



Revolving Loan Fund Business Loan Application

The goal of the Hinesburg Revolving Loan Fund Committee is to make decisions on loan applications within 30 days of receipt of completed loan package.

PART 1. BUSINESS DESCRIPTION

Business Name: _____
Nature of Business: _____
Business Address: _____ No. of Employees: _____
Business Telephone #: _____ Email: _____ Years in Business _____
Federal Tax I.D. #: _____ DUNS #: _____ NAICS#: _____
Business Premises Rented [] Owned [] Landlord's Name if rented: _____
Form of Organization: Proprietorship [] Partnership [] Corporation [] LLC [] Subchapter S Corp. []

PART 2. OWNERSHIP

Name: _____ Title: _____ % Ownership: _____
Address: _____ DOB: _____ SS#: _____

Name: _____ Title: _____ % Ownership: _____
Address: _____ DOB: _____ SS#: _____

(Continue on another sheet, if necessary)

PART 3: LOAN REQUEST AND COLLATERAL INFORMATION

Amount Requested: \$ _____ Requested Loan Term: _____

Please describe the purpose of the loan.

How will the business repay the loan? _____

Please provide a detailed listing of assets to be purchased with loan proceeds. If the loan is to be used for working capital, please provide a detailed listing of how the funds will be spent. (Use additional sheet(s) if necessary.)

Please list the other sources of funding for the project. Attach commitment letters from the other lenders. For all non-bank private lenders/investors in the project, please provide full name, address and Tax Identification Number (for an entity) or Social Security Number (for an individual) on a separate sheet.

<u>Name of Lender</u>	<u>Loan Amount</u>	<u>Terms & Interest Rate</u>	<u>Collateral</u>

Cash equity to be invested in the project by the Applicant (or others): \$_____

Terms (if any): _____

PART 4: EMPLOYMENT INFORMATION

How many full time jobs does the business have now? _____

How many new employees will you hire as a result of this project? _____

CREATE: Full time _____ Part-time _____ **RETAIN:** Full time _____ Part-time _____

PART 5: BUSINESS PLAN AND FINANCIAL INFORMATION

(Please attach additional sheets with this information).

BUSINESS PLAN: Please provide a complete business plan.

A guide to creating a business plan may be found at the Vermont Small Business Development Center Website at <http://www.vtsbdc.org/assets/files/sbdc-business-plan-guidelines.pdf>.

BUSINESS FINANCIAL INFORMATION: Please provide the following:

- A. Business financial statements and tax returns for at least the last two years. These should include both income statements and balance sheets for both years.
- B. Current interim income statement and balance sheet for this year-to-date.
- C. Projected income statements and balance sheets for at least two years.
- D. Cash flow projections for at least one year.
- E. Schedule of liabilities, including: each creditor's name, contact, address, phone number, original balance, current balance owed, maturity, current payment, and interest rate. Please note if presently in arrears on any loan payments.
- F. Schedule of contingent liabilities, including: amounts that may be due, to whom, and under what circumstances.

PERSONAL FINANCIAL INFORMATION:

- A. Current signed personal financial statement for each principal who owns at least 20% of the business (dated within 90 days of the application). (Form attached.)
- B. Individual tax returns from each of these individuals for the last year.
- C. A resume of business experience from each principal.

PART 6. BANK AND TRADE CREDIT REFERENCES

Deposits:

Bank: _____ Acct. #: _____
Contact: _____ Telephone #: _____ Facsimile #: _____

Bank: _____ Acct. #: _____
Contact: _____ Telephone #: _____ Facsimile #: _____

Loans:

Bank: _____ Type of Loan: _____
Contact: _____ Repayment: _____ Balance: _____

Bank: _____ Type of Loan: _____
Contact: _____ Repayment: _____ Balance: _____

Trade Credit:

Supplier: _____ City/Town: _____ Terms: _____
Contact: _____ Telephone #: _____ Facsimile#: _____

Supplier: _____ City/Town: _____ Terms: _____
Contact: _____ Telephone #: _____ Facsimile#: _____

Supplier: _____ City/Town: _____ Terms: _____
Contact: _____ Telephone #: _____ Facsimile#: _____

Supplier: _____ City/Town: _____ Terms: _____
Contact: _____ Telephone #: _____ Facsimile#: _____

PART 7. GENERAL INFORMATION

Is this business a co-borrower or guarantor for any other business or individual? Yes _____ No _____

If yes, describe: _____

Is this business a party to any claim or lawsuit? Yes _____ No _____

If yes, describe: _____

Has the business ever filed for protection under the bankruptcy laws? Yes _____ No _____

Is at least 51% of the business owned by U.S. citizens or green card holders? Yes _____ No _____

Does the business owe any taxes for prior years? Yes _____ No _____

Are all payroll withholding taxes current? Yes _____ No _____

Will these loan proceeds be used for a project that will require the approval of a governmental authority, such as a Zoning Board, Planning Commission, or Territorial Environmental Commission? Yes _____ No _____

If yes, describe: _____

Other Information

References:?

PART 8. INSURANCE COVERAGE

Insurance Agent: _____ Telephone #: _____

Address: _____

Description of coverage: _____

Miscellaneous items as appropriate:

- Corporate Resolution Authorizing Application
- Certificate of Good Standing
- Purchase and Sale Agreement
- Equipment Purchase Invoice
- Partnership Agreement
- Lease Agreement
- Articles of Incorporation and By-laws
- Shareholder Agreements
- Other information may be requested by HINESBURG RLF as deemed necessary.

I/we, the undersigned, affirm that all statements made on this Information Sheet are accurate and complete. I/we also agree to notify Hinesburg RLF of any material changes in the information shown on this sheet or the accompanying documents. HINESBURG RLF is hereby authorized to gather credit information about me/us and to respond to credit inquiries about my/our accounts. I/we understand that all application information will remain the property of HINESBURG RLF. I/we certify that financing cannot be obtained from conventional credit sources, except when HINESBURG RLF involvement would induce participation from conventional sources. I/we understand that the HINESBURG RLF lending decision may be a matter of public record.

Signature: _____ Title: _____ Date: _____

Signature: _____ Title: _____ Date: _____

Please be sure to include your application fee of \$100 with this application. Loans will not be processed until the fee is received.

Hinesburg RLF is an equal opportunity lender, with funds available on a non-discriminatory basis.

Date Revised: 3/2016

PERSONAL FINANCIAL STATEMENT

PART A: PERSONAL INFORMATION INDIVIDUAL STATEMENT JOINT STATEMENT

Name: _____	Joint Applicant Name: _____
Address: _____ Zip: _____	Address: _____ Zip: _____
Residence Telephone #: _____	Residence Telephone #: _____
Social Security #: _____	Social Security #: _____
Employer: _____	Employer: _____
Address: _____	Address: _____
Length of Employment: _____	Length of Employment: _____
Current Job Title: _____	Current Job Title: _____

PART B: PERSONAL FINANCIAL INFORMATION as of , 20

<u>Assets:</u>	<u>Liabilities:</u>
Cash \$ _____	Mortgage Loans Payable (complete Schedule 3) \$ _____
Cash \$ _____	Other Loans (complete Schedule 5) \$ _____
Government securities (complete Schedule 1) \$ _____	Due to brokers: \$ _____
Marketable securities (complete Schedule 1) \$ _____	Unpaid income or other taxes and interest \$ _____
Non-marketable securities (complete Schedule 2) \$ _____	Credit cards (please itemize:
Real Estate (complete schedule 3) \$ _____	1. _____ \$ _____
Accounts, loans and notes receivable: \$ _____	2. _____ \$ _____
Retirement accounts (vested portion) \$ _____	3. _____ \$ _____
Cash surrender value of life insurance(complete Schedule 6) \$ _____	4. _____ \$ _____
Automobiles \$ _____	Other accounts and bills due (please itemize)
Other Assets \$ _____	1. _____ \$ _____
1. _____ \$ _____	2. _____ \$ _____
2. _____ \$ _____	3. _____ \$ _____
3. _____ \$ _____	TOTAL LIABILITIES: \$ _____
TOTAL ASSETS: \$ _____	NET WORTH (Assets – Liabilities = Net worth) \$ _____
	TOTAL LIABILITIES AND NET WORTH: \$ _____

PART C: PERSONAL INCOME AND EXPENSES For the year ending December 31, 20

*You need not list alimony, child support or separate maintenance income if you do not wish to have it considered.

Annual Income:

Contingent Liabilities:

Annual salary, bonuses, commissions: \$ _____
 Dividends and interest: \$ _____
 Net rental income: \$ _____
 Other income: * \$ _____
 TOTAL ANNUAL INCOME: \$ _____

Do you have any contingent liabilities:
 YES___ NO_____

If YES, please indicate the amount of each liability and provide details below:

As endorser, co-maker or guarantor: \$ _____
 Damage claims or legal actions: \$ _____
 Contested taxes: \$ _____
 Other: (please itemize) \$ _____

Details: _____

ANNUAL EXPENSES:

Mortgage/rental payment: \$ _____
 Real Estate taxes: \$ _____
 Federal, state and local taxes: \$ _____
 Insurance premiums: \$ _____
 Credit cards, car payments, etc.: \$ _____
 Alimony, child support, maintenance: \$ _____
 Other expenses: \$ _____
 TOTAL ANNUAL EXPENSES: \$ _____

TOTAL CONTINGENT LIABILITIES: \$ _____

PART D: GENERAL INFORMATION

Schedule 1: Government Securities, Stocks and Bonds:

Description:	In name of:	Number of units/shares:	Market value per share:	Total market value	Pledged as collateral?
_____	_____	_____	_____	_____	YES___ No___
_____	_____	_____	_____	_____	YES___ No___
_____	_____	_____	_____	_____	YES___ No___
_____	_____	_____	_____	_____	YES___ No___