

# RURAL BUSINESS DEVELOPMENT GRANT PROGRAM

## ENTERPRISE AND OPPORTUNITY GRANT PROGRAMS

CITY OF WOOD RIVER - REVOLVING LOAN FUND APPLICATION

LOAN AMOUNT: \$ \_\_\_\_\_ -

NAME: _____	CONTACT PERSON: _____
ADDRESS: _____	UR TYPE(I.E. PROFIT): _____
SSN OR EIN: _____	TYPE OF BUSINESS: _____
UEI NUMBER: _____	INTEREST RATE: _____ FIXED/VARIABLE: _____ TERMS: _____
	JOBS CREATED: _____ JOBS SAVED: _____

**SOURCE OF FUNDS:**

TOTAL LOAN PACKAGE:		PERCENTAGE OF FUNDING
INTERMEDIARY RLF FUNDS:	\$ -	0.00%
MATCHING FUNDS:	\$ -	0.00%
OTHER FUNDS:	\$ -	0.00%
<b>TOTAL:</b>	\$ -	0.00%

**USE AND SOURCE OF FUNDS:**

PURPOSE	RLF FUNDS	OTHER FUNDS	SOURCE OF OTHER FUNDS
REAL ESTATE ACQUISITION:	\$ -	\$ -	
REAL ESTATE IMPROVEMENTS:	\$ -	\$ -	
MACHINERY/EQUIPMENT:	\$ -	\$ -	
INVENTORY:	\$ -	\$ -	
WORKING CAPITOL:	\$ -	\$ -	
<b>TOTAL:</b>	\$ -	\$ -	

**LOAN PURPOSE ( BRIEF DESCRIPTION OF LOCATION, NATURE AND SCOPE OF THE PROJECT BEING FINANCED):**

**NATURE OF LIEN PRIORITY OF THE COLLATERAL:**



**SCHEDULE 3 SECURITIES OWNED**

No. shares or Bond amount	Description	In whose name(s) registered	Cost	Present Market Value	L- listed U- unlisted
TOTAL			\$ -	\$ -	

**SCHEDULE 4 LIFE INSURANCE**

Insured	Insurance Company	Beneficiary	Face value of policy	Cash value	Loans
TOTAL				\$ -	\$ -

**SCHEDULE 5 REAL ESTATE**

Address and Type of Property	Title in name(s) of	Monthly Income	Cost / Year Acquired	Present Market Value	Amount of Insurance
			\$ - Year		
			\$ - Year		
			\$ - Year		
			\$ - Year		
			\$ - Year		

**SCHEDULE 6 MORTGAGES OR LIENS ON REAL ESTATE**

To Whom Payable	How Payable	Interest Rate	Maturity Date	Unpaid Balance
	\$ - per			
	\$ - per			
	\$ - per			
	\$ - per			
	\$ - per			

**SCHEDULE 7 LOANS PAYABLE TO BANKS & OTHERS AND INSTALLMENT CONTRACTS PAYABLE**

To Whom Payable	Address	Collateral or Unsecured	How Payable	Maturity Date	Unpaid Balance
			\$ - per		
			\$ - per		
			\$ - per		

APPLICANT

JOINT APPLICANT

Have you ever gone through bankruptcy or had a judgment against you?

Yes  No

Yes  No

Are any assets pledged or debts secured except as shown?

Yes  No

Yes  No

Have you made a will?

Yes  No

Yes  No

Number of dependents (if none, check "None")

\_\_\_\_\_  None

\_\_\_\_\_  None

**Marital Status**

**Applicant**

**Joint Applicant or Other Party**

Leave blank, unless:

Leave blank, unless:

- (1) the credit will be secured, or
- (2) you reside in a community property state, or
- (3) you are relying on property, located in a community property state, as a basis for repayment

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- (2) you reside in a community property state, or
- (3) you are relying on property, located in a community property state, as a basis for repayment

- Married (as defined by state law; incl. domestic partnership, civil union)
- Separated
- Unmarried (including single, divorced, widowed)

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- Separated
- Unmarried (including single, divorced, widowed)

The forgoing statement, submitted for the purpose of obtaining credit, is true and correct in every detail and fairly shows my/our financial condition at the time indicated. I/we will give you prompt written notice of any subsequent substantial change in such financial condition occurring before discharge of my/our obligations to you. I/we understand that you will retain this personal financial statement whether or not you approve the credit in connection with which it is submitted. You are authorized to check my/our credit and employment history or any other information contained herein.

THE UNDERSIGNED CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM HAS BEEN CAREFULLY REVIEWED AND THAT IT IS TRUE AND CORRECT IN ALL RESPECTS.

\_\_\_\_\_  
Date

\_\_\_\_\_  
My signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Joint Applicant signature (if you are requesting the financial accommodation jointly)

# COMMERCIAL LOAN APPLICATION

CREDIT REQUESTED				
Amount Requested	Term of Credit Requested	Loan Type	Credit Request <input type="checkbox"/> Applicant Only <input type="checkbox"/> Joint With Co-Applicant(s)	
Market Survey	Purpose of Credit Request	App #	We intend to apply for joint credit: Applicant _____ Co-Applicant _____	

## COMPLETION INSTRUCTIONS FOR APPLICANT

Complete the Applicant information for the first Applicant. Mark the appropriate box to indicate whether the Applicant is applying as a Borrower, Guarantor, Cosigner, Grantor (of collateral), or Other for a different capacity. If the Applicant is a married individual, he or she may apply for individual credit. **(Do Not complete Marital Status question below if application is for individual unsecured credit)**

## APPLICANT INFORMATION:

Applicant is a: <input type="checkbox"/> Borrower <input type="checkbox"/> Guarantor <input type="checkbox"/> Cosigner <input type="checkbox"/> Grantor <input type="checkbox"/> Other _____			
Name of Applicant (Business Name or Last Name if Individual)	Applicant First Name (If individual)	SSN/TIN#	
Assumed Business Names (If Any)	Filing Dates	Filing Locations	DBA Name

<p><b>Check Appropriate Box</b></p> <p><input type="checkbox"/> If you are applying for individual credit and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested, do not complete the section for marital status.</p> <p><input type="checkbox"/> If you are applying for individual credit, but are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as the basis for repayment of the credit requested, complete all sections to the extent possible, providing information about the person on whose alimony, support or maintenance payments or income or assets you are relying.</p> <p><input type="checkbox"/> If you are applying for joint credit with another applicant, complete all sections and attach joint application.</p>	<p><b>Marital Status (If Individual Borrower)</b></p> <p><input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated</p>
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Street Address	City	ST	Zip Code	Phone Number
Mailing Address	City	ST	Zip Code	
Principal Office Address (if not listed above)	City	ST	Zip Code	
State of Organization	Applicant is: <input type="checkbox"/> An Individual <input type="checkbox"/> A Proprietorship <input type="checkbox"/> A Partnership <input type="checkbox"/> A Corporation <input type="checkbox"/> Non-Profit <input type="checkbox"/> An Association <input type="checkbox"/> A Trust <input type="checkbox"/> A Gov't Entity <input type="checkbox"/> A LLC			

## SCHEDULE OF COLLATERAL OFFERED BY THIS APPLICANT

Description	Value	Total Liens	Ownership Status for This Applicant	Creditor Name
		\$	<input type="checkbox"/> Purchase Money <input type="checkbox"/> Presently Owned	
		\$	<input type="checkbox"/> Purchase Money <input type="checkbox"/> Presently Owned	
		\$	<input type="checkbox"/> Purchase Money <input type="checkbox"/> Presently Owned	
		\$	<input type="checkbox"/> Purchase Money <input type="checkbox"/> Presently Owned	
		\$	<input type="checkbox"/> Purchase Money <input type="checkbox"/> Presently Owned	

Use Additional Sheet if Necessary

**FINANCIAL AND INCOME STATEMENT SUMMARY**

Alimony, Child Support or Separate Maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

Total Assets: \$ \_\_\_\_\_ Total Annual Income: \$ \_\_\_\_\_

Total Liabilities: \$ \_\_\_\_\_ Total Annual Expenses: \$ \_\_\_\_\_

Net Worth: \$ \_\_\_\_\_ Net Annual Cash Flow: \$ \_\_\_\_\_

See Attached Financial statements.

**RELATIONSHIP INFORMATION - APPLICANT'S HISTORY WITH LENDER**

New Customer Customer Since(MM-YYYY): \_\_\_\_\_ Last Financial Statement Date(MM-DD-YYYY): \_\_\_\_\_  
 Existing Customer Last Tax Return Date on File(YYYY): \_\_\_\_\_ Last Credit Report Date(MM-DD-YYYY): \_\_\_\_\_  
 Last Credit Bureau: \_\_\_\_\_

**Liabilities with Lender**

Direct: \$ \_\_\_\_\_  
 Contingent: \$ \_\_\_\_\_  
 Total: \$ \_\_\_\_\_

**Deposits with Lender**

DDA Avg: \$ \_\_\_\_\_  
 Other Avg: \$ \_\_\_\_\_  
 Total Avg: \$ \_\_\_\_\_

**Total Credit With Lender**

New Credit: \$ \_\_\_\_\_  
 Proposed Total: \$ \_\_\_\_\_

**SIGNERS FOR THIS APPLICANT**

Name	Title	Authorized	SSN #
Street Address	City	ST	Zip Code Phone Number
Name	Title	Authorized	SSN #
Street Address	City	ST	Zip Code Phone Number
Name	Title	Authorized	SSN #
Street Address	City	ST	Zip Code Phone Number
Name	Title	Authorized	SSN #
Street Address	City	ST	Zip Code Phone Number

Use Additional Sheet If Necessary

**APPLICANT SIGNATURES**

I/We hereby apply for the loan or credit described in this application on behalf of the applicant business. I/We certify that I/we made no misrepresentation in this loan application or in any related documents, that all information is true and complete, and that I/we did not omit any important information. I/We agree that any property securing the loan or credit will not be used for any illegal or restricted purpose. Lender is authorized to verify with other parties and to make any investigation of my/our credit, either directly or through any agency employed by the Lender for that purpose. Lender may disclose to any other interested parties information as to Lender's experiences or transactions with my/our account. I/We understand that Lender will retain this application and any other credit information Lender receives, even if no loan or credit is granted. These representations and authorizations extend not only to Lender, but also to any insurer of the loan and to any investor to whom Lender may sell all or any part of the loan. I/We further authorize Lender to provide any such insurer or investor any information and documentation that they may request with respect to my/our application, credit or loan.

**APPLICANT:**

By: \_\_\_\_\_ By: \_\_\_\_\_  
 By: \_\_\_\_\_ By: \_\_\_\_\_

Use Additional Sheet If Necessary

**FOR LENDER'S USE ONLY**

Officer No. / Name	Approved By	Concurrence By (If Needed)	Committee Date	Decision Date
Branch 1	Application Date	Application No.	Commitment No.	Loan No.

Decision and Comments:  Approved  Denied  Incomplete  Counteroffer  Conditional Approval  Withdrawal  Other: \_\_\_\_\_

# COMMERCIAL LOAN APPLICATION CHECKLIST

Thank you for your interest in a commercial loan through Eagle Bank. In order to preliminarily process and review your request without unnecessary delays, certain information should be provided to the bank.

The following items should be provided to Eagle Bank at the time of your initial application:

- A brief statement outlining your loan request including: the amount of the loan request, purpose of the request, proposed repayment terms, proposed collateral, name of business, tax ID number of the business, names of owners, partners, corporate stockholders, or officers, social security numbers for owners, partners, etc., and any additional information that you think might be helpful.
- If a corporation, a copy of your Articles of Incorporation, Corporate By-Laws and Certificate of Good Standing.
- If a L.L.C., a copy of your Articles of Organization, Operating Agreement, and Certificate of Good Standing.
- If a partnership, a copy of your Partnership Agreement and Certificate of Good Standing.
- A current (signed and dated) business balance sheet.
- A current (signed and dated) Personal Financial Statement for each stockholder (with 20% or greater ownership), partner, officer, and owner.
- Profit and Loss statements for the last 3 years. (If three years statements are not available, please explain why)
- Personal and Business Federal Income Tax returns for the past 3 years.
- Earnings projections for at least 1 year.
- A brief history of your company including information about the technical and business background of all people listed under Management.
- Additional information as requested.

For more information on Business Plans contact the Area office that services your county. Contact information can be found at:

<http://www.rurdev.usda.gov/mo/ao-list.htm>



Committed to the future of rural communities.

**United States Department of Agriculture  
Rural Development  
Nebraska**  
<http://www.rurdev.usda.gov>

## **B&I Program Insights # 2: BUSINESS PLANS**

### **Business & Industry (B&I) Guaranteed Loan Program**

February 24, 2010

#### **What is a “business plan”?**

A business plan is a document written by the owners of a business that explains the nature of their business, the business’s objectives, and how they will be achieved. It answers the question, “Where is this business going, and why will it succeed?”

#### **When is a business plan required?**

Many commercial lenders routinely ask for a business plan as part of a loan application.

A business plan is required with every B&I guaranteed loan application. Ideally, it should be part of the preapplication package, but it can be provided later if it is not initially available.

#### **Is a specific business plan format required?**

Usually, the key issues can be addressed in 2-5 pages.

USDA does not mandate any specific form or format for the business plan, but it should normally address at least the following issues:

##### Business Description

- Business organization and ownership
- Nature of the product or service provided

##### Market Information

- Demand. What is the demand (past, present, future) for the business’s product/service? Who will buy the product/service?
- Supply. What is the supply (past, present, future) of the business’s product/service? Who are the business’s competitors?
- Market niche. Given the trends in demand and supply, how will the business be able to sell enough of its product/service to be profitable?

##### Production Information

- What is availability of materials, labor, & machinery needed for the product/service?
- Is the technology to be used by the business reliable? state-of-the-art? proven?

##### Industry & Market Area Information

- Discuss any economic & demographic trends affecting the business (past, present, & future)

##### Management

- Resumes of management, focusing on relevant business experience

**PLEASE INCLUDE BUSINESS PLAN IN APPLICATION**

*Committed to the future of rural communities*

Rural Development is an Equal Opportunity Lender, Provider, and Employer. Complaints of discrimination should be sent to USDA, Director, Office of Civil Rights, Washington, D. C. 20250-9410



**CITY OF WOOD RIVER RBDG REVOLVING LOAN FUND  
APPLICANT/BUSINESS OWNER FORM  
DATA COLLECTION SYSTEM and  
DISCLOSURE STATEMENT for RD RECIPIENTS**

Rural Development staff is responsible to advise RD applicants of the data collection requirement during the application process and to make sure that a data collection system is in place for compliance reviews. RD financed programs are required to maintain gender, racial and ethnic data for users, participants, employees and Board of Directors members to monitor adherence to Title VI and other civil rights laws. By signing the Assurance Agreement, Form RD 400-4, the recipient agrees to this requirement. Recipients are responsible to inform RD staff of their method for data collection. This racial, ethnic and gender data is reported on Compliance Reviews by RD staff. The data collection system of program recipients is reviewed during the SIRs.

The Standards for the Classification of Federal Data on Race and Ethnicity can be found in the Federal Register Volume 62, No.210. The five categories for race and the two categories for ethnicity are listed below.

For MFH projects refer to HB-2-3560, Chapter 6, for application and disclosure statement requirements.

Business and Community Program recipients are encouraged to collect the required data at time of application or intake and to utilize a disclosure statement, as in the following example, that gives the parameters for this requirement.

**Example:**

**“The following information is requested by the Federal Government for certain types of loans and grants, in order to monitor compliance with civil rights laws. You are not required to furnish this information, but are encouraged to do so. The law requires that a program recipient may neither discriminate on the basis of this information nor on whether you choose to furnish it. However, if you choose not to furnish it, under federal regulations, this program representative is required to note race/ethnicity on the basis of visual observation or surname.”**

I do not wish to furnish this information.

**Ethnicity:**

Hispanic or Latino  
 Not Hispanic or Latino

**Race: (Mark one or more)**

White  
 Black or African American  
 American Indian/Alaska Native  
 Asian  
 Native Hawaiian or other Pacific Islander

**Gender:**

Male  
 Female

Persons with Disabilities

**CITY OF WOOD RIVER RBDG REVOLVING LOAN FUND APPLICANT  
WITH EMPLOYEES AND/OR A BOARD OF DIRECTORS**

Please enter Racial/Ethnicity and Gender Data describing your Employees and Board as required by the U.S. Department of Agriculture Rural Development Grant program.

	<b>EMPLOYEES</b>	<b>BOARD OF DIRECTORS (if applicable)</b>
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<b>ETHNICITY</b>		
<b>Hispanic or Latino</b>		
<b>Not Hispanic or Latino</b>		
<b>TOTAL</b>		

<b>RACE</b>		
<b>American Indian, Alaskan Native</b>		
<b>Asian</b>		
<b>Black or African American</b>		
<b>Native Hawaiian or Other Pacific Islander</b>		
<b>White</b>		
<b>TOTAL</b>		

<b>GENDER</b>		
<b>Male</b>		
<b>Female</b>		
<b>TOTAL</b>		
Persons with Disabilities		
<b>TOTAL</b>		