



LOAN APPLICATION

Today's Date:	Loan # (Office Only):
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INFORMATION

Last name:	First:	Middle:	<input type="checkbox"/> Mr.	<input type="checkbox"/> Miss	Marital status:
Birthdate (optional):			<input type="checkbox"/> Mrs.	<input type="checkbox"/> Ms.	Single <input type="checkbox"/> Mar <input type="checkbox"/> Div <input type="checkbox"/> Sep <input type="checkbox"/> Wid <input type="checkbox"/>
Street address (home):		Social Security #:		Home phone #:	
P.O. Box:	City:	State:		ZIP Code:	
County:	Cell Phone:		Fax #:		
Email Address:		Is This Your Legal Name: <input type="checkbox"/> Yes <input type="checkbox"/> No		Legal Name: _____ Sex: <input type="checkbox"/> M <input type="checkbox"/> F	
Business Name:		NAICS Code (office only):		Date Business Established:	
Street address:		Pending Lawsuit: Yes <input type="checkbox"/> No <input type="checkbox"/>		Business phone #:	
P.O. Box:	City:	State:		ZIP Code:	
County:	Cell Phone:		Fax #:		
Business Website:		Fed ID#:		MN Tax ID#:	
DUNS #:					
Loan Type (Check One): <input type="checkbox"/> Micro Loan (\$1,000-\$35,000) Borrowers participation minimum 25% down on total project <input type="checkbox"/> Revolving Loan (\$35,000-\$100,000) Borrowers participation minimum 10% down on total project					
Project Type (Check One): <input type="checkbox"/> New Business <input type="checkbox"/> Expansion of Existing Business					
Business Type: <input type="checkbox"/> C-Corporation <input type="checkbox"/> LLC <input type="checkbox"/> P-Partnership <input type="checkbox"/> S-Sole Proprietorship <input type="checkbox"/> General Partnership <input type="checkbox"/> S-Corporation					
Type of Business:					

PRINCIPAL OWNERS AND TITLE(S) INFORMATION

Owner #1 Name:	Title:	Time In Position:
Street address:	City:	State:
County:	Phone:	ZIP Code:
		Fax #:
Owner #2 Name:	Title:	Time In Position:
Street address:	City:	State:
County:	Phone:	ZIP Code:
		Fax #:

BANK INFORMATION

Bank Name:	Contact Name:	Contact Title:
Mailing address:	City:	State:
County:	Phone:	ZIP Code:
		Fax #:

FINANCIAL REQUEST INFORMATION

Amount Requested: \$	Rate Requested: %	Term: Years
Date Financing is Needed: Month/Day/Year		

COLLATERAL INFORMATION

Collateral Type: <input type="checkbox"/> RE <input type="checkbox"/> Equipment <input type="checkbox"/> Inventory <input type="checkbox"/> Business Assets <input type="checkbox"/> Personal RE <input type="checkbox"/> Personal Assets <input type="checkbox"/> Other (Please Describe Below)
Description of Collateral Available to Secure the Loan:
Reason For NCEDA Participation: <input type="checkbox"/> GAP lend with financial institution (bank or other primary lender) <input type="checkbox"/> Financial Lender denied loan (have denial letter)

BUSINESS INFORMATION

Pre-Loan Jobs (Current):	New Full-Time* Jobs:	New Part-Time Jobs:	Retained Jobs:
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*One Full-Time Position is Equivalent to 2,080 Hours Worked Per Year

PROJECT FINANCIAL SOURCES & USES INFORMATION

	BANK	OWNERS EQUITY	NCEDA (Revolving Loan Fund)	MICRO LOAN FUND	TOTAL
Property Acquisition	\$	\$	\$	\$	\$
Site Improvement	\$	\$	\$	\$	\$
Renovation	\$	\$	\$	NA	\$
Construction*	\$	\$	\$	NA	\$
Machinery & Equipment	\$	\$	\$	\$	\$
Working Capital	\$	\$	\$	\$	\$
Other:	\$	\$	\$	\$	\$
Other:	\$	\$	\$	\$	\$
Other:	\$	\$	\$	\$	\$
Other:	\$	\$	\$	\$	\$
Total Costs:	\$	\$	\$	\$	\$

*Federal Davis-Bacon Wage Rates Apply.

Status of Other Financing: (Check One) Committed Contingent on NCEDA Approval

If Committed, document funding date: Month Day Year

Have you declared bankruptcy: Yes No Personal Business If yes, when: Month/Day/Year

List Source of Owner's Equity:

EXISTING DEBT INFORMATION

Loan #1:	Contact Person:	Phone #:	Collateral:
Loan #2:	Contact Person:	Phone #:	Collateral:
Loan #3:	Contact Person:	Phone #:	Collateral:
Loan #4:	Contact Person:	Phone #:	Collateral:

ETHNIC INFORMATION

You are not required to furnish this information, but are encouraged to do so.

Please provide the following information so that the business will be in compliance with Title VI of the Civil Rights Act of 1964.

The information regarding race, color, or national origin designation is requested in order to assure the Federal Government that the business complies with Federal Laws prohibiting discrimination on the basis of race, color, or national origin. This information will not be used in evaluating your request for services or to discriminate against you in any way. However, if you choose not to furnish this information, **we are required to note your race/color/national origin on the basis of visual observation or surname.**

Please check the appropriate information below:

ETHNIC CATEGORIES (check one)

- | | | |
|--|---|--|
| <input type="checkbox"/> American Indian or Alaskan Native | <input type="checkbox"/> Hispanic or Latino | <input type="checkbox"/> Black or African American |
| <input type="checkbox"/> Asian | <input type="checkbox"/> Not Hispanic or Latino | <input type="checkbox"/> Native Hawaiian or Other Pacific Islander |
| <input type="checkbox"/> White | <input type="checkbox"/> Two or More Races | <input type="checkbox"/> Some Other Race |

Who filled out this form? (check one)

- Participant
 Employee Observed

EMPLOYERS CERTIFICATE OF NONRELOCATION

The Employer certifies and assures that it is not its intention to transfer one or more jobs from one commuting area to another by either (1) closing an operation in one commuting area and opening a new operation in the Project Area, which is in a new commuting area, or (2) curtailing its operations in another location and increasing the number of jobs of the existing operations located in the Project Area, for a period of forty-eight (48) months from the date of approval of financial assistance.

The Employer understands that financial assistance is not prohibited for the expansion of an Employer through the creation of a new branch, affiliate, or subsidiary which will not result in a decrease in jobs in any area where the Employer conducts business operations, and that retail stores which open new outlets in funded facilities are exempt from this requirement provided: (1) the retail store is not a direct recipient of public financial assistance; (2) the retail store is not engaged in a pattern of operations which would result in relocation a substantial portion of its operations from one multi-state region to another; and (3) the new outlet opening will not result in a significant reduction of employment in the retail store's entire operation.

Note - Section 710(a) of the Public Works and Economic Development Act of 1965, as amended, provides that: "Whoever makes any statement knowing it to be false, or whoever willfully overvalues any security, for the purpose of obtaining for himself or for any applicant any financial assistance under section 101, 201, 202, or 403 or any extension thereof by renewal, deferent, or action, or otherwise, or the acceptance, release, or substitution of security therefore, or for the purpose of influencing in any way the action of the Secretary, or for the purpose of obtaining money, property, or anything of value, under this Act, shall be punished by a fine of not more than \$10,000 or by imprisonment for not more than five years, or both." EDA'S NONRELOCATION REQUIREMENTS PROVIDE THAT: "WHEN EDA DETERMINES THAT THESE REQUIREMENTS HAVE BEEN VIOLATED, EDA WILL TERMINATE FOR CAUSE THE FINANCIAL ASSISTANCE MADE AVAILABLE BY EDA. THE RECIPIENT WILL BE OBLIGATED TO REPAY TO EDA THE FULL AMOUNT OF THAT FINANCIAL ASSISTANCE, PLUS INTEREST, FROM THE DATE DETERMINED BY EDA UPON WHICH THE VIOLATION OCCURRED, AT THE NEW YORK BANK PRIME RATE AS REPORTED IN THE WALL STREET JOURNAL ON THE DATE OF TERMINATION."

APPLICATION SUBMISSION INFORMATION

Stephanie Barney, Business Loan Developer
Region Five Development Commission
& Affiliate 501c3 North Central Economic Development Association
200 1st Street NE, Suite 2, Staples, MN 56479
Office: 218.894.3233 Direct: 218.894.5201
sbarney@regionfive.org
www.northcentraleda.org
www.regionfive.org

POST APPLICATION REQUIRED DOCUMENTS (CONTACT LOAN DEVELOPER)

- Submit Signed Completed Application by Mail with Application Fee (\$100 Micro/\$200 GAP)-check made out to "NCEDA"**
- Business Plan – 1 page narrative
- Resume of owner(s) - any person who owns 20% or more interest in the business
- Signed personal financial statements of owner(s) - any person who owns 20% or more interest in the business
- NCEDA will obtain a credit report of owner(s) - any person who owns 20% or more interest in the business
- A copy of business financial history for two most recent previous years – exception (new business)
- A copy of balance sheet profit and loss statement history for two previous years – exception (new business)
- A copy of last two tax returns of owner(s), if no financial history available because application is for new business
- Federal tax returns filed by the business for the previous two years
- Cash flow projection by month for next two years (SBDC will assist with this)
- Site map, property appraisal and legal description - if loan is to include real estate
- Commitment letter or denial letter from your bank or primary lender regarding any financing that will provide for this project
- Information concerning any pending or threatened litigation or administrative proceeding, any outstanding administration orders, judgments or involvement in any bankruptcy.
- Copy of Business Certificate of Insurance

APPLICANT SIGNATURES

I certify that the above information and the statements contained herein or attached hereto are true and accurate to the best of my knowledge. I further authorize the NCEDA to verify the submitted information by contacting any individual or organization deemed to have knowledge of the proposed project. I further understand that intentional misrepresentation of facts may be the basis for a denial of funding. I agree to pay an application fee (\$100 Micro OR \$200 Gap).

In addition, I authorize representatives of the North Central Economic Development Association (NCEDA) to review my credit references and view my credit report. I authorize NCEDA to discuss my account with lending institutions and obtain financial and other business related information from those institutions.

NCEDA may use my business name when promoting programs with no obligation to the borrower.

Name of Business:

By:

Title:

Date: