

LOAN APPLICATION

Mission

The mission of Economic Development and Financing Corporation (EDFC) is “Connecting money and ideas with entrepreneurs to create sustainable prosperity in Lake and Mendocino Counties.”

Program Information:

EDFC lends from \$500 to \$250,000 with terms from 5 to 120 months. A commitment fee of 2.5% to 9% is added to the loan amount requiring almost no out of pocket expense at the time of closing. We require that loans are secured by collateral which is valued at liquidation or trade-in prices. EDFC may also request a cosigner in some cases (**Cosigner: A person who does not live in the applicant's household and is not a principal member of the business. Cosigners must have good credit and the capacity to make the loan payment**). EDFC never charges a fee for early payoff of a loan. Please also note that if you are in business for less than six months some loan programs require additional income that is not related to the business.

Do you qualify?

Are you under 21 years of age?

Yes No

Is your business outside of Lake or Mendocino Counties?

Yes No

Is your business involved in the adult entertainment industry?

Yes No

To the best of your knowledge, will any of the items listed below be on your credit report?

Yes No

*Active Bankruptcy * Bankruptcy Ch7 in the last year * Foreclosure or repossession in the last year

* Unpaid write off or collection accounts within the last 6 months * unpaid public records (tax liens or civil judgments) * Any of your credit accounts 90+ days due*

Has your business been fully operating and generating revenue for at least six months?

Yes No

If you answered NO to the question above, do you have all the following:

Yes No

- ❖ Relevant business experience
- ❖ Verifiable income source outside of your startup business
- ❖ Have invested cash/assets in this business or have cash to invest in the startup

How did you hear about EDFC? *Select one option. Provide name of person/organization under detail section.*

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> EDFC Borrower | <input type="checkbox"/> EDFC Employee | <input type="checkbox"/> Bank | <input type="checkbox"/> Community Organization |
| <input type="checkbox"/> VA Assistance Center | <input type="checkbox"/> Advertisement | <input type="checkbox"/> Credit Union | <input type="checkbox"/> Local Organization |
| <input type="checkbox"/> Re-Applying | <input type="checkbox"/> EDFC Website | <input type="checkbox"/> TRCE | <input type="checkbox"/> Friend/Colleague/Family |
| <input type="checkbox"/> SBA Education Partner | <input type="checkbox"/> Online Marketing | <input type="checkbox"/> In Person Marketing | <input type="checkbox"/> Other |

Individual (First and Last Name): _____

Organization Name/ Advertisement Details: _____

- Do you currently have or have you ever had a loan with EDFC? Yes No
- Would you like to receive communications from EDFC (re: loans, events, and news)? Yes No

Loan Process:

We are here to assist you in your capital needs! The overall length of time typically depends on how quickly the applicant completes and submits all requested information. Applications with no activity for over 30 days will be canceled from the process.

Step	Description
Submit Application	Application Submission followed by submitting state Issued ID Card/DL
Gather Documents	For example: tax returns and bank statements, to finalize loan. An EDFC representative will conduct a collateral inspection (this is not exhaustive)
Loan Decision	A decision on your application is made.
Close Loan	Closing documents signed by all parties and loan funded if approved. Payments received through automatic debit from your designated bank are required.

EDFC Loan Application

A complete application is required to start application process followed by providing a copy of your state/federal issued ID or State DL. Please fill out the application as completely and accurately as possible. Complete information helps speed up the lending process.

Applicant Business Information

Business Name: _____ Employer Identification No: _____

Is your Business in one or more of the following categories? (Select all that apply)

Truck Owner Driver Restaurant Daycare (Adult & Child) Beauty/Barber/Nail Shop

Non-Profit Organization Buying an existing business Start Up Business N/A

Physical Business Address

Do you rent or own the property? Rent Own

Is the physical address the mailing address? YES NO, If No, provide Mailing Address:

Street: _____ County: _____

City: _____ State: _____ Zip Code: _____

Mailing Address:

Street: _____ County: _____

City: _____ State: _____ Zip Code: _____

Business Contact Information:

Main Phone: _____ Other: _____

Mobile: _____ Fax: _____

Email: _____ Website: _____

Applicant Information

First Name: _____ Middle Name: _____ Last Name: _____

Business Title: _____ Business Name: _____

SSN: _____ DL: _____ DL State: _____ DOB: _____

Percent Ownership in Business: _____

Current Home Address: _____

City: _____ State: _____ Zip Code: _____ County: _____

Have you lived at this address for less than one year? Yes No

If Yes, provide previous address:

Previous Home Address: _____

City: _____ State: _____ Zip Code: _____ County: _____

Applicant Phone & Email Information

Home: _____ Mobile: _____ Work: _____

Fax: _____ Email: _____

Preferred Method of Contact (check one) Mo

Email Home Mobile Work

Business Information

Ownership Type: Sole Proprietorship Corporation General Partnership
 Limited Partnership Limited Liability Company Non-Profit

Time in Business (Full Operations): Years _____ Months _____

How do you pay for your business supplies? Cash Credit Other

Location Type: Home Storefront Market Office Building Street Other

Years of Experience: _____

Business Description: _____

Is this business seasonal? Yes No

Monthly Revenue: Average \$ _____ Highest \$ _____ Lowest \$ _____

Applicant's Employment Information

Employer's name: _____ Contact Person: _____
 Phone Number: _____ Employer Address: _____
 City: _____ State: _____ Zip Code: _____ Fax Number: _____
 Employment Status: Temporary Permanent Full Time Part Time
 Salary Type: Weekly Bi-Weekly Monthly Employment income per month: \$ _____

Home and Business Location Information

Time at current home: Years _____ Months _____ Monthly Rent/Mortgage payment: \$ _____
 Do you own your current place of residence? Yes No
 If No, provide landlord company Name: _____ Contact Person: _____
 Phone Number: _____ Fax Number: _____
 Time at Current business location: Years _____ Months _____ Monthly Rent/Mortgage payment: \$ _____
 Do you own this property? Yes No
 If No, provide landlord's Company Name: _____ Contact Person: _____
 Phone Number: _____ Fax Number: _____

Co Applicant Information: (Everyone that owns 20% or more must be a co applicant.)

First Name: _____ Middle Name: _____ Last Name: _____
 SSN: _____ DL No.: _____ DL State: _____ DOB: _____
 Business Title: _____ Percentage of Ownership: _____
 Other Name(s) the credit report can be under: _____

Current Home Address

Street: _____ City: _____
 State: _____ Zip Code: _____ County: _____
 Has co-applicant lived at this address for less than one year? **YES NO**, If Yes, provide Previous Address:
 Street: _____ City: _____
 State: _____ Zip Code: _____ County: _____

Co-Applicant Contact Information:

Home Phone: _____ Fax: _____
 Mobile Phone: _____ Email: _____
 Preferred Contact Method: (check one)
 Email Mobile Phone Home Phone Work Phone

Personal References:

Name	Address	Phone Number	Relationship

Is this an environmentally friendly business? Yes No

If Yes, provide details:

How does it benefit the environment? Select One: <input type="checkbox"/> Energy Conservation through reduction of use or other measures (i.e. gas, oil, electricity) <input type="checkbox"/> Energy efficiency improvements to facility or production process <input type="checkbox"/> Organic Products increased production, cultivation, or use (food, compost, material) <input type="checkbox"/> Renewable energy generated (biofuel, geothermal, solar, wind) <input type="checkbox"/> Toxic substances reduced, reused, recycled, or eliminated <input type="checkbox"/> Waste products reduced, reused, recycled, or eliminated <input type="checkbox"/> Water quality preservation <input type="checkbox"/> Water use reduction <input type="checkbox"/> Other: _____	How do you measure impact? (Select One) <input type="checkbox"/> Energy use monitored from billing statement/usage <input type="checkbox"/> Energy cost reduced <input type="checkbox"/> Organic product utilization for cultivation or production <input type="checkbox"/> Renewable energy generation calculated <input type="checkbox"/> Waste and/or toxic substances reduced through pounds or gallons <input type="checkbox"/> Waster use and/or cost reduced through billing statements <input type="checkbox"/> Other: _____
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Loan Request Details

Requested Loan Amount: \$ _____ Requested Term: _____ Requested Payment: \$ _____

Purpose of the Loan: (Provide as much detail as possible)

Dollar Amount	Purpose of Loan (Details)

If you do not qualify for the full amount, what is the minimum loan amount you can work with? \$ _____

How will this amount help your business? _____

Credit Report Information

Have you ever filed for bankruptcy? Yes No If Yes, Is it Active? Yes No

Are you showing slow pay in child support? Yes No Can you prove that you are current? Yes No

Are you currently showing slow pay in mortgage and/or vehicle accounts? Yes No

Can you prove that you are current in both mortgage and vehicle accounts? Yes No

Other Name(s) the credit report can be under: _____

If you are presently delinquent in your mortgage and/or your vehicle account(s), slow pay in child support or have an active bankruptcy, you do not qualify for a loan under our program. If you have proof that these accounts are current, please provide supporting information.

Please explain the reasons for any credit issues on your credit and steps taken to remedy those issues:

EDFC will obtain a credit report on applicant and co-applicant(s) to verify credit history.

Monthly Financial Information:

Instructions: 1) Report only verifiable income, 2) The income reported must be net (after taxes and other deductions), 3) Spouse's income will only be considered if spouse is a co-applicant in the loan application, 4) Existing Businesses must provide financial information according to existing operations, 5) Start Up Businesses must fill out business financials section with estimated financial projections on a monthly basis, 6) Only Enter an amount under "take home from business" if the business has been fully operating and generating revenue for more than 6 months; startups must enter \$0.00.

Are the business financials Actual Projected

PERSONAL FINANCIALS		BUSINESS FINANCIALS	
Household Income	(Monthly)	Business Revenue	(Monthly)
Take Home from Business		Gross Sales	
Spouse's Income		Any other Income	
Employment Income		Total Business Revenue	
Any other income		Business Expenses and Debt Payments	
Total Household income	\$	Cost of Goods Sold/Supplies	
Personal Household Expenses and Debt Payments		Salaries & Labor	
Education and Childcare		Insurance, Gasoline, Miscellaneous	
Food & Clothing		Utilities	
Child Support/Alimony		Business Rent/Mortgage	
Utilities		Credit Card Payments	
Insurance, Gasoline, Miscellaneous		Vehicle and Other Loan Payments	
Healthcare Expenses		Total Business Expenses	
Home Rent/Mortgage		Gross Business Cash Flow Surplus (total income minus Total expenses)	
Credit Card Payments		Owner's Draw	
Vehicle and other Loan Payments		Net Business Cash Flow Surplus	
Total Household Expenses			
Personal Cash Flow Surplus (total income minus Total expenses)		Total Cash Flow (Personal Cash Flow Surplus plus Net Business Cash Flow Surplus)	

Business Assets- List all assets owned by the business, including Inventory, Equipment, Furniture, Fixtures, Machinery, Accounts Receivable, Cash, etc. Start Up businesses must declare the cash available to invest in the business.

Asset Description	Estimated Value	Own Free and Clear?
	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No

Business Liabilities- List all business debts, including accounts payable owed to suppliers, vehicle debt, loans with other lenders, etc.)

Liability Description(Item financed)	Lender Owed to	Balance	Monthly Payment

Collateral- Most loans must be secured with assets owned free and clear of liens. Acceptable assets include: Business Assets, Vehicles (personal and business), Commercial Real Estate, Non-homestead residential real estate.

Asset Description(Detail on a separate page, if needed)	Resale Value	Own Free and Clear
	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No

Economic and Demographic Information

EDFC is a nonprofit organization; this means we rely on donations and grants from foundations, corporations and government agencies. Without them, we wouldn't be able to provide capital and education to small business owners like you. Our funders require reporting of who we serve as applicants and borrowers. All data provided is anonymous. In order to assist us, please take a moment to provide the following information.

INFORMATION: **Gender:** Male Female **Marital Status:** Single Married Divorced

Years of Education: _____ (Please use number of years studied) **No. in Household:** _____

Ethnic Background: American Indian or Alaska Native Asian Black or African American

Hispanic or Latino Native Hawaiian or Pacific Islander White Other: _____

Veteran: Yes No **Do you have a bank account?** Yes No

Purpose of Account: Personal Business Both **Type:** Checking Savings Both

Accounting Record System: None Some (Informal) Regular (Formal) Professional

How many employees do you currently have? # of Part Time: _____ # of Full Time: _____

How many employees do you plan to hire? # of Part Time: _____ # of Full Time: _____

I attest that all of the information on this application is true. I authorize EDFC to investigate and verify the above information, and contact any references regarding this application. I also authorize EDFC to perform a credit check, which may include obtaining consumer and/or commercial credit reports and to exchange information about credit experience with other creditors from time to time, as authorized by law. The release of all information by EDFC, in any manner, is hereby authorized whether such information is of record or not and I hereby release all persons, agencies, firms, companies, etc., from any damages resulting from such information. I understand that EDFC will retain this application whether the loan is approved or denied and that I can appeal EDFC decision if the loan is denied.

Signature of Applicant: _____ Date: _____

Signature of _____ Date: _____

Co-Applicant: _____ Date: _____

EQUAL CREDIT OPPORTUNITY ACT

EDFC is an Equal Credit Opportunity Lender. If we take adverse action on your application for credit, you have the right to a statement of specific reasons as to why we took such adverse action within 30 days if you request the statement within 60 days of our notification. You may contact EDFC Customer Service Department at 707-467-5902 or by mail to 631 S. Orchard Ave, Ukiah, CA 95482 to obtain the statement of reasons. 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, age (provided 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 right under the Consumer Credit Protection Act. The Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580 administers EDFC's compliance with the Equal Credit Opportunity Act.