



NVDA

*Northeastern Vermont
Development Association*

LOAN APPLICATION

NVDA is an equal opportunity employer, lender and provider.

P.O. Box 630 36 Eastern Avenue, Suite 1 St. Johnsbury, Vermont 05819-0630 802 748-5181 Fax: 802 748-1223

The regional planning and development commission serving The Northeast Kingdom: Caledonia, Essex and Orleans Counties

LOAN APPLICATION

If you need assistance completing this application, please call NVDA at (802) 748-5181

Part A: BUSINESS INFORMATION

REGISTERED Name of Business _____ Primary Business Activity _____

Legal Structure (check one): Sole Proprietor SIC/NAICS Code: _____
 Corporation (S or C)
 Limited Liability Company (LLC) DUNS Number: _____
 Limited Partnership (LP) (Required)
 Limited Liability Partnership (LLP)

State Incorporated or Registered _____ Month/Year Established _____ Business Tax ID Number _____

(Physical) Street Address _____ City _____ State _____ Zip _____ County _____

(Mailing) Address (if different) _____ City _____ State _____ Zip _____

() _____ () _____
 Telephone _____ Fax _____ E-mail/Website Addresses _____
 () _____ () _____

Accountant Name/Phone # _____ Attorney Name/Phone # _____

	Females	Males	
How many employees, excluding the owners, does the business have now?	_____	_____	(full time)*
	_____	_____	(part time)**

What are the salary levels of your current employees?	Hourly	Salaried	
	_____	_____	(number of employees)
	\$ _____ to \$ _____	\$ _____ to \$ _____	(wage range)

What fringe benefits do you provide? _____

How many employees will you hire as a result of this proposed financing? _____ (full time)*
 _____ (part time)**

*full time equals 30.5 hours or more/week
 **part time equals less than 30.5 hours/week

Information about Management: List all officers, directors and/or partners having a 20% or greater ownership interest.

Name and Title _____ % of Ownership _____ SSN # _____

Address _____ Annual Compensation _____ Date of Birth _____

continued on next page

Part A: BUSINESS INFORMATION continued

Name and Title _____ % of Ownership _____ SSN # _____

Address _____ Annual Compensation _____ Date of Birth _____

Name and Title _____ % of Ownership _____ SSN # _____

Address _____ Annual Compensation _____ Date of Birth _____

Name and Title _____ % of Ownership _____ SSN # _____

Address _____ Annual Compensation _____ Date of Birth _____

Name and Title _____ % of Ownership _____ SSN # _____

Address _____ Annual Compensation _____ Date of Birth _____

(Continue on another sheet if necessary)

Part B: PERSONAL INFORMATION

Primary Applicant Name (last, first, middle) Social Security # _____ Date of Birth _____

 Street Address City State Zip Home Telephone () _____

County you reside in: _____ Years at the above address: _____

 Name of Employer Position and Length of Employment (years) _____

Work Telephone: () _____

Co-applicant Name (last, first, middle) Social Security # _____ Date of Birth _____

 Street Address City State Zip Home Telephone () _____

County you reside in: _____ Years at the above address: _____

 Name of Employer Position and Length of Employment (years) _____

Work Telephone: () _____

(Continue on another sheet if necessary)

Part C: LOAN REQUEST

Brief Description of Project: _____

Total Project Cost:	Cost	Description
Land	\$ _____	_____
Land Improvements	\$ _____	_____
Buildings	\$ _____	_____
Leasehold Improvements	\$ _____	_____
Machinery and Equipment	\$ _____	_____
Working Capital	\$ _____	_____
Inventory	\$ _____	_____
Professional Fees	\$ _____	_____
Other Costs (specify)	\$ _____	_____
Total	\$ _____	

Amount of loan request from NVDA \$ _____

Other Sources of Funds for the project:

	\$ _____
	\$ _____
	\$ _____
	\$ _____

Dollar amount you will contribute to this request? \$ _____

Total Project Funding \$ _____

How will the financing improve your business? _____

What collateral will secure the loan? _____

Indicate if any collateral will be subject to subordinate or superior liens _____

(Continue on another sheet if necessary)

Part D: CIVIL RIGHTS AND EQUAL OPPORTUNITY

The following information is requested by the Federal Government in order to monitor the Lender's compliance with the Equal Credit Opportunity Act.

You are not required to furnish this information, but are encouraged to do so.

The law required that the Lender 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 the Lender is required to note race and sex on the basis of visual observations or surname.

If you do not wish to furnish the following information, please check the box below.

Primary Applicant

I do not wish to furnish this information

Gender:

- Female
 Male

Ethnicity:

- Hispanic or Latino
 Not Hispanic or Latino

Race:

- American Indian/Alaskan Native
 Asian
 Black or African American
 Native Hawaiian or Other Pacific Islander
 White
 Other

Veteran Status:

- Non-Vet
 Vietnam Era
 Other Vet

Co-applicant

I do not wish to furnish this information

Gender:

- Female
 Male

Ethnicity:

- Hispanic or Latino
 Not Hispanic or Latino

Race:

- American Indian/Alaskan Native
 Asian
 Black or African American
 Native Hawaiian or Other Pacific Islander
 White
 Other

Veteran Status:

- Non-Vet
 Vietnam Era
 Other Vet

(Continue on another sheet if necessary)

The above information was completed by: _____ (initials)
Loan Officer

Part E: REFERENCES

List of Credit References

<u>Name</u>	<u>Address</u>	<u>Telephone</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

(Continue on another sheet if necessary)

Part F: CERTIFICATIONS

1. Have you or any officers of the company ever been involved in bankruptcy proceedings? Yes No
2. Are you or your business involved in any pending lawsuits? Yes No
3. Are you or your business delinquent on any debt to the Federal Government? Yes No
4. Do you (including your immediate family) or your business officers (including their immediate family) hold any legal or financial interest or influence in NVDA or does NVDA and its principal officers (including immediate family) hold any legal or financial interest or influence in you or your business? Yes No

(Please provide details on a separate page if you answered Yes to either of the above questions)

5. Is at least 51% of the outstanding membership or ownership of your business owned by either United States Citizens or residents of the United States after being legally admitted for permanent residence (green card holders)? Yes No

Please be aware that you may be required to show evidence that you have sought these funds from convention loan sources (i.e. Commercial Banks), but have been unsuccessful.

Undersigned hereby certifies that the enclosed application information including all attachments, exhibits, schedules, and supporting documents are valid, accurate and complete as of the stated date(s). These statements are made for the purpose of obtaining a loan. False statements may result in the forfeiture of benefits. I/We authorize disclosure of all information submitted in connection with this application to any financial institution interested in participating in this financing. I/We consent to have NVDA obtain any and all information regarding my/our employment, checking, and/or savings accounts, credit obligations and all other credit matters which it may require in connection with this application. I/We certify that financing cannot be obtained from conventional credit sources, except when NVDA involvement would induce participation from conventional sources. I/We understand that the NVDA lending decision may be a matter of public record, since some of NVDA's loan funds are derived from state or federal sources.

Attached is a copy of NVDA's Financial Privacy Policy.

If applicant is a **Corporation, LLC, LP, or LLP**, sign below:

Name of Company _____

Name and Title of Company Officer (please print) _____

By: _____
Signature of Company Officer

Date: _____

Continue on next page

Part F: CERTIFICATIONS continued

If applicant is an **Individual(s)** sign below:

PRIMARY APPLICANT:

CO-APPLICANT:

Name (please print) _____

Name (please print) _____

Signature _____

Signature _____

Date _____

Date _____

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, handicap, or age (provided that the applicant has the capacity to enter into a binding contract), and because all or parts of the applicant's income is derived from any public assistance program; or because the applicant has in good faith exercised any right under the consumer Credit Protection Act. The federal Agency that administers compliance with this law concerning this credit is the Federal Trade Commission. If a person believes he or she was denied assistance in violation of this law, they should contact the Federal Trade Commission, Washington, DC 20580.

ATTACHMENTS REQUIRED

- A. Provide a detailed project description and explanation of all costs. Please include information on the following items, if applicable. Use exhibits, if necessary.
1. Legal description of land and building, physical description with diagrams and/or blueprints and any required rezoning or variances. Include sales agreements for land and/or building purchase, if applicable, and/or construction estimates.
 2. Description of machinery to be purchased. Include manufacturers' names and model numbers, price quotations, etc.
 3. Appraisal of existing building and used equipment to be purchased (if any) performed by an appraiser acceptable to NVDA.
 4. Description of inventory or account receivable to be financed. Include aging schedule for receivables.
 5. Provide schedule of use of funds.
- B. Business Plan
1. Summary: Provide an overview of your business.
 2. Business Activities: This section describes what the business does and how it will succeed in its location. Give an evaluation of the industry in general (is it growing or in decline), an objective description of the competition and a specific discussion of who, what, where, when and how it will be done. Include:
 - a. Description of the products or services you will sell.
 - b. The market area and your potential customers. Any claims that you make about the projected volume or your business should be substantiated by such things as surveys or letters from current and potential customers indicating their interest in buying your services or products.
 - c. List competition and address their strengths and weaknesses.
 - d. Describe your sales strategy and method for attracting and holding customers.
 - e. List employees by title and detail their responsibilities.
 3. Management: Describe management's capabilities. Include resume(s).
 4. Financial Information: An existing business should provide financial statements to show trends of the business. A start-up business will present a balance sheet for the time at which the business starts. Business history or supportable assumptions from the market area must substantiate projections. Include:
 - a. Financial statements (balance sheet and income statement) for the last two years or tax returns, at a minimum. In addition, include a balance sheet, income statement, and an aging of receivables and payables within the last 90 days.
 - b. Projected income statement or cash flow for at least the next 12 months.
 - c. Current personal financial statements for individuals, co-applicants, partners or corporate officers with 20% or greater ownership including family income and living expenses. You may use the attached SBA "Personal Financial Statement"
- D. Environmental Information – the attached "Request for Environment Information - Short Form" must be fully completed.
- E. Letters of commitment from all other lenders or guarantors of the project.
- F. Assurance Agreement – see attached form.
- G. Application fee of \$100.00 payable to NVDA.

CREDIT AUTHORIZATION

I/We hereby authorize Northeastern Vermont Development Association to conduct credit investigations and verifications and to obtain credit bureau report (including consumer and/or business credit reports) on the undersigned and any other entity of which I am a principal.

In addition, and not withstanding anything to the contrary, I/We also expressly authorize the release of any financial/organizational information or data from third party sources (Banks, Financial Institutions, Insurance Companies, Attorneys, Accountants, Credit Unions, etc...) to Northeastern Vermont Development Association upon its written or verbal request.

Date

Signature

Printed Name

Date

Signature

Printed Name

Date

Signature

Printed Name

Date

Signature

Printed Name

Northeastern Vermont Development Association Privacy Policy

We are Committed to Safeguarding Customer Information

In order to better serve your needs now and in the future, we may ask you to provide us with certain information. We understand that you may be concerned about what we will do with such information – particularly any personal or financial information. We agree that you have a right to know how we will utilize the personal information you provide to us. Therefore, we have adopted this Privacy Policy to govern the use and handling of your personal information.

Applicability

This Privacy Policy governs our use of the information, which you provide to us. It does not govern the manner in which we may use information we have obtained from any other source, such as information obtained from public record or from another person or entity.

Types of Information

Depending upon which of our services you are utilizing, the types of nonpublic information that we may collect include:

- Information we receive from you on applications, forms and in other communications to us, whether in writing, in person, by telephone or any other means;
- Information about your transactions with us, our affiliated companies, or others; and
- Information we receive from a consumer reporting agency.

Use of Information

We requested information from you for our own legitimate business purposes and not for the benefit of any nonaffiliated party. Therefore, we will not release your information to nonaffiliated parties except; (1) as necessary for us to provide the product or service you have requested of us; (2) as permitted by law. We may, however, store such information indefinitely, including the period after which any customer relationship has ceased. Such information may be used for any internal purpose, such as quality control efforts or customer analysis. We may also provide all of the types of nonpublic personal information listed above to one or more of our affiliated companies. Such affiliated companies include financial service providers, such as title insurers, property and casualty insurers, and trust and investment advisory companies, or companies involved in real estate services, such as appraisal companies, home warranty companies, and escrow companies. Furthermore, we may also provide all the information we collect, as described above, to companies that perform marketing services on our behalf, on behalf of our affiliated companies, or to other financial institutions with whom we or our affiliated companies have joint marketing agreements.

Former Customers

Even if you are no longer our customer, our Privacy Policy will continue to apply to you.

Confidentiality and Securities

We will use our best efforts to ensure that no unauthorized parties have access to any of your information. We restrict access to nonpublic personal information about you to those individuals and entities who need to know that information to provide products or services to you. We will use our best efforts to train and oversee our employees and agents to ensure that your information will be handled responsibly and in accordance with this Privacy Policy. We currently maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your nonpublic personal information.

REQUEST FOR ENVIRONMENTAL INFORMATION SHORT FORM

DESCRIPTION OF PROJECT: Provide a brief description of how the proposed loan funds and funds from other sources (including your own) will be used by your business.

If construction, exterior, or interior renovations are involved, please describe.

LOCATION OF PROJECT: Please provide a location map which identifies the location of your business. The map should be specific enough for use in identifying the site on a floodplain map.

PERMITS REQUIRED: List any local, state or federal permits which your project will require and the status of each permit process.

HAZARDOUS WASTES/MATERIALS: Describe any regulated hazardous materials or wastes which your business uses or creates. Include a description of how hazardous wastes/materials are stored, handled and disposed of and what, if any, federal, state and local regulations you are required to comply with.

continued on next page

PLEASE ANSWER THE FOLLOWING QUESTIONS TO THE BEST OF YOUR ABILITY.

1. Is your business located with a 100-year floodplain? Yes No
If no, how was this verified?

2. Is your business located within a historic district or an area which could be considered eligible for designation as a historic district? Yes No

3. If you own your building, and are renovating/remodeling is the building in excess of 50 years old? Yes No

4. Does your community have zoning? Yes No
If yes, what zone is your business located in?

5. Does your property contain an underground storage tank? Yes No
If yes, please describe type, size, age, etc.

6. If real estate is being provided as collateral, does the property contain any areas where regulated hazardous substances or petroleum products appear to have been released? Yes No
If yes, please explain.

7. Is your business facility connected to a municipal wastewater system? Yes No

USDA
Form RD 400-4
(Rev. 3-97)

ASSURANCE AGREEMENT
(Under Title VI, Civil Rights Act of 1964)

FORM APPROVED
OMB No. 0575-0018

The _____
(name of recipient)

(address)

("Recipient" herein) hereby assures the U. S. Department of Agriculture that Recipient is in compliance with and will continue to comply with Title VI of the Civil Rights Act of 1964 (42 USC 2000d et. seq.), 7 CFR Part 15, and Rural Housing Service, Rural Business-Cooperative Service, Rural Utilities Service, or the Farm Service Agency, (hereafter known as the "Agency") regulations promulgated thereunder, 7 C.F.R. § 1901.202. In accordance with that Act and the regulations referred to above, Recipient agrees that in connection with any program or activity for which Recipient receives Federal financial assistance (as such term is defined in 7 C.F.R. § 14.2) no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination.

1. Recipient agrees that any transfer of any aided facility, other than personal property, by sale, lease or other conveyance of contract, shall be, and shall be made expressly, subject to the obligations of this agreement and transferee's assumption thereof.
2. Recipient shall:
 - (a) Keep such records and submit to the Government such timely, complete, and accurate information as the Government may determine to be necessary to ascertain our/my compliance with this agreement and the regulations.
 - (b) Permit access by authorized employees of the Agency or the U.S. Department of Agriculture during normal business hours to such books, records, accounts and other sources of information and its facilities as may be pertinent to ascertaining such compliance.
 - (c) Make available to users, participants, beneficiaries and other interested persons such information regarding the provisions of this agreement and the regulations, and in such manner as the Agency or the U. S. Department of Agriculture finds necessary to inform such persons of the protection assured them against discrimination.
3. The obligations of this agreement shall continue:
 - (a) As to any real property, including any structure, acquired or improved with the aid of the Federal financial assistance, so long as such real property is used for the purpose for which the Federal financial assistance is made or for another purpose which affords similar services or benefits, or for as long as the Recipient retains ownership or possession of the property, whichever is longer.
 - (b) As to any personal property acquired or improved with the aid of the Federal financial assistance, so long as Recipient retains ownership or possession of the property.
 - (c) As to any other aided facility or activity, until the last advance of funds under the loan or grant has been made.
4. Upon any breach or violation this agreement the Government may, at its option:
 - (a) Terminate or refuse to render or continue financial assistance for the aid of the property, facility, project, service or activity.
 - (b) Enforce this agreement by suit for specific performance or by any other available remedy under the laws of the United States or the State in which the breach or violation occurs.

Rights and remedies provided for under this agreement shall be cumulative.

In witness whereof, _____ on this
(name of recipient)

date has caused this agreement to be executed by its duly authorized officers and its seal affixed hereto, or, if a natural person, has hereunto executed this agreement.

(SEAL)

Recipient

Date

Attest: _____

Title

Title

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0570-0018. The time required to complete this information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.



PERSONAL FINANCIAL STATEMENT

U.S. SMALL BUSINESS ADMINISTRATION

As of _____, _____

Complete this form for: (1) each proprietor, or (2) each limited partner who owns 20% or more interest and each general partner, or (3) each stockholder owning 20% or more of voting stock, or (4) any person or entity providing a guaranty on the loan.

Name	Business Phone
Residence Address	Residence Phone
City, State, & Zip Code	
Business Name of Applicant/Borrower	

ASSETS		(Omit Cents)	LIABILITIES		(Omit Cents)
Cash on hand & in Banks	\$	_____	Accounts Payable	\$	_____
Savings Accounts	\$	_____	Notes Payable to Banks and Others	\$	_____
IRA or Other Retirement Account	\$	_____	(Describe in Section 2)		
Accounts & Notes Receivable	\$	_____	Installment Account (Auto)	\$	_____
Life Insurance-Cash Surrender Value Only	\$	_____	Mo. Payments \$ _____		
(Complete Section 8)			Installment Account (Other)	\$	_____
Stocks and Bonds	\$	_____	Mo. Payments \$ _____		
(Describe in Section 3)			Loan on Life Insurance	\$	_____
Real Estate	\$	_____	Mortgages on Real Estate	\$	_____
(Describe in Section 4)			(Describe in Section 4)		
Automobile-Present Value	\$	_____	Unpaid Taxes	\$	_____
Other Personal Property	\$	_____	(Describe in Section 6)		
(Describe in Section 5)			Other Liabilities	\$	_____
Other Assets	\$	_____	(Describe in Section 7)		
(Describe in Section 5)			Total Liabilities	\$	_____
Total	\$	_____	Net Worth	\$	_____
			Total	\$	_____

Section 1. Source of Income	Contingent Liabilities
Salary	As Endorser or Co-Maker
Net Investment Income	Legal Claims & Judgments
Real Estate Income	Provision for Federal Income Tax
Other Income (Describe below)*	Other Special Debt

Description of Other Income in Section 1.

*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

Section 2. Notes Payable to Banks and Others. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

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 attachment 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 Officer, Paper Reduction Project (3245-0188), Office of Management and Budget, Washington, D.C. 20503. **PLEASE DO NOT SEND FORMS TO OMB.**