

Business Loan Fund of Mesa County, Inc.

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 www.gjincubator.org

BUSINESS LOAN APPLICATION

(Proprietor, partners, officers, directors and all shareholders of outstanding stock – 100% of ownership must be shown).

Name		Phone # ()	
		Cell #()	
Residence			
Name of Business		Tax ID#	
Business Street Address		Telephone #	
City	County	State	Zip
E-Mail Address:		Web Site:	Dunn & Bradstreet Number:
Structure: <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> S Corporation <input type="checkbox"/> C Corporation	Type: <input type="checkbox"/> Agriculture <input type="checkbox"/> Transportation <input type="checkbox"/> Finance, <input type="checkbox"/> Mining <input type="checkbox"/> Wholesale Trade Insurance, & <input type="checkbox"/> Construction <input type="checkbox"/> Retail Trade Real Estate <input type="checkbox"/> Manufacturing <input type="checkbox"/> Services <input type="checkbox"/> Other		

MANAGEMENT

Use a separate sheet if necessary.

Name	Social Security Number	Address & Telephone	% Owned	Military Service From ---- To	Race	Sex

PROJECT DESCRIPTION

JOB CREATION/RETENTION FOR FULL-TIME EQUIVALENT EMPLOYEES (FTE)

How many FTE's are currently employed by your business? _____
 How many new FTE jobs will be created? _____
 How many FTE jobs will be retained? _____
 How many of the FTE jobs created will be filled by low/moderate income persons? _____
 How many of the FTE jobs retained will be filled by low/moderate income persons? _____

Mesa County's classification for low/moderate income persons:
 (determined by family income at the time of hiring)

<u>Household Size:</u>	<u>Moderate Income Limit:</u>
1 person	\$33,600
2 persons	\$38,400
3 persons	\$43,200
4 persons	\$48,000
5 persons	\$51,850
6 persons	\$55,700
7 persons	\$59,550
8 persons	\$63,400

(revised 6/1/11)

BUSINESS CREDIT REFERENCES

(include name, address, telephone, contact person, # of years associated, & credit high)

Banks
Trades
Credit Cards

LOAN FEES

Origination Fee and Application Fee Assessed at Closing 2.0% + \$65.00

I authorize Lender to make inquires as necessary to verify the accuracy of the statements made and to determine my credit worthiness. I certify the above information and 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.

Signed: _____ Date: _____

By: _____

Signed: _____ Date: _____

By: _____

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. (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			
Name & Address of Title Holder			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Month/Year			

Section 5. Other Personal Property & 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 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:

COST OF LIVING BUDGET

Regular Monthly Payments

House payments (principal, interest, taxes, insurance) or rent	\$ _____
Car Payments (including insurance)	\$ _____
Appliance, TV payments	\$ _____
Home improvement loan payments	\$ _____
Personal loan, credit card payments	\$ _____
Health plan payments	\$ _____
Life Insurance premiums	\$ _____
Other Insurance premiums	\$ _____
TOTAL	\$ _____

Household Operating Expenses

Telephone	\$ _____
Gas & Electricity	\$ _____
Water	\$ _____
Other household expenses, repairs, maintenance	\$ _____
TOTAL	\$ _____

Personal Expense

Clothing, cleaning, laundry	\$ _____
Prescription medication	\$ _____
Physicians, dentists	\$ _____
Education	\$ _____
Dues	\$ _____
Gifts & contributions	\$ _____
Travel	\$ _____
Newspapers, magazines, books	\$ _____
Auto upkeep & gas	\$ _____
Spending money & allowances	\$ _____
Miscellaneous	\$ _____
TOTAL	\$ _____

Food Expense

Food – at home	\$ _____
Food – away from home	\$ _____
TOTAL	\$ _____

Tax Expense

Federal and State Income taxes	\$ _____
Other taxes not included above	\$ _____
TOTAL	\$ _____

BUDGET SUMMARY

Monthly Total Income (Gross)	\$ _____
Less Monthly Expenses:	
Regular monthly payments	\$ _____
Household operating expense	\$ _____
Personal Expense	\$ _____
Food Expense	\$ _____
Tax Expense	\$ _____
Monthly Total Expenses	\$ _____
Excess/Deficiency of Income over Expenses	\$ _____

PERSONAL FINANCIAL STATEMENT

I (we) understand that the following questions are addressed to me (us) and I (we) have answered them as appropriate.

Yes No

- ___ ___ 1. Are you named as beneficiary of a trust, will, or estate?
- ___ ___ 2. Are any of the assets listed herein held under a trust agreement of any type, held in an estate, or any other name or capacity? Please detail in "Additional Remarks" below.
- ___ ___ 3. Are any of the assets listed herein on deposit, located, or otherwise held outside the United States of America?
- ___ ___ 4. Do any of your assets secure any debts that have not been reported on the following schedules?
- ___ ___ 5. Are any of the assets listed herein located in the community property states of Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, or Washington?
- ___ ___ 6. Are any of your real estate properties used by you in your business?
- ___ ___ 7. Have you ever filed for personal bankruptcy, had property you owned foreclosed, or made a settlement or an assignment for the benefit of creditors?
- ___ ___ 8. Has any corporation or partnership in which you are (were) a major owner or a general partner ever filed bankruptcy, had property it owned foreclosed, or made a settlement or assignment for the benefit of creditors?
- ___ ___ 9. Are you, or any corporation or partnerships in which you are a major owner or general partner, a party to any suit or legal action, or are there any unsatisfied judgments against you?
- ___ ___ 10. Personal income tax returns have been filed through 20___. Are any income tax returns, whether personal or that of any corporation or major partnership that you are a major owner of or a general partner, currently being audited or contested?
- ___ ___ 11. Are you an officer, director, or principal shareholder of a financial institution?
- ___ ___ 12. Are you a U.S. Citizen?

I (we) have explained fully under "Additional Remarks" on this page (or an attachment) my (our) "Yes" answers to the foregoing questions.

Additional Remarks

Signed: _____

Date: _____

Signed: _____

Date: _____