Cash				
Accounts Receivable				
Inventory				
Other				
TOTAL CURRENT ASSETS				

FIXED ASSETS

--	--	--	--

OTHER ASSETS

--	--	--	--

TOTAL ASSETS

--	--	--	--

LIABILITIES AND NET WORTH

--	--	--	--

CURRENT LIABILITIES

--	--	--	--

Accounts Payable			
Notes Payable			
Taxes			
SBA/RLF/IRP			
Other Liabilities			
TOTAL CURRENT LIABILITIES			

Notes Payable

--	--	--	--

SBA/RLF/IRP

--	--	--	--

Other

--	--	--	--

TOTAL LIABILITIES

--	--	--	--

NET WORTH

--	--	--	--

TOTAL LIABILITIES & NET WORTH

--	--	--	--

**PROFIT AND LOSS STATEMENT
PREVIOUS THREE YEARS**

Business Name: _____

YEAR	1	2	3
SALES	<input type="text"/>	<input type="text"/>	<input type="text"/>
COST OF GOODS SOLD	<input type="text"/>	<input type="text"/>	<input type="text"/>
GROSS PROFIT	<input type="text"/>	<input type="text"/>	<input type="text"/>
<u>EXPENSES</u>	<input type="text"/>	<input type="text"/>	<input type="text"/>
WAGES	<input type="text"/>	<input type="text"/>	<input type="text"/>
UTILITIES	<input type="text"/>	<input type="text"/>	<input type="text"/>
GENERAL AND ADMIN.	<input type="text"/>	<input type="text"/>	<input type="text"/>
ADVERTISING	<input type="text"/>	<input type="text"/>	<input type="text"/>
ACCOUNTING	<input type="text"/>	<input type="text"/>	<input type="text"/>
LEGAL	<input type="text"/>	<input type="text"/>	<input type="text"/>
INTEREST	<input type="text"/>	<input type="text"/>	<input type="text"/>
OFFICER COMPENSATION	<input type="text"/>	<input type="text"/>	<input type="text"/>
RENT	<input type="text"/>	<input type="text"/>	<input type="text"/>
OTHER	<input type="text"/>	<input type="text"/>	<input type="text"/>
OTHER	<input type="text"/>	<input type="text"/>	<input type="text"/>
DEPRECIATION	<input type="text"/>	<input type="text"/>	<input type="text"/>
<u>TOTAL EXPENSES</u>	<input type="text"/>	<input type="text"/>	<input type="text"/>
NET INCOME BEFORE TAXES	<input type="text"/>	<input type="text"/>	<input type="text"/>
INCOME TAXES	<input type="text"/>	<input type="text"/>	<input type="text"/>
NET INCOME	<input type="text"/>	<input type="text"/>	<input type="text"/>

Business Name: _____

ATTACHMENT D

THREE YEAR PROJECTED INCOME STATEMENT

	YEAR 1	YEAR 2	YEAR 3
1. Gross Sales	\$ _____	\$ _____	\$ _____
2. Other Income	\$ _____	\$ _____	\$ _____
3. TOTAL INCOME (1 + 2)	\$ _____	\$ _____	\$ _____
4. Cost of Sales:			
a. Purchases	\$ _____	\$ _____	\$ _____
b. Payroll (manufacturing only)	\$ _____	\$ _____	\$ _____
c. Other Direct Cost (mfg. only)	\$ _____	\$ _____	\$ _____
5. TOTAL COST OF SALES (a + b + c)	\$ _____	\$ _____	\$ _____
6. GROSS PROFIT (3 - 5)	\$ _____	\$ _____	\$ _____
7. General Expenses:			
a. Salaries	\$ _____	\$ _____	\$ _____
b. Payroll Taxes	\$ _____	\$ _____	\$ _____
c. Advertising	\$ _____	\$ _____	\$ _____
d. Rent	\$ _____	\$ _____	\$ _____
e. Supplies/Postage	\$ _____	\$ _____	\$ _____
f. Utilities	\$ _____	\$ _____	\$ _____
g. Telephone	\$ _____	\$ _____	\$ _____
h. Travel	\$ _____	\$ _____	\$ _____
i. Repairs/Maintenance	\$ _____	\$ _____	\$ _____
j. Insurance	\$ _____	\$ _____	\$ _____
k. Taxes/Licenses	\$ _____	\$ _____	\$ _____
l. Interest	\$ _____	\$ _____	\$ _____
m. Miscellaneous	\$ _____	\$ _____	\$ _____
8. TOTAL GENERAL EXPENSES	\$ _____	\$ _____	\$ _____
9. Depreciation Expense	\$ _____	\$ _____	\$ _____
10. TOTAL EXPENSES (8 + 9)	\$ _____	\$ _____	\$ _____
11. Net Pre-Tax Profits (6 - 10)	\$ _____	\$ _____	\$ _____
12. Provision for Taxes	\$ _____	\$ _____	\$ _____
13. Net Profit After Taxes (11 - 12)	\$ _____	\$ _____	\$ _____

NOTE: Attach narrative explaining basis or rational for income and expense projections.

PROFIT & LOSS PROJECTION

ATTACHMENT E

Business Name:

MONTH	1	2	3	4	5	6	7	8	9	10	11	12	TOTAL
Sales: Cash													
Credit													
Total Sales													
Cost of Sales													
Gross Profit													
Officer Salary (ies)													
Wages													
Rent-Property													
Rent-Equipment													
Auto/Truck Expenses													
Office Supplies													
Advertising													
Telephone & Utilities													
Bad Debts													
Taxes/Licenses													
Depreciation													
Repairs/Maintenance													
Accounting/Legal													
Interest – AT&T													
Interest – Other													
Insurance (all)													
Office Expenses													
Royalties													
Miscellaneous													
Other													
Total Expenses													
Net Profit													

Please attach assumptions to this projection.

Please indicate seasonality during the year.

Signature: _____

Date: _____

BALANCE SHEET THREE YEAR PROJECTION

Business Name: _____

ASSETS

CURRENT ASSETS

	YEAR	1	2	3
Cash				
Accounts Receivable				
Inventory				
Other				
TOTAL CURRENT ASSETS				

FIXED ASSETS

--	--	--	--

OTHER ASSETS

--	--	--	--

TOTAL ASSETS

--	--	--	--

LIABILITIES AND NET WORTH

--	--	--	--

CURRENT LIABILITIES

--	--	--	--

Accounts Payable			
Notes Payable			
Taxes			
SBA/RLF/IRP			
Other Liabilities			

TOTAL CURRENT LIABILITIES			
----------------------------------	--	--	--

Notes Payable

--	--	--	--

SBA/RLF/IRP

--	--	--	--

Other

--	--	--	--

TOTAL LIABILITIES

--	--	--	--

NET WORTH

--	--	--	--

TOTAL LIABILITIES & NET WORTH

MONTHLY CASH FLOW

Business Name: _____

ATTACHMENT H

PROJECTED START-UP EXPENSES

Cost Estimate

1. Inventory	\$ _____
2. Equipment	\$ _____
3. Two Month's Rent	\$ _____
4. Lease Deposit (One Month's Rent)	\$ _____
5. Insurance Premiums:	
a. Liability	\$ _____
b. Fire and Extended Coverage	\$ _____
6. Telephone Installation	\$ _____
7. Telephone Deposit	\$ _____
8. Permit and License Fees	\$ _____
9. Legal Fees	\$ _____
10. Accounting Fees	\$ _____
11. Business Cards, Stationary, Sales Books, Check Printing, etc.	\$ _____
12. Other: _____	\$ _____
_____	\$ _____
TOTAL START-UP COSTS	\$ _____

*Please use supplemental sheets as needed.

Business Name: _____

ATTACHMENT I

CURRENT QUARTER BALANCE SHEET

As of: _____

ASSETS

Current Assets:

1. Cash	\$ _____	
2. Accounts Receivable	\$ _____	
3. Raw Materials (if applicable)	\$ _____	
4. Finished Goods or Inventory	\$ _____	
5. Prepaid Expenses (Security Deposit, Phone Deposit, Prepaid Insurance, etc.)	\$ _____	
6. Other Current Assets	\$ _____	
7. TOTAL CURRENT ASSETS (Total 1 thru 6)		\$ _____

Fixed Assets:

8. Land and Buildings	\$ _____	
9. Machinery & Equipment	\$ _____	
10. Furniture, Fixtures & Vehicles	\$ _____	
11. Less: Accumulated Depreciation	\$ _____	
12. TOTAL FIXED ASSETS (Total 7 thru 11)		\$ _____
13. Other Assets		\$ _____
14. TOTAL ASSETS (7 + 12 + 13)		\$ _____

LIABILITIES AND NET WORTH

Current Liabilities

15. Accounts Payable	\$ _____	
16. Notes Payable (Amt. to be paid this year)	\$ _____	
17. Taxes Payable	\$ _____	
18. TOTAL CURRENT LIABILITIES (15 + 16 + 17)		\$ _____
19. Long Term Debt		
a. Mortgage Payable	\$ _____	
b. Notes Payable (Long Term Portion)	\$ _____	
20. TOTAL LONG TERM DEBT (19a + 19b)		\$ _____
21. TOTAL LIABILITIES (18 + 20)		\$ _____
22. TOTAL ASSETS (LINE 14)		\$ _____
23. NET WORTH (22 - 21)		\$ _____

Business Name: _____

ATTACHMENT J

CURRENT QUARTER PROFIT AND LOSS STATEMENT

Period Covered: _____

- | | | |
|--------------------------------------|----------|----------|
| 1. Gross Sales | | \$ _____ |
| 2. Other Income | | \$ _____ |
| 3. TOTAL INCOME (1 + 2) | | \$ _____ |
| 4. Cost of Sales: | | |
| a. Purchases | \$ _____ | |
| b. Payroll (manufacturing only) | \$ _____ | |
| c. Other Direct Costs | \$ _____ | |
| 5. TOTAL COST OF SALES (a + b + c) | | \$ _____ |
| 6. GROSS PROFIT (3 - 5) | | \$ _____ |
| 7. General Expenses: | | |
| a. Salaries | \$ _____ | |
| b. Payroll Taxes | \$ _____ | |
| c. Advertising | \$ _____ | |
| d. Rent | \$ _____ | |
| e. Supplies/Postage | \$ _____ | |
| f. Utilities | \$ _____ | |
| g. Telephone | \$ _____ | |
| h. Travel | \$ _____ | |
| i. Repairs/Maintenance | \$ _____ | |
| j. Insurance | \$ _____ | |
| k. Taxes/Licenses | \$ _____ | |
| l. Interest | \$ _____ | |
| m. Miscellaneous | \$ _____ | |
| n. Depreciation | \$ _____ | |
| o. Other | \$ _____ | |
| 8. TOTAL GENERAL EXPENSES (a thru o) | | \$ _____ |
| 9. NET PROFIT (6 thru 8) | | \$ _____ |

PERSONAL FINANCIAL STATEMENT

Link: <http://www.sba.gov/sbaforms/sba413.pdf>

RESUME FORMAT

Name: Date of Birth: (Optional)
Address: Phone:
Marital Status: Other Personal Data:

EDUCATION

Give name(s) of institution(s) attended and dates of attendance. If degree or special license has been conferred or granted, specify name of degree or license. Summarize curriculum and area(s) of special interest. Describe each educational experience under separate heading.

EMPLOYMENT

Give name(s) and address(es) of all employees and dates of employment. Specify the duties and responsibilities of each job held.

MILITARY SERVICE

Give branch of the military and dates served. Specify duties and responsibilities. Indicate date and type of discharge. Indicate if on reserve status.

AWARDS AND SPECIAL CREDENTIALS

Note all scholarships, superior performance awards, special certifications, etc. Indicate dates of receipt and/or expiration dates if relevant.

REFERENCES

Provide names and addresses of at least three (3) references that are not related to you. These references should be persons who know your work and character

STATEMENT(S) OF PERSONAL HISTORY

STATEMENT OF PERSONAL HISTORY

Name and Address of Applicant (Firm Name)(Street, City, State, and ZIP Code)	Amount Applied for	
<p>1. Personal Statement of: (State name in full, if no middle name, state (NMN), or if initial only, indicate initial.) List all former names used, and dates each name was used. Use separate sheet if necessary.</p> <p style="text-align: center;">First Middle Last</p>	2. Give the percentage of ownership or stock owned or to be owned in the small business of the development company	SSN:
	3. Date of Birth (Month, day, and year)	
	4. Place of Birth: (City & State or Foreign County)	
	5. U.S. Citizen? <input type="checkbox"/> YES <input type="checkbox"/> NO If No, are you a Lawful Permanent resident alien: <input type="checkbox"/> YES <input type="checkbox"/> NO If non-U.S. citizen provide alien registration number: _____	
Name and Address of participating lender or surety co. (when applicable and known)	6. Present residence address:	
<p>6. Present residence address:</p> <p>From:</p> <p>To:</p> <p>Address:</p> <p>Home Telephone No. (Include A/C):</p> <p>Business Telephone No. (Include A/C):</p>	Most recent prior address (omit if over 10 years ago):	
	<p>From:</p> <p>To:</p> <p>Address:</p>	
<p>PLEASE SEE REVERSE SIDE FOR EXPLANATION REGARDING DISCLOSURE OF INFORMATION AND THE USES OF SUCH INFORMATION.</p> <p>IT IS IMPORTANT THAT THE NEXT THREE QUESTIONS BE ANSWERED COMPLETELY. AN ARREST OR CONVICTION RECORD WILL NOT NECESSARILY DISQUALIFY YOU; HOWEVER, AN UNTRUTHFUL ANSWER WILL CAUSE YOUR APPLICATION TO BE DENIED.</p> <p>IF YOU ANSWER "YES" TO 7, 8, OR 9, FURNISH DETAILS ON A SEPARATE SHEET. INCLUDE DATES, LOCATION, FINES, SENTENCES, WHETHER MISDEMEANOR OR FELONY, DATES, OF PAROLE/PROBATION, UNPAID FINES OR PENALTIES, NAME(S) UNDER WHICH CHARGED, AND ANY OTHER PERTINENT INFORMATION.</p>		
<p>7. Are you presently under indictment, on parole or probation?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>		
<p>8. Have you <u>ever</u> been charged with and or arrested for any criminal offense other than a minor motor vehicle violation? Include offenses which have been dismissed, discharged, or not prosecuted (All arrests and charges must be disclosed and explained on attached sheet)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>		
<p>9. Have you <u>ever</u> 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?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>		
Signature	Title	Date

NOTICES REQUIRED BY LAW

The following is a brief summary of the laws applicable to this solicitation of information.

Paperwork Reduction Act (44 U.S.C Chapter 35)

The Southwest Georgia Regional Development Center (RDC) is collecting information on this form to make a character and credit eligibility decision to fund or deny you a loan or other form of assistance. The information is required in order for the RDC to have sufficient information to determine whether to provide you with the requested assistance. The information collected may be checked against criminal history indices of the Federal Bureau of Investigation.

Privacy Act (5 U.S.C § 552a)

Any person can request to see or get copies of any personal information that the RDC has in his or her file, when that file is retrievable by individual identifiers, such as name or social security numbers. Requests for information about another party may be denied unless the RDC has the written permission of the individual to release the information to the requestor or unless the information is subject to disclosure under the Freedom of Information Act.

Under the provisions of the Privacy Act, you are not required to provide your social security number. Failure to provide your social security number may not affect any right, benefit or privilege to which you are entitled. Disclosures of name and other personal identifiers are, however, required for a benefit, as the RDC requires an individual seeking assistance from the RDC to provide it with sufficient information for it to make a character determination. In determining whether an individual is of good character, the RDC considers the person's integrity, candor, and disposition toward criminal actions. In making loans the RDC is required to have reasonable assurance that the loan is of sound value and will be repaid of that it is in the best interest of the agency to grant the assistance requested. Additionally, the RDC is specifically authorized to verify your criminal history, or lack thereof. For these purposes, you are asked to voluntarily provide your social security number to assist the RDC in making a character determination and to distinguish you from other individuals with the same or similar name or other personal identifier.

When this information indicates a violation or potential violation of law, whether civil, criminal, or administrative in nature, the RDC may refer it to the appropriate agency, whether Federal, State, or foreign, charged with responsibility for or otherwise involved in investigation, prosecution, enforcement, or prevention of such violations. See 56 Fed. Reg. 8020 (1991) for other published routine uses.

ATTACHMENT N

COPY OF ALL BUSINESS LICENSES AND CERTIFICATIONS.

OTHER SAMPLE FORMS

Business Name: _____

ONE YEAR PROJECTED BALANCE SHEET

As of: _____

ASSETS

Current Assets:

1. Cash	\$ _____	
2. Accounts Receivable	\$ _____	
3. Raw Materials (if applicable)	\$ _____	
4. Finished Goods or Inventory	\$ _____	
5. Prepaid Expenses (Security Deposit, Phone Deposit, Prepaid Insurance, etc.)	\$ _____	
6. Other Current Assets	\$ _____	
7. TOTAL CURRENT ASSETS (Total 1 thru 6)		\$ _____
8. Land and Buildings	\$ _____	
9. Machinery & Equipment	\$ _____	
10. Furniture, Fixtures & Vehicles	\$ _____	
11. Less: Accumulated Depreciation	\$ _____	
12. TOTAL FIXED ASSETS (Total 7 thru 11)		\$ _____
13. Other Assets		\$ _____
14. TOTAL ASSETS (7 + 12 + 13)		\$ _____

LIABILITIES AND NET WORTH

Current Liabilities

15. Accounts Payable	\$ _____	
16. Notes Payable (Current Portion)	\$ _____	
17. Taxes Payable	\$ _____	
18. TOTAL CURRENT LIABILITIES (15 + 16 +17)		\$ _____
19. Long Term Debt		
a. Mortgage Payable	\$ _____	
b. Notes Payable (Long Term Portion)	\$ _____	
20. TOTAL LONG TERM DEBT (19a + 19b)		\$ _____
21. TOTAL LIABILITIES (18 + 20)		\$ _____
22. TOTAL ASSETS (LINE 14)		\$ _____
23. NET WORTH (22 - 21)		\$ _____

**PROFIT AND LOSS STATEMENT
PREVIOUS THREE YEARS**

Business Name: _____

YEAR	1	2	3
SALES	<input type="text"/>	<input type="text"/>	<input type="text"/>
COST OF GOODS SOLD	<input type="text"/>	<input type="text"/>	<input type="text"/>
GROSS PROFIT	<input type="text"/>	<input type="text"/>	<input type="text"/>
<u>EXPENSES</u>	<input type="text"/>	<input type="text"/>	<input type="text"/>
WAGES	<input type="text"/>	<input type="text"/>	<input type="text"/>
UTILITIES	<input type="text"/>	<input type="text"/>	<input type="text"/>
GENERAL AND ADMIN.	<input type="text"/>	<input type="text"/>	<input type="text"/>
ADVERTISING	<input type="text"/>	<input type="text"/>	<input type="text"/>
ACCOUNTING	<input type="text"/>	<input type="text"/>	<input type="text"/>
LEGAL	<input type="text"/>	<input type="text"/>	<input type="text"/>
INTEREST	<input type="text"/>	<input type="text"/>	<input type="text"/>
OFFICER COMPENSATION	<input type="text"/>	<input type="text"/>	<input type="text"/>
RENT	<input type="text"/>	<input type="text"/>	<input type="text"/>
OTHER	<input type="text"/>	<input type="text"/>	<input type="text"/>
OTHER	<input type="text"/>	<input type="text"/>	<input type="text"/>
DEPRECIATION	<input type="text"/>	<input type="text"/>	<input type="text"/>
<u>TOTAL EXPENSES</u>	<input type="text"/>	<input type="text"/>	<input type="text"/>
NET INCOME BEFORE TAXES	<input type="text"/>	<input type="text"/>	<input type="text"/>
INCOME TAXES	<input type="text"/>	<input type="text"/>	<input type="text"/>
NET INCOME	<input type="text"/>	<input type="text"/>	<input type="text"/>

**PROFIT AND LOSS STATEMENT
THREE YEAR PROJECTION**

Business Name: _____

YEAR	1	2	3
SALES	<input type="text"/>	<input type="text"/>	<input type="text"/>
COST OF GOODS SOLD	<input type="text"/>	<input type="text"/>	<input type="text"/>
GROSS PROFIT	<input type="text"/>	<input type="text"/>	<input type="text"/>
<u>EXPENSES</u>	<input type="text"/>	<input type="text"/>	<input type="text"/>
WAGES	<input type="text"/>	<input type="text"/>	<input type="text"/>
UTILITIES	<input type="text"/>	<input type="text"/>	<input type="text"/>
GENERAL AND ADMIN.	<input type="text"/>	<input type="text"/>	<input type="text"/>
ADVERTISING	<input type="text"/>	<input type="text"/>	<input type="text"/>
ACCOUNTING	<input type="text"/>	<input type="text"/>	<input type="text"/>
LEGAL	<input type="text"/>	<input type="text"/>	<input type="text"/>
INTEREST	<input type="text"/>	<input type="text"/>	<input type="text"/>
OFFICER COMPENSATION	<input type="text"/>	<input type="text"/>	<input type="text"/>
RENT	<input type="text"/>	<input type="text"/>	<input type="text"/>
OTHER	<input type="text"/>	<input type="text"/>	<input type="text"/>
OTHER	<input type="text"/>	<input type="text"/>	<input type="text"/>
DEPRECIATION	<input type="text"/>	<input type="text"/>	<input type="text"/>
<u>TOTAL EXPENSES</u>	<input type="text"/>	<input type="text"/>	<input type="text"/>
NET INCOME BEFORE TAXES	<input type="text"/>	<input type="text"/>	<input type="text"/>
INCOME TAXES	<input type="text"/>	<input type="text"/>	<input type="text"/>
NET INCOME	<input type="text"/>	<input type="text"/>	<input type="text"/>