



U.S. Small Business Administration

**Small Business Administration**



**Microloan Application**

**Business Information**

**Entity Name:**

**Date Established:**

**Business Address:**

**City:**

**State:**

**Zip:**

**County:**

**Business Type:**

**Federal Tax ID:**

**Contact Name:**

**Phone Number:**

**Email:**

**Number of Current Employees:**

**Number of jobs to be created as a result of this loan:**

**Is your business a franchise?**

**If yes, name the franchise:**

**Is your business more than 51% woman or minority owned?**

**SECTION I: Applicant Business Information**

**Small Business Applicant Ownership**

List all proprietors, partners, officers, directors, and holders of outstanding stock. 100% of ownership must be reflected. Attach a separate sheet if necessary. Based on this form's instructions not all owners will need to complete the Principal Information section of this form.

Owner Name	Title	Ownership %	Residential Address

**Required Documents**

Please complete the application and send the items below. Your loan application will be reviewed once we receive the completed, signed application and requested documents below.

Business Plan

Business Tax Returns (Prior 3 years)

Professional Resume for Each Owner

Current YTD Business Financial Statements

Cash Flow Projections (3 Years Preferred)

Copy of Personal Guarantor/Principal Driver's License

Personal Tax Returns (Prior 3 Years)

No Credit Elsewhere document (Internal use only)

Insert total to fund the business start, expansion or purchase. Funds should be final and include the owner's portion of funds, total loan amount and any investor funding. Any changes need to be sent to our program immediately.

**Estimated Loan Need**

<b>Business Need</b>	<b>Amount</b>	<b>Notes</b>
Land		
Buildings		
Leasehold Improvements		
Equipment		
Furniture and Fixtures		
Computers and Office Equipment		
Vehicles		
Other Capital Purchases		
Working Capital (Cash)		
<b>Total Business Need</b>		

<b>Summary of Business Applicant Injection</b>	<b>Amount</b>	<b>Notes</b>
Personal Cash		
Business Cash		
Other Cash		
<b>Total Business Applicant Injection</b>		
Loan Amount		

**SECTION II: Principal Information**

**This form needs to be filled out by all persons owning 20% or more of the operating company and borrowing entity.**

<b>Business Name:</b>			
<b>Principal Name</b>	<b>Social Security Number or Tax ID if an Entity</b>	<b>Date of Birth</b>	<b>Place of Birth (City &amp; State or Foreign Country)</b>
<b>Home Address</b>		<b>Home Phone</b>	<b>% of Ownership in the Small Business Applicant</b>

**Veteran/Gender/Race/Ethnicity data is collected for program reporting purposes only.  
Disclosure is voluntary and has no bearing on the credit decision.**

		<b>Enter Response Below</b>
<b>Veteran</b>	1=Non-Veteran; 2=Veteran; 3=Service-Disabled Veteran; 4=Spouse of Veteran; X=Not Disclosed	
<b>Gender</b>	M=Male; F=Female; X=Not Disclosed	
<b>Race (more than 1 may be selected)</b>	1=American Indian or Alaska Native; 2=Asian; 3=Black or African-American; 4=Native Hawaiian or Pacific Islander; 5=White; X=Not Disclosed	
<b>Ethnicity</b>	H=Hispanic or Latino; N=Not Hispanic or Latino; X=Not Disclosed	

*Unless stated otherwise, if any of the questions below are answered "Yes," please provide details on a separate sheet.*

#	Question	Yes	No
1	Are you presently subject to an indictment, criminal information, arraignment, or other means by which formal criminal charges are brought in any jurisdiction?	<input type="checkbox"/>	<input type="checkbox"/>
Initial here to confirm your response to question 1 →			
2	Have you been arrested in the last 6 months for any criminal offense?	<input type="checkbox"/>	<input type="checkbox"/>
Initial here to confirm your response to question 2 →			
3	For any criminal offense – other than a minor vehicle violation – have you ever: 1) been convicted; 2) pleaded guilty; 3) pleaded nolo contendere; 4) been placed on pretrial diversion; or 5) been placed on any form of parole or probation (including probation before judgment)?	<input type="checkbox"/>	<input type="checkbox"/>
Initial here to confirm your response to question 3 →			

If you answer "Yes" to questions 1 or 2, you must complete a "Statement of Personal History." You will need to furnish details, including dates, location, fines, sentences, level of charge (whether misdemeanor or felony), dates of parole/probation, unpaid fines or penalties, name(s) under which charged, and any other pertinent information.

4	Are you presently suspended, debarred, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency?	<input type="checkbox"/>	<input type="checkbox"/>
5	If you are a 50% or more owner of the Small Business Applicant, are you more than 60 days delinquent on any obligation to pay child support arising under an administrative order, court order, repayment agreement between the holder and a custodial parent, or repayment agreement between the holder and a state agency providing child support enforcement services.	<input type="checkbox"/>	<input type="checkbox"/>
6	<input type="checkbox"/> I am a U.S. Citizen <u>OR</u> <input type="checkbox"/> I have Lawful Permanent Resident status      Registration Number: _____ <input type="checkbox"/> I am not a U.S. Citizen or Lawful Permanent Resident      Country of Citizenship: _____		
Initial here to confirm your responses to question 6 →			
7	Do you have any ownership in other businesses which would be defined as an Affiliate in the definition found on page 1? (If "Yes," attach a listing of all businesses and your ownership percentage or position in the business.)	<input type="checkbox"/>	<input type="checkbox"/>
8	Have you, or any business you controlled, ever filed for bankruptcy protection?	<input type="checkbox"/>	<input type="checkbox"/>
9	Are you, or any business you control, presently involved in any legal action (including divorce)?	<input type="checkbox"/>	<input type="checkbox"/>
10	Have you or any business owned or controlled by you ever obtained a direct or guaranteed loan from SBA or any other Federal agency or been a guarantor on such a loan? (This includes student loans.)	<input type="checkbox"/>	<input type="checkbox"/>
	(a) If you answered "Yes" to Question 10, is any of the financing currently delinquent?	<input type="checkbox"/>	<input type="checkbox"/>
	(b) If you answered "Yes" to Question 10, did any of this financing ever default and cause a loss to the Government? (If Yes to (a) or (b) above, please provide Lender with a written explanation.)	<input type="checkbox"/>	<input type="checkbox"/>

**AUTHORIZATION AND INDEMNIFICATION AGREEMENT**

I/we hereby authorize South Central Kansas Economic Development District, Inc., (hereafter referred to as "CDC" Certified Development Company) or any of its affiliates to make all inquiries it deems necessary to verify the accuracy of the information provided herein, and to determine my/our credit worthiness for any purpose related to our credit transaction with them. I/we hereby certify that the enclosed application information including attachments/exhibits are valid and correct to the best of my/our knowledge.

I/we hereby authorize the CDC to furnish relevant information to all necessary sources including various federal, state, county, and conventional funding opportunities to obtain the best sources for the project. I/we hereby authorize the CDC to furnish relevant information to CDC's Loan Review Committee(s) for decision; and, to furnish relevant information to the CDC's Board of Directors and various federal, state, and county agencies, officials and economic development representatives for CDC's reporting requirements regarding area economic development.

I/we authorize any company, partnership, corporation, organization or entity of whatever kind to provide the CDC with any credit, financial or personal information held by such entity and requested by the CDC.

I/we further agree that I shall indemnify and hold the CDC harmless from any claim or cause of action arising because of incorrect, inaccurate or incomplete information furnished by me, whether the furnishing of such incorrect, inaccurate or incomplete information was accidental or intentional and in consideration of the CDC's assistance, I waive all claims against the CDC, its personnel or counselors arising from this assistance.

The small business applicant and its principals as individuals, agree to indemnify and hold South Central Kansas Economic Development District, Inc. (CDC) and/or its agents and assigns harmless from and against, any damages, cost, liability or expense attributable to release, threatened release, discharge, manufacture, production, storage or disposal or the presence of hazardous toxic substances, on or under borrower's property or property in which borrower has an interest including adjoining real property and based upon claims assertible by local, state, and federal governmental authority or other third parties against CDC or its assigns.

This indemnification will specifically survive, and is entirely independent of the debtor's contractual obligation to repay the primary obligation held by CDC as amended, extended, or renewed by CDC, prepayment in full of the borrower's indebtedness to CDC; and release of CDC liens on borrower's real or personal property by payment, foreclosure, or other action including CDC's discretionary abandonment of lien.

Signature

Date

Signature

Date