



THE COMMUNITY DEVELOPMENT CORPORATION SERVING THE BUSINESSES AND COMMUNITIES OF NORTHEASTERN VERMONT AND NORTHERN NEW HAMPSHIRE

LOAN APPLICATION

If you need assistance completing this application, please call us at (802) 748-5101

Part A: BUSINESS INFORMATION

REGISTERED Name of Business _____ Primary Business Activity _____

Legal Structure (check one): _____ Sole Proprietor _____ Corporation (S or C) _____ Limited Liability Company (LLC)
 _____ Limited Partnership (LP) _____ 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 # _____

How many employees, including the owners, does the business have now? _____ full time * _____ part time **

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 _____

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: () _____

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), because all or part of the applicant's income derives from any public assistance program, or because the applicant has in good faith exercised any

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: (_____) _____

Part C: LOAN REQUEST

	Amount	Specific list of items to be purchased
Working Capital	\$ _____	_____
Inventory	_____	_____
Machinery/Equipment	_____	_____
Furniture/Fixtures	_____	_____
Other	_____	_____
Total Loan Request	\$ _____	_____

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

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 _____

Part D: DEMOGRAPHIC INFORMATION:

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 requires that the Lender may neither discriminate on the basis of this information, or 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 observation or surname.

Primary Applicant: _____ I do not wish to furnish this information

_____ Female _____ Male _____ Age _____ % Ownership

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

_____ Female _____ Male _____ Age _____ % Ownership

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: _____ Loan Officer _____ (initials)

Northern Community Investment Corporation

Financial Privacy Policy

As an organization entrusted with sensitive information, we respect the privacy of our customers and are committed to treating customer information responsibly. The following is our Financial Privacy Policy.

What Information We Collect

We may collect “nonpublic personal information” about you from the following sources:

- Information you provide us, such as on applications or other loan account forms
- Information about your transactions with us, our affiliates, or others
- Information we receive from third parties such as credit bureaus

“Nonpublic personal information” is nonpublic information about you that we obtain in connection with providing a financial product or service to you. For example, nonpublic personal information includes information regarding your loan balance and payment history.

What Information We Disclose

Under Federal law, we may share information about our experiences or transactions with you or your company (such as your loan balance and payment history with us) with companies related to us by common control or ownership (“affiliates”). However, where state law may be more restrictive, we will abide by the more restrictive requirements.

In order to expedite the processing and servicing of financial products on your behalf, we may need to disclose nonpublic personal information about you to “nonaffiliated third parties: (i.e., third parties that are not members of our corporate family) in certain circumstances. However when we do, we will require them to protect the confidentiality of your information. For example, we may disclose nonpublic personal information about you to third parties such as attorneys or appraisers, if applicable; or to government entities as required by law or in response to subpoenas; and to reputable credit reporting agencies (“credit bureaus”).

If you decide to close your loan account(s) or become an inactive customer, we will continue to adhere to the privacy policies and practices described in this notice.

Our Security Procedures

We will always maintain control over the confidentiality of our customer information, which includes having physical, electronic and procedural safeguards that comply with all applicable standards. We will permit only authorized employees, who are trained in the proper handling of customer information, to have access to that information in order to provide you with quality products and superior service. All of our operational and data processing systems are in a secure environment that protects your account information from being accessed by third parties.



THE COMMUNITY DEVELOPMENT CORPORATION SERVING THE BUSINESSES AND COMMUNITIES OF NORTHEASTERN VERMONT AND NORTHERN NEW HAMPSHIRE

CREDIT AUTHORIZATION

I hereby authorize Northern Community Investment Corporation to conduct credit investigations and verifications and to obtain credit bureau reports (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 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 Northern Community Investment Corporation upon its written or verbal request.

 Date

 (Signature)

 (Printed Name)

 Date

 (Signature)

 (Printed Name)

 Date

 (Signature)

 (Printed Name)

CHECKLIST FOR APPLICATION

The following items make up the rest of the information we request to fully evaluate your application for financing.

A. Business Plan: Provide an overview of your business. This should describe 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 ...

- Description of the products or services you will sell.
- The market area and your potential customers. Any claims that you make about the projected volume of 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.
- List competition and address their strengths and weaknesses.
- Describe your sales strategy and method for attracting and holding customers.
- List employees by title and detail their responsibilities.
- Are you creating/retaining low to moderate income employment positions and/or providing benefits?

B. Management: Describe management's capabilities. Include resume(s).

C. 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 ...

- 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.
- Projected income statement or cash flow for at least the next 12 months.
- Current personal financial statements for individuals, co-applicants, partners or corporate officers with 20% or greater ownership including family income and living expenses.
- If borrower has other employment, include personal tax returns.
- If you are purchasing an existing business include financial statements from prior owner.

D. Loan Purpose: A detailed set of specifications describing your project and the projected use of the loan proceeds. (Note: If you are hiring a contractor, their scope of services and estimates may be used).

Do **NOT** spend the money before you have been approved for a loan.



U.S. SMALL BUSINESS ADMINISTRATION

OMB APPROVAL NO. 3245-0188
EXPIRATION DATE: 11/30/2004

PERSONAL FINANCIAL STATEMENT

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.