



GROW CUYAHOGA COUNTY FUND LOAN APPLICATION



I. GENERAL INFORMATION

Name of Business: _____

Type of Business: _____

Federal Tax I.D.: _____

Address: _____

Telephone: _____ Fax: _____

Date Business Established: _____ How Long Owned: _____

II. OWNERSHIP & MANAGEMENT STRUCTURE

Business Organizational Structure:

Sole Proprietorship _____ Corporation _____ Partnership _____

LLC _____ Limited Partnership _____

List all proprietors, partners, and/or stockholders with at least 20% ownership in the business:

Name and Title: _____

Address: _____

Percent Ownership _____ Phone Number _____

Name and Title: _____

Address: _____

Percent Ownership _____ Phone Number _____

III. BANKING RELATIONSHIP DATA

Name of Bank: _____

Address: _____

Account Type(s): _____

Contact Info: _____

IV. PROJECT BUDGET & FINANCIAL INFORMATION

Scope of Project:	Estimated Project Cost
() Real Property Acquisition	\$ _____
() Building Renovation	\$ _____
() Infrastructure Improvements	\$ _____
() Leasehold Improvements	\$ _____
() Purchase of Machinery/Equipment	\$ _____
() Working Capital	\$ _____
() Inventory	\$ _____
() Other - Please Specify _____	\$ _____
TOTAL PROJECT COST	\$ _____

Have any cost estimates for this project been obtained? Yes _____ No _____

If so, for what, and when were they obtained? _____

V. SOURCE(S) OF PROJECT FUNDS

Owner Equity:	\$ _____	% of Total Project _____
Bank Loan:	\$ _____	% of Total Project _____
Grow Cuyahoga Fund:	\$ _____	% of Total Project _____
County Loan:	\$ _____	% of Total Project _____
Other _____	\$ _____	% of Total Project _____
TOTAL PROJECT:	\$ _____	

Please attach detailed information related to other sources of financing.

VI. COLLATERAL INFORMATION - BUSINESS & PERSONAL

<u>Type</u>	<u>Existing Lien? (Lienholder Name and Amount)</u>	<u>Estimated Fair Market Value</u>
() Real Estate / Business	\$ _____	\$ _____
() Real Estate / Personal	\$ _____	\$ _____
() Equipment / Fixtures	\$ _____	\$ _____
() A/R and Inventory	\$ _____	\$ _____
() Personal Property	\$ _____	\$ _____
() Vehicles / Automobiles	\$ _____	\$ _____
() Other (Specify)	\$ _____	\$ _____

Status of the Property Currently Occupied by the Business:

Owned _____ Leased _____ Leased w/option to buy _____

Lease Price and Terms _____

If owned, is there an outstanding mortgage? Yes _____ No _____

If there is/are mortgage(s), provide the following information pertaining to the mortgage and any other liens:

	Amount	Length of Financing Term	Interest Rate Fix/Adj
1st Mortgage	\$		
2nd Mortgage	\$		
3rd Mortgage	\$		

VII. EMPLOYMENT INFO DATA

Number of Current Employees:

Full Time: _____ Part Time: _____ Seasonal _____

Number of Employees Projected in Three Years:

Full Time : _____ Part Time: _____ Seasonal: _____

Please indicate position type(s):

Management _____ Administrative: _____ Support: _____

Skilled _____ Unskilled _____ Other: _____

Total Number of New Jobs Created with Loan Proceeds: _____

Total Number of Jobs _____

VIII. ELIGIBILITY VERIFICATION

Should the Business/Loan Applicant answer yes to any of the following questions, they must provide any and all details under separate cover and submit it with this application. The Business must provide all pertinent information including names, dates, times, types, dollar amounts, circumstances, status and dispositions relevant to the appropriate question(s):

Does the Owner / Authorized Signer own any interest in any other business(s)? Yes No

Is the business a franchise or license company? Yes No

Does the business have any other affiliates, subsidiaries, or parents? Yes No

Are there any tax liabilities outstanding from previous reporting periods? Yes No

Does the business have any contingent liability? Yes No

Is the business/loan applicant presently a party to any claim or lawsuit? Yes No

Has the business or any proposed guarantor ever declared bankruptcy? Yes No

Is the business an endorser, guarantor or co maker for obligations not listed on the financials? Yes No

IX. DOCUMENTATION REQUIREMENTS:

In order to move forward with your loan application, we will need the following information:

- 1) **Application fee of \$150.00 payable to Cuyahoga County Treasurer.**
- 2) **Brief History and Description of the business, including market and projected business future.**
(Please be prepared to provide details on any co-owned or affiliate businesses.)
- 3) **Detailed Description of Project and anticipated benefit from loan.**
- 4) **Personal Financial Statements and Three (3) Years Personal Income Tax returns from each owner of 20% or more of the company (use attached SBA Form 413).**
- 5) **Management Resume(s) of all owners and key staff.**
- 6) **Historical Business Financial Statements (or tax returns) for the past three years.**
- 7) **Current Business Financial Statement (less than ninety (90) days old).**
- 8) **Aging of Accounts Payable and Accounts Receivable (current within 90 days).**
- 9) **Income Projections with explanations.**
- 10) **Existing Debt / Loan Schedule (see attached form).**
- 11) **Credit Report Authorization form (see attached form).**
- 12) **Letter(s) of Commitment from Private Lender(s) and/or any Other Funder(s) providing financing.**

X. Authorization and Signature:

The information contained herein is true, complete and correct to the best of my knowledge. I certify that I have authority to apply for this loan on behalf of the business described herein. I understand that this information maybe made available for public review and is subject to the terms of the Ohio Public Records Act. In the event of loan approval, the undersigned grants permission to the County to release publicity articles regarding the financing of the project. The undersigned hereby authorizes and consents to financial institution providing a copy of its notice of approval or denial of the application (including an explanation of the reasons therefore), a copy of the lender analysis and appraisal to the Cuyahoga County Department of Development. The County may also check the personal credit history of the principal owner(s) and/or key individuals. By signing below, the undersigned agrees that the loan will be used for business purposes only and not for household, personal, or consumer usage. I understand that any willful misrepresentation on this statement could result in a fine and/or imprisonment under provision of the United States Criminal Code U.S.C. Title 18, Section 1001.

Name:

Date:

Name:

Date:

Cuyahoga County staff are available to answer any questions you may have regarding the program or the application process. Please call (216) 443-8067 or 443-3159.

Section 3. Stocks and Bonds (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed).					
Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value

Section 4. Real Estate Owned. (List each parcel separately. Use attachments if necessary. Each attachment must be identified as a part of this statement and signed).			
	Property A	Property B	Property C
Type of Property			
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Month/Year			
Status of Mortgage			

Section 5. Other Personal Property and Other Assets	(Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment, and if delinquent, describe delinquency).

Section 6. Unpaid Taxes.	(Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches).

Section 7. Other Liabilities	(Describe in detail).

Section 8. Life Insurance Held.	(Give face amount and cash surrender value of policies - name of insurance company and beneficiaries).

I authorize SBA/Lender to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. I understand FALSE statements may result in forfeiture of benefits and possible prosecution by the U.S. Attorney General (Reference 18 U.S.C. 1001).

Signature:	Date:	Social Security Number:
Signature:	Date:	Social Security Number:

PLEASE NOTE: The estimated average burden hours for the completion of this form is 1.5 hours per response. If you have questions or comments concerning this estimate or any other aspect of this information, please contact Chief, Administrative Branch, U.S. Small Business Administration, Washington, D.C. 20416, and Clearance Office, Paper Reduction Project (3245-0188), Office of Management and Budget, Washington, D.C. 20503. PLEASE DO NOT SEND FORMS TO OMB.

Existing Debt Schedule Form:

Creditor	Original Balance	Original Date	Present Balance	Interest Rate	Monthly Payment	Collateral Security
<i>EXAMPLE: ABC Bank</i>	<i>\$25,000</i>	<i>May 2001</i>	<i>\$18,000</i>	<i>7.5%</i>	<i>\$850</i>	<i>Business assets</i>
TOTAL						

Credit Release Authorization

I / we hereby request and authorize you to release to the Cuyahoga County, the Grow America Fund, Inc. and/or the National Development Council for verification purposes, personal and corporate credit reports, and information concerning the company/corporation/partnership and/or the officers and individuals listed below. That information may include but is not limited to:

- Employment history dates, title, income, hours worked, etc.
- Banking (checking & savings) accounts of record.
- Mortgage loan rating (opening date, high credit, payment amount, loan balance, and payment)
- Any information deemed necessary in connection with a consumer credit report for my program application.

This information is for the confidential use of the County of Cuyahoga and/or the Grow America Fund, Inc. in compiling a credit report.

A photographic or carbon copy of this authorization (being a photographic or carbon copy of the signature (s) of the undersigned), may be deemed to be the equivalent of the original and may be used as a duplicate original.

The County of Cuyahoga and/or the Grow America Fund, Inc. may impose a charge for each personal and business credit report ordered.

(Please print or type.)

Name of Business: _____

Telephone: () _____

Date: _____

Name of Officer/Owner: _____

Address for last two years: _____

Social Security #: _____

Signature _____

Name of Officer/Owner: _____

Address for last two years: _____

Social Security #: _____

Signature _____