

Applicant Information for the Small Business Loan Program:

COMPANY NAME: _____

Amount Requested: _____ **County:** _____

FORM A – CREDIT APPLICATION: SECTION A – INDIVIDUAL APPLICANT INFORMATION

Name: _____ **Date of Birth:** _____

Cell No: _____ **Work No:** _____

Home No: _____ **Soc. Sec. No.:** _____

Email Address: _____ **Other Form Of Contact:** _____

***Ethnicity:** _____ ***Race:** _____

*Please indicate the following: **Race:** Hispanic or Non-Hispanic. **Ethnicity:** Alaskan White, Asian, Black/African American, Native American, Native Hawaiian, Not Applicable, Other, Other Pacific Islander, or White.

*Minority group data is obtained for statistical purposes only. You are not required to disclose this information, but are encouraged to do so.

Present Address: _____

County: _____ **How Long at Address:** _____

IF you have been at your current address less than 3 years please list your previous address on the line below:

County: _____ **How Long at this address** _____

Have you ever applied for credit with us before: YES NO

***If "YES", then list when and under what company name:** _____

Please list the name, address, phone number and relationship of two (2) personal and/or professional references not related to nor living with you below:

1.) **Name:** _____ **Phone No:** _____ **Relationship with you:** _____

Address: _____

2.) **Name:** _____ **Phone No:** _____ **Relationship with you:** _____

Address: _____

If you are currently employed somewhere other than the company for which this application is submitted, please list the name and address of this company on the lines included below:

Phone No.: _____ **How Long Employed:** _____ **Position:** _____

Supervisor's Name: _____ **Monthly Take Home Pay:** _____ **How Often Paid:** _____

If you have been with your present employer (whether or not it is the company submitting this application) for less than 3 years, please list your previous employer and their address as well as for how long you were employed with them below:

Alimony, Child Support, and/or Separate Maintenance received under: (Mark One)*

*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.

Court Order: **Written Agreement:** **Oral Understanding:**

Sources of Other Income: _____

Amount of Other Income Received Per Month: _____



SOUTH CENTRAL OZARK REGIONAL DEVELOPMENT COMPANY, INC.

PO BOX 100, 4407 CR 2340, POMONA, MO 65789

PHONE: 417-256-4226 / FAX: 417-256-6188



FORM A – CREDIT APPLICATION: SECTION B – CO-APPLICANT or OTHER PARTY INFORMATION

Name: _____ Date of Birth: _____

Cell No: _____ Work No: _____

Home No: _____ Soc. Sec. No.: _____

Email Address: _____ Other Form Of Contact: _____

*Ethnicity: _____ *Race: _____

*Please indicate the following: Race: Hispanic or Non-Hispanic. Ethnicity: Alaskan White, Asian, Black/African American, Native American, Native Hawaiian, Not Applicable, Other, Other Pacific Islander, or White.

*Minority group data is obtained for statistical purposes only. You are not required to disclose this information, but are encouraged to do so.

Present Address: _____

County: _____ How Long at Address: _____

IF you have been at your current address less than 3 years please list your previous address on the line below:

County: _____ How Long at Address: _____

What is your relationship to the applicant (If any): _____

Have you ever applied for credit with us before: YES NO

*If "YES", then list when and under what company name: _____

Please list the name, address, phone number and relationship of two (2) personal and/or professional references not related to nor living with you below:

1.) Name: _____ Phone No: _____ Relationship with you: _____

Address: _____

2.) Name: _____ Phone No: _____ Relationship with you: _____

Address: _____

If you are currently employed somewhere other than the company for which this application is submitted, please list the name and address of this company on the lines included below:

Phone No.: _____ How Long Employed: _____ Position: _____

Supervisor's Name: _____ Monthly Take Home Pay: _____ How Often Paid: _____

Alimony, Child Support, and/or Separate Maintenance received under: (Mark One)*

*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.

Court Order: Written Agreement: Oral Understanding:

Sources of Other Income: _____

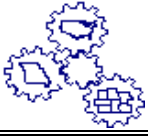
Amount of Other Income Received Per Month: _____

FORM A – CREDIT APPLICATION: SECTION C – MARITAL STATUS

Complete only if applying for joint or secured credit or applicant resides in a community property state or is relying on property located in such a state. (Missouri is a community property state and all loans through SCORDC must be secured.)

* For the purpose of this application "Unmarried" includes the following: Single, Divorced, and/or Widowed.

Applicant: Married Separated Unmarried*
Other Party: Married Separated Unmarried*



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FORM A – CREDIT APPLICATION: SECTION D – ASSET AND DEBT INFORMATION

If Section B has been completed, this section should be completed giving information about both the Applicant and Joint Applicant or Other Person. Please mark Applicant-related information with an "A". If Section B was not completed, only give information about the Applicant in this Section.

Please list all vehicles or other personal assets in which you own, personally or in the company's name:

(If additional space is needed, list other assets on a separate sheet of paper.)

1. Year: _____ Make: _____ Model: _____ Value: _____
2. Year: _____ Make: _____ Model: _____ Value: _____
3. Other: _____

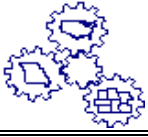
Please list all bank accounts, if they are Joint or Single, where they are held, and the present value of the account:

(If additional space is needed, list other accounts on a separate sheet of paper.)

- Checking Acct: Joint Single Where Held _____ Value _____
- Savings Acct: Joint Single Where Held _____ Value _____
- Other Ck Acct Joint Single Where Held _____ Value _____
- Other SV Acct Joint Single Where Held _____ Value _____
- Other Assets Joint Single Where Held _____ Value _____
- Real Estate Joint Single Where Held _____ Value _____
- Life Insurance Where Held _____ Cash Value (Not Face Value): _____

Please list all outstanding debts on the lines below. Include charge accounts, installment contracts, credit cards, rent, mortgages and other obligations. *(If additional space is needed, list other outstanding debts on a separate sheet of paper.)*

Creditor / Account Number / The Name in which the account is carried	Original Amount / Present Balance / Monthly Payments
Creditor: _____	Orig. Amt.: _____
Acct. No.: _____	Pres. Bal.: _____
Name: _____	Payment: _____
Creditor: _____	Orig. Amt.: _____
Acct. No.: _____	Pres. Bal.: _____
Name: _____	Payment: _____
Creditor: _____	Orig. Amt.: _____
Acct. No.: _____	Pres. Bal.: _____
Name: _____	Payment: _____
Creditor: _____	Orig. Amt.: _____
Acct. No.: _____	Pres. Bal.: _____
Name: _____	Payment: _____
Creditor: _____	Orig. Amt.: _____
Acct. No.: _____	Pres. Bal.: _____
Name: _____	Payment: _____



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Complete the following information about the applicant and joint applicant or other person (if applicable)

Are you obligated to make alimony, support, or maintenance payments? YES NO
 *If "YES", Whom to (Name and Address): _____
 Amount Per Month: _____ How much longer? _____

Are you a co-maker, endorser, or guarantor on any loan or contract? YES NO
 *If "YES", for whom? _____ To Whom? _____

Are there any Unsatisfied Judgments against you? YES NO
 *If "YES", for whom owed? _____ Amount: _____

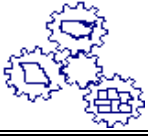
Have you been declared bankrupt in the last 10 years? YES NO
 *If "YES", Where? _____ What Year? _____

FORM A – CREDIT APPLICATION: SECTION E – SECURED CREDIT

Briefly describe the property to be given as security and indicate if others have an ownership interest in it.
 (If additional space is needed, list other outstanding debts on a separate sheet of paper.)

Real Estate & Property: _____ Owned Separately Owned Jointly
 If "Jointly", Who With? _____

1. Location: _____
 To Whom Mortgaged: _____
 Cost: _____ Current Balance: _____
 Monthly Payment: _____ Value Now: _____
2. Location: _____
 To Whom Mortgaged: _____
 Cost: _____ Current Balance: _____
 Monthly Payment: _____ Value Now: _____
3. Location: _____
 To Whom Mortgaged: _____
 Cost: _____ Current Balance: _____
 Monthly Payment: _____ Value Now: _____
4. Location: _____
 To Whom Mortgaged: _____
 Cost: _____ Current Balance: _____
 Monthly Payment: _____ Value Now: _____
5. Location: _____
 To Whom Mortgaged: _____
 Cost: _____ Current Balance: _____
 Monthly Payment: _____ Value Now: _____



Form C: Sources and Uses of Funds for Project

Line Item Activity	RLF Funds	Private Equity	Loans (Including Revenue Bonds)	Other	Total
A. Land Acquisition	_____	_____	_____	_____	_____
B. Relocation of Persons and Businesses	_____	_____	_____	_____	_____
C. Clearance and Demolition	_____	_____	_____	_____	_____
D. Off-Site Improvements	_____	_____	_____	_____	_____
E. On-Site Improvements	_____	_____	_____	_____	_____
F. Building Construction	_____	_____	_____	_____	_____
G. Parking Facilities	_____	_____	_____	_____	_____
H. Capital Equipment	_____	_____	_____	_____	_____
I. Non-Capital Equipment	_____	_____	_____	_____	_____
J. Professional Fees	_____	_____	_____	_____	_____
K. Interim Costs: Construction Period Interest, Real Estate	_____	_____	_____	_____	_____
L. Contingency	_____	_____	_____	_____	_____
M. Cost Subtotal (Sum of Lines A-L)	_____	_____	_____	_____	_____
N. Administration	_____	_____	_____	_____	_____
O. Working Capital	_____	_____	_____	_____	_____
P. Total Project Costs (Sum of Lines M+N+O)	_____	_____	_____	_____	_____

Form D: Job Projections for Project

(2 part time employees equals 1 full time employee)

Permanent Job Projections:

	Full Time	Part Time
1. Number of jobs projected at project completion (W/in 5 yrs)	_____	_____
	1(a)	1(b)

Source of information (Check box and enter figure if appropriate):

Local Industry Statistics Industry Standards Developer/Tenant Estimates

Other Explain with Attachments: _____

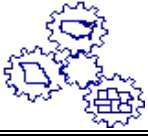
2. Number of Current Employees:	_____	_____
	2(a)	2(b)

Source (Check Box) Employer Records: Local Industry Statistics:
Other (Explain) _____

3. Net Total (Line 1 – Line 2)	_____	_____
	3(a)	3(b)

TOTAL Number of Full Time Equivalent Employees:

[3(a) + {3(b) / 2}] = _____



Form E: Exhibit Checklist

- _____ 1. A letter of commitment from the principals indicating a willingness to personally guarantee the loan
(EXHIBIT I)
- _____ 2. A history and description of the business and indications why it will be successful in the future.
(EXHIBIT II)
- _____ 3. Other lender participation letter stating the terms and conditions of its participation, & the reason
why it will not finance the entire project and/or a firm written commitment from each lender and
equity investor.
(EXHIBIT III)
- _____ 4. A current personal financial statement for each proprietor, partner, and each stockholder with
20% or more ownership of the project.
(EXHIBIT IV)
- _____ (a) A current balance sheet, operating statement, and a monthly cash flow analysis for the
next 12 months for an existing business
(EXHIBIT IV-a)
- _____ (b) A pro forma balance sheet & projected operating statement for a startup business
(EXHIBIT IV-b)
- _____ 5. Preliminary plans and specifications and estimates of cost covering new construction and/or
machinery and equipment. Verification of the useful life of any machinery and equipment.
(EXHIBIT V)
- _____ 6. Documentation to establish fair market value on property being acquired. Including appraisal if
real estate is involved.
(EXHIBIT VI)
- _____ 7. A copy of existing or proposed lease or purchase agreement or other financing arrangements.
Include a copy of the deed to the property involved if purchasing real estate or using for collateral.
(EXHIBIT VII)
- _____ 8. Resolution from the Board of Directors, if a Corporation, authorizing the applicant to borrow and
the Corporation's Certificate of Good Standing. If a partnership is involved provide a Partnership
Agreement and a Certificate as to Partners if applicable.
(Exhibit VIII)
- _____ 9. If real estate is involved an Environmental Checklist must be completed by SCOCOG employee.
- _____ 10. Authorization for credit check. (Signature on this application serves as this authorization)

We will also need the last 2 years of tax returns for all applicants



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**AUTHORIZATION FOR RELEASE OF INFORMATION
CREDIT REPROT AUTHORIZATION**

The undersigned authorize SCORDC, for the Small Business Loan Program, to do the following: obtain a credit report, contact any agencies, offices, groups, organizations, or employers to obtain, and agencies to release, information that is pertinent to the processing of this loan application and eligibility, level of benefits, or continued participation in the Small Business Loan Program.

This included the Social Security Administration (SSA), Immigration and Naturalization Service (INS), and the State of Missouri Department of Health and Human Services (DHS), Medicaid Program and Food Assistance Program. SCORDC may use this Authorization and the information obtained with it to administer and enforce program rules and policies.

The undersigned certify that the information given to SCORDC on household members, income, net family assets, allowances, and deduction is accurate.

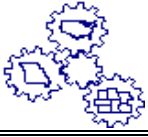
I understand that false statements or information are punishable by imprisonment for up to 10 years or by a fine of up to \$5,000 and grounds for termination of loan assistance under State and Federal law.

My signature below authorizes the release to the credit reporting agency a copy of my credit application and authorizes the credit reporting agency to obtain information regarding my employment, saving accounts, and outstanding credit accounts (mortgages, auto loans, personal loans, charge cards, credit unions, etc.) Authorization is further granted to the reporting agency to use a photo static reproduction of this authorization if necessary to obtain any information regarding the above-mentioned information, including authorization to obtain a standard factual data credit report through a credit reporting agency chosen by SCORDC.

Applicants hereby request a copy of the credit report obtained with any possible derogatory information be sent to the address of present residence and SCORDC and any credit reporting organization will be held harmless in so mailing the copy requested. Any reproduction of this credit report authorization and release made by reliable means (for example, photocopy or facsimile) is considered an original.

Applicant's Signature: _____ **Date:** _____

Co-Applicant's Signature: _____ **Date:** _____



DATA PRIVACY STATEMENT
TO BE READ BEFORE SIGNING THE APPLICATION FORM

All information you provide about you and your household is considered **private data**.

The information collected from you or from other agencies or individuals (authorized by you) is used to determine your eligibility for the Small Business Loan Program. As it is stated on the application, you are not **required** to provide information regarding your marital status or race. However, this information is vital to determine to what extent minorities use our programs or serve certain types of households. All other information on the form – including your Social Security Number – is required to determine your eligibility for participation in our program or required by the State of Federal agency funding your loan.

We will use your private data only when it is required for administration and management of the program. Persons or agencies with which this information may be shared include:

1. The local loan committee members who approve all applications.
2. Staff who are involved in program administration.
3. Auditors who perform required audits of our programs.
4. Authorized personnel from State and Federal agencies providing funding assistance to your loan.
5. Those persons who you authorize to see it.
6. Law enforcement personnel in the case of suspected fraud.

The funding organization may have the right to receive the names, addresses and amount of assistance provided to business owners under this program. However, they are not entitled to see private information about your income, your sources of income, or credit information.

Please sign below:

To the best of my knowledge, the information on this application is accurate and true. I give my permission to this agency to verify my eligibility and share necessary private data with the local loan committee and those who need to know it or are required by Federal or State law to know it. I understand that I will be prosecuted for fraud and perjury if I knowingly provided false information.

I may appeal for a review of my application if assistance is denied.

Applicant's Signature: _____ **Date:** _____

Co-Applicant's Signature: _____ **Date:** _____