



Financial Assistance Application

**OHIO COUNTY ECONOMIC DEVELOPMENT ALLIANCE
REVOLVING LOAN FUND
FINANCIAL ASSISTANCE APPLICATION**

Total RLF Amount Requested: \$ _____

Name of Business: _____

Business Address: _____

City: _____ Zip: _____ Phone: _____

Contact Person: _____ Phone: _____

Email Address(s): _____

Type of Business: _____ Sole Proprietorship _____ Partnership _____ Corporation

Date Organized / Established: _____ SIC Code: _____

NAICS Code: _____

Employer's Federal Identification Number: _____

Employer's State Identification Number: _____

DUNS # : _____

Name of Owner #1:

Name of Owner #2:

Percentage Owned: _____

Percentage Owned: _____

Home Address: _____

Home Address: _____

City, State, Zip: _____

City, State, Zip: _____

Home Phone: _____

Home Phone: _____

Professional Services/ References:

Name of Bank: _____

City: _____ State: _____ Zip: _____ Phone: _____

Contact Person: _____ Account Number: _____

Name of Attorney: _____

Attorney Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Name of Accountant: _____

Accountant Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Current and Projected Employment Impact:

<u>Type of Employment (Full/ Part-Time)</u>	<u>Present Jobs</u>	<u>1st Year</u>	<u>2nd Year</u>
Professional/ Managerial/ Technical	__ FT __ PT	__ FT __ PT	__ FT __ PT
Skilled	__ FT __ PT	__ FT __ PT	__ FT __ PT
Unskilled/ Semi-Skilled	__ FT __ PT	__ FT __ PT	__ FT __ PT
TOTALS:	__ FT __ PT	__ FT __ PT	__ FT __ PT

Sources/ Uses of Funds:	RLF	Bank	Equity	Total
Land Acquisition	_____	_____	_____	_____
Building Acquisition	_____	_____	_____	_____

Improve/ Renovate				
Building	_____	_____	_____	_____
Purchase Equipment/ Machinery	_____	_____	_____	_____
Inventory	_____	_____	_____	_____
Working Capital	_____	_____	_____	_____
Other	_____	_____	_____	_____

TOTAL: _____

Project Summary:	RLF	Bank	[]	[]
Loan Amount	\$ _____	\$ _____	\$ _____	\$ _____
Loan Term	_____	_____	_____	_____
Loan Interest Rate	_____ %	_____ %	_____ %	_____ %
Annual Debt Service	\$ _____	\$ _____	\$ _____	\$ _____
Type of Collateral	_____	_____	_____	_____
Security Position	_____	_____	_____	_____
Type of Guarantee	_____	_____	_____	_____

Required Attachments:

_____ 1. A history and description of the business, an analysis of management ability, and a description of the product.

_____ 2. Detail the use of the proceeds of this project (cost of land, building, and equipment).

_____ 3. Personal financial statement, current within 30 days, for each proprietor or stockholder with 20% or more ownership of the SBC, and, if different, each owner with 20% or more ownership of the alter-ego. Personal guarantees are required of any owner with over 20% ownership of the company. Make sure that the date at the top of the statement and the date they are signed is the same and that the information is current as of that date. THE PERSONAL FINANCIALS MUST BE SIGNED BY BOTH HUSBAND AND WIFE IF THE PERSONAL FINANCIAL STATEMENT INCLUDED JOINT ASSETS. SIGN AND DATE.

_____ 4. Resumes of principals involved in day-to-day management.

_____ 5. A balance sheet with current Pro-forma (within 30 days). Please provide assumptions that support the financial information.

_____ 6. For a new or existing business, a monthly cash flow analysis for the first 12 months of operation or for three months beyond the breakeven point (whichever is longer) together with a description of assumptions.

_____ 7. Estimated projection and forecast of three years of earnings.

_____ 8. A schedule of debts that includes current debts and debts planned for the next 12 months (other than the EDC loan).

_____ 9. The name of affiliated (through ownership or management control) or subsidiary business as well as the last two fiscal year-end financial statements and a current financial statement for each of these firms.

_____ 10. If the business is a franchise, include a copy of the Franchise Agreement and the Franchiser's Disclosure Statement that is required by the Federal Trade Commission.

_____ 11. A copy of key cost documents, such as real estate purchase agreements, contractor cost estimates, vendor quotes for machinery and equipment, etc. IF EQUIPMENT IS BEING PURCHASED, GIVE A LIST OF THE EQUIPMENT AND A LETTER FROM A VENDOR

OR APPRAISER THAT STATES THE EQUIPMENT HAS A LIFE OF AT LEAST 10 YEARS. SIGN AND DATE.

_____ 12. If applicable, a copy of the existing or proposed lease agreement.

_____ 13. An independent appraisal for construction projects on an “as completed basis,” or an architect’s certified cost estimate, or a contractor’s contract based on completed plans and specifications.

_____ 14. Environmental analysis, if applicable. Please complete the enclosed form and sign and date. If a Phase I Environmental Study has been done by the bank, please provide a copy. If a study will be done, please note.

_____ 15. A commitment letter from the private lender outlining the amount of the loan, term, interest rate, and collateral.

_____ 16. Tax Returns - Provide the previous three years’ business tax returns, which MUST BE SIGNED AND DATED BY THE BORROWER.

_____ 17. List of major customers and potential new customers.

_____ 18. List of major competitors.

_____ 19. Letter of support from the local community. (development authority, chamber of commerce, etc.)

Signatures:

I declare that any statement in this application and in its required attachments, or information provided herein, is true and complete in substance and in fact.

Name of Business: _____

By: _____ Title: _____ Date: _____

Attest: _____ Title: _____ Date: _____

Signed: _____



Ohio County Economic Development Alliance

Credit Authorization

Borrower 1

Borrower Name: _____

Borrower Address: _____

Borrower Birthdate: _____

Borrower SS#: _____

Signature: _____

Borrower 2

Borrower Name: _____

Borrower Address: _____

Borrower Birthdate: _____

Borrower SS#: _____

Signature: _____

(feel free to make copies of this form if more than two borrowers)