

PO Box 2894, Glenville, NY 12325-0894 GlenvilleLDC@nycap.rr.com - 518-688-1221 LOAN FUND APPLICATION

Applicant:		Telephone#:
Address:		Email:
Co-Applicant:		Telephone#
Address:		Email:
Name of Business:		Tax ID#:
Street Address:		Telephone#
City: County: State:	Zip:	Date Established:
Structure: O Sole Proprietorship O Partnersh	ip	Is this business: O New or O Existing
O LLC Corporation O S Corpora	ation	 Town of Glenville
O C Corporation – Trust		 Micro Loan <\$10,000.00
Have you applied for traditional bank financing	? Yes or N	 Macro Loan >\$10,000.00
What were the results?		

MANAGEMENT/OWNERSHIP

(Proprietor, partners, officers, directors and all shareholders of outstanding stock – 100% of ownership must be shown). Use a separate sheet if necessary.

Name:	Title:	SSN*:
Address:	Telephone#:	% Owned:
Email:		

Name:	Title:	SSN*:			
Address:	Telephone#:	% Owned:			
Email:					
Add'l Names and contact information	Add'I Names and contact information:				

OTHER CONTACT INFORMATION

Name of Bank:	Telephone#:
Address:	
Name of Financial Consultant:	Telephone#:
Address:	



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 and when?

How many FTE jobs will be retained?

EXISTING POSITIONS SUMMARY

Job Title	Number of FTE* Positions	Wage Scale

NEW POSITIONS SUMMARY

*Full-time equivalent

Job Title	Number of FTE* Positions	Wage Scale
		*Full time equivalent

LIST BENEFITS AVAILABLE

*Full-time equivalent

USES AND SOURCES OF FUNDS What are the project costs and where will the funds be obtained?

	Sources of Financing (enter gross dollar amounts rounded to the nearest hundred)					
	Total Project					
Uses of Proceeds	Bank	GLDC	Borrower	Other	Cost	
Land Acquisition						
New Construction						
Expansion/Repair						
Acquisition of Equipment						
Inventory Purchase						
Working Capital						
Purchase Existing Business						
Other						
TOTAL						

COLLATERAL SUMMARY

List assets that will be available for Glenville Loan Development Corporation's security.

	Fair Market Value	Existing & Future Liens Against this Property	
Business Land & Buildings			
Business Machinery/Equipment			
Personal Residence			
Personal Other			

BUSINESS INDEBTEDNESS

Furnish the following information on installment debts, contracts, notes, and mortgages payable. Indicate by and asterisk (*) items to be paid by loan proceeds and reason for paying (present balance should agree with latest balance sheet submitted).

To Whom Payable	Present Balance	Rate of Interest	Maturity Date	Monthly Payment	Security	(X) if Current

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CREDIT REFERENCES

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

BANKS	
TRADES	
CREDIT CARDS	
I authorize lender to make inquiries as necessary to verify the accuracy of the stat credit worthiness. I certify the above information and statements contained in the	ements made and to determine my
of the stated date(s). These statements are made for the purpose of either obtain	ing a loan or guaranteeing a loan.
Signed:	Date:
Title:	-
Signed	Date
Signed:	שמופ
Title:	
	-

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PERSONAL FINANCIAL STATEMENT

As of

(NOT REQUIRED FOR MICROLOAN)

Complete this form for: (1) each Owning 20% or more of voting s	n proprietor, o stock.	or (2) each limited pa	rtner who owns 20% or more interes	st or (3) each stockholder		
Name:			Business Phone:			
Residence Address:			Residence Phone:			
City, State & Zip Code:						
Business Name of Applicant/I	Borrower:					
ASS	ETS		LIABIL	TIES		
Cash on hand & in banks	\$		Accounts Payable	\$		
Savings Accounts	\$_		Notes Payable to Banks & Others (Describe in Section 2)	\$		
IRA or Other Retirement Acco	ount <u></u> \$_		Installment Account (Auto) (Describe in Section 2)	\$		
Accounts & Notes Receivable	\$		Installment Account (RV, Other) (Describe in Section 2)	\$		
Life Insurance-Cash Surrend Value	ler \$		Loan on Life Insurance	\$		
Stocks & Bonds (Describe in Section 3)	\$		Mortgages on Real Estate (Describe in Section 4)	\$		
Real Estate (Describe in Section 4)	\$_		Unpaid Taxes (Describe in Section 6)	\$		
Automobile – Present Value	\$_	(Other Liabilities (Describe in Section 2)	\$		
Other Personal Property (Describe in Section 5)	onal Property to Tetal Liabilities		\$			
Other Assets (Describe in Section 5)	\$_		Net Worth	\$		
TOTAL	\$_		TOTAL	\$		
SECTION 1. SOURCE OF INC	OME		CONTINGENT LIABILITIES (Desc	ribe in Section 7)		
Salary	\$_		As Endorser of Co-Maker	\$		
Net Investment Income	\$_		Legal Claims & Judgments	\$		
Real Estate Income	\$_		Provision for Federal Income Tax	\$		
Other Income (Describe	\$_		Other Special Debt	\$		
DESCRIPTION OF OTHER INC	COME IN SEC	CTION 1.				
Alimony or child support paymer total income.	nts need not l	be disclosed in "Other	r Income" unless it is desired to have	e such payments counted toward		
SECTION 2. NOTES PAYABLE			attachments as necessary and sign)			
Name of Creditor		ans, Credit Cards, Personal Loans, etc Collateral Monthly Payment		Current Balance		

SECTION 3. STOCK statement and signed).	KS AND BONDS (Use	attachments as ne	cessary. Each attachme	nt must be identified as p	art of this
Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value
-					
	+			++	
SECTION 4. REAL E statement and signed).	ESTATE OWNED (Use	e attachments as n	ecessary. Each attachme	ent must be identified as r	part of this
Statement and signed).		Pr	operty A	Proper	
Type of Property					
Name & Address of T	itle Holder				
Date of Purchased				<u> </u>	
Original Cost					
Present Market Value	e				
Name & Address of M					
Mortgage Account Nu	umber				
Mortgage Balance					
Amount of Payment p	per Month/Year				
	R PERSONAL PROPER der, amount of lien, terms				ity, state name
and address of their noic	Jer, amount or nen, terms	ограушенсана п	<u>ו מפווחקטפוור, מפגרוספ מכו</u>	inquency).	
	ID TAXES (Describe in o	detail, as to type, 1	to whom payable, when «	due, amount, and to what	t property, if
any, a tax lien attaches	;).				
	R CONTINGENT LIABI		- in datail)		
SECTION 7. OTHER		LITILO (Describe			
SECTION 8 LIFE I	NSURANCE HELD (Gi	the face amount ar	ad cash surrender value c	of policies – name of Insu	rance company and
beneficiaries).					diffe company and
1					
above and the statements either obtaining a loan or g	e inquiries as necessary to ver contained in the attachments guaranteeing a loan. I unders	s are true and accurat	te as of the stated date(s).	These statements are made f	for the purpose of
Attorney General (Reference SIGNATURE	<u>ce 18 0.S.C. 1001)</u>	DATE		SOCIAL SECURITY	NUMBER

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PERSONAL QUESTIONNAIRE					
I (We) understand that the following questions are addressed to me (us) and I (we) have answered them as appropriate.					
YES	NO				
		1.	Have you or any officers of your compa proceedings? If so, please provide the	any ever been involved in bankruptcy or insolvency details as a separate exhibit.	
		2.	Are you or your business involved in a a separate exhibit.	ny pending lawsuits? If yes, please provide the details as	
		3.	Do you or your spouse or any member directs your business or their spouses	of your household, or anyone who owns, manages, or or members of their households work for the Town of n Schenectady County? If so, please provide the name and ment employed by.	
			Employee Name: Employee Address:	Department:	
		4.	other businesses? If yes, please provi with a current balance sheet and opera	prity stockholders own or have a controlling interest in de their names and relationship with your company along ating statement for each as a separate exhibit.	
			Name of Business:		
			Relationship to Applicant:		
		5.		rvices of any concern in which someone in your company /es, provide details in a separate exhibit.	
		6.		"Management" on parole or probation? If yes, please	
		7.		r "Management" been convicted of a crime? If yes, please	
ADDITIONAL REMARKS					
THE FOLLOWING EXHIBITS MUST BE COMPLETED WHERE APPLICABLE. ALL QUESTIONS ANSWERED ARE					
MADE A PART OF THE APPLICATION.					
ALL MATERIALS REQUESTED MUST BE SENT WITH THE APPLICATION TO THE GLENVILLE LOAN DEVELOPMENT CORPORATION OFFICE. THE FOLLOWING SPECIFIC INFORMATION SHOULD BE INCLUDED AS PART OF YOUR APPLICATION.					
I (We) have explained fully under "Additional Remarks" on this page (or any attachment) my (our) "Yes"					
answers to the foregoing questions.					
	ATUR		· · ·	DATE	
CICN	<u> </u>			DATE	
SIGN	ATUR	C		DATE	

√ IF INCLUDED IN PACKET	OTHER INFORMATION TO INCLUDE WITH LOAN FUND APPLICATION		
	 Earnings projections for three (3) years from date of application. Assumptions must be included. 		
	 Business plan and financial proposal. This should include Company history, a discussion of your industry, sales and marketing plans, discussion of competition, need of financing, and other matters relevant to your application. 		
	Resumes for all individual listed under "Management/Ownership"		
	 If you are buying equipment with loan proceeds, attach a list of the equipment to be purchased. 		
	If you are using loan proceeds for new construction, please attach plans and specifications along with a proposed construction contract.		
	Commitments for all private financing. The commitments should contain no contingencies other than receipt of Loan Fund monies.		
	7. Environmental Review Checklist if Real Estate.		
	8. Lending Institution's Credit Analysis, if applicable.		
	 Explanation why Town of Glenville Loan Development Corporation involvement is requested. 		
	10. Projected officer(s) salaries.		
	11. Tax bill, appraisal, mortgage statement, etc., if applicable		
	12. Environmental Assessment (Transaction Screen, Phase 1 or Phase 2 if applicable).		
	13. Three (3) years personal tax returns.		
EXISTING BUSINESSES	S ONLY		
	14. Tax Returns, Balance Sheet and Profit and Loss Statements for last three fiscal years.		
	15. Balance Sheet and Profit and Loss Statement for an interim period less than ninety (90) days from date of application.		
	16. Aging of Accounts Receivable and Payable corresponding with latest available statement.		