

A Place For You

Oconto County Economic Development Corporation

1113 Main Street, PO Box 43, Oconto WI 54153 Phone: 920-834-6969 Toll Free: 888-626-6862

Oconto County Revolving Loan Fund Application

Administered by:

Oconto County Economic Development Corporation, Inc.

Oconto County Economic Development Corporation (OCEDC) 1113 Main Street, PO Box 43 Oconto, WI 54153 Phone 920-834-6969

REVOLVING LOAN FUND APPLICATION

Applicant:		Teleph	one#:			
Address:	Email:					
Co-Applicant:	Telephone#					
Address:		Email:				
Name of Business:		Tax ID	#:			
Street Address:		Teleph	one#			
City: County:	State: Zip:	Date E	stablished:			
Structure: Sole Proprietorship	□ Partnership	In this	business: New			
☐ LL Corporation	☐ S Corporation		□ Existing			
□ C Corporation						
	nust be shown). Use a s		ders of outstanding stock – te sheet if necessary.			
Address:	Telephone#:		% Owned:			
Email:	Telephone " !	70 Owned.				
Linan.						
Name:	Title:		SSN*:			
Address:	Telephone#:	% Owned:				
Email:						
Name:	Title:		SSN*:			
Address:	Telephone#:		% Owned:			
Email:						
*Social Security Number OTHER CONTACT INFORMATION						
Name of Bank:			Telephone#:			
Address:	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? How many FTE jobs will be retained? **EXISTING POSITIONS SUMMARY** *Full-time equivalent Number of FTE* Positions Job Title Wage Scale *Full-time equivalent **NEW POSITIONS SUMMARY** Number of FTE* Positions Job Title Wage Scale

LIST BENEFITS AVAILABLE						
			S OF FUNDS			
What are th	ne project	costs and whe	ere will funds be	obtai	ned?	
		(enter gross dol	Sources of Financin lar amounts rounded to t		est hundred)
Uses of Proceeds	Bank	RLF	Borrower		Other	Total Project Cost
Land Acquisition						
New Construction						
Expansion/Repair						
Acquisition of Equipment						
Inventory Purchase						
Working Capital						
Purchase Existing Business						
Other						
TOTAL						
COLLATERAL CUMMARY						
List assets	COLLATERAL SUMMARY List assets that will be available for Oconto County's security.					
Fair Market Value		Existing & Future L Against this Prope		Mortga	Bill, Appraisal, ge Statement, etc. attached	

	Fair Market Value	Existing & Future Liens Against this Property	(X) if Tax Bill, Appraisal, Mortgage Statement, etc. Attached
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

CREDIT REFERENCES

Include name, address, telephone, contact person, # of years associated, & credit high.

BANKS	
TRADES	

CREDIT CARDS	

Loan Fees

- 1. There shall be an application fee of \$100, payable to Oconto County, upon approval of the loan.
- 2. A loan origination fee in the amount of one percent (1%) of the Revolving Fund loan will be paid to Oconto County at the time of loan disbursement.
- 3. A service fee equal to $\frac{1}{2}$ of 1% (.005) of the unpaid balance may be included in the amortization of the loan.

Acknowledgment

- 1. I/We hereby acknowledge that the Oconto County Economic Development Corporation is hereby authorized to verify and discuss all matters pertaining it this application with all participating lenders, and any other interested party(s) including those providing assistance in the preparation of this application or supporting documents and exhibits accompanying same. Including, but not limited to, applicant's legal, accounting, or other consultants.
- I/We shall not discriminate upon the basis of sex, race, creed, color, class, national origin or ancestry in any employment or construction activity. I will notify the Oconto County Job Center of any openings within my/our company and will not discriminate against low and moderate income persons.
- 3. In the event the Revolving Loan Funds are secured, I/we shall use the loan money only to pay the cost of services and materials necessary to complete the economic development activities for which the loan funds were awarded and shall permit Oconto County and/or the Business Development Loan Fund Committee and/or its staff the right of audit/inspection to verify compliance.
- 4. At the completion of the project we agree to cooperate with OCEDC in preparation of a press release detailing non-confidential information.
- 5. I/We shall keep such records concerning the economic development work as may be required by Oconto County. These files shall be maintained for at least three years after the work for which the loan has been obtained is completed.

I authorize lender to make inquiries as necessary to verify the accuracy of the statements made and to determine my credit worthiness. I certify the above information and 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.

Signed:	
Date:	
Title:	
Signed:	
Date:	
Title:	

PERSONAL FINANCIAL ST		As of	, 20 <u> </u>
Complete this form for: (1) each propri Owning 20% or more of voting stock.	etor, or (2) each lim	ited partner who owns 20% or more interest or	(3) each stockholder
Name:		Business Phone:	
Residence Address:		Residence Phone:	
City, State & Zip Code:			
Business Name of Applicant/Borrov	ver:		
ASSETS		LIABILITI	ES
Cash on hand & in banks	\$	— Accounts Payable	\$
Savings Accounts	\$	Notes Payable to Banks & Others (Describe in Section 2)	\$
IRA or Other Retirement Account	\$	Installment Account (Auto)	\$
Accounts & Notes Receivable	\$	Installment Account (Other)	\$
Life Insurance–Cash Surrender Value (Complete Section 8)	\$	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 7)	\$
Other Personal Property (Describe in Section 5)	\$	Total Liabilities	\$
Other Assets (Describe in Section 5)	\$	Net Worth	\$
TOTAL	\$	TOTAL	\$
SECTION 1. SOURCE OF INCOM		CONTINGENT LIABILITIES	
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 INCOM	ME IN SECTION 1	L.	_1
Alimony or child support payments nee total income.	d not be disclosed in	"Other Income" unless it is desired to have suc	ch payments counted toward
SECTION 2. NOTES PAYABLE TO as part of this statement and signed).	BANKS AND OT	HERS (Use attachments as necessary. Each a	attachment must be identified
		 	

SECTION 3. STO statement and signed).	CKS AND BONDS (U	se attachments as	necessary. Each attach	ment must be identified	d as part of this
Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value
SECTION 4. REAL statement and signed).	L ESTATE OWNED (Use attachments as	s necessary. Each attac	chment must be identifie	ed as part of this
		Pro	perty A	Prope	erty B
Type of Property					
Name & Address of T	Fitle Holder				
Date of Purchased					
Original Cost					
Present Market Value	e				
Name & Address of N	Mortgage Holder				
Mortgage Account Nu	umber				
Mortgage Balance					
Amount of Payment	per Month/Year				
	ER PERSONAL PRO en holder, amount of lien,				as security, state
	,		,	, , , ,	
SECTION 6. UNPA	AID TAXES (Describe	in detail, as to type	e, to whom payable, wh	en due, amount, and to	what property, if
any, a tax hen attaches	5).				
SECTION 7. OTHI	ER LIABILITIES (De	escribe in detail).			
SECTION 8. LIFE and beneficiaries).	INSURANCE HELD	(Give face amoun	t and cash surrender va	lue of policies – name o	f Insurance company
above and the statements	e inquiries as necessary to ve contained in the attachments guaranteeing a loan. I unders ce 18 U.S.C. 1001)	are true and accurat	e as of the stated date(s).	These statements are mad	e for the purpose of
SIGNATURE		DATE		SOCIAL SECURI	TY NUMBER

Twee understand that the following questions are addressed to me (us) and I (we) have answered them as appropriate.				NCIAL STATEMENT		
1. Have you or any officers of your company ever been involved in bankruptcy or insolvency proceedings? If so, please provide the details as a separate exhibit. 2. Are you or your business involved in any pending lawsuits? If yes, please provide the details as a separate exhibit. 3. Do you or your spouse or any member of your household, or anyone who owns, manages, or directs your business or their spouses or members of their households work for Oconto County or hold an official position with Oconto County? If so, please provide the name and address of the person and what department employed by. Employee Name: Employee Address: 4. Does your business, its owners or majority stockholders own or have a controlling interest in other businesses? If yes, please provide their names and relationship with your company along with a current balance sheet and operating statement for each as a separate exhibit. Name of Business: Relationship to Applicant: 5. Do you buy from, sell to, or use the services of any concern in which someone in your company has a significant financial interest? If yes, provide details in a separate exhibit. 6. Are any of the individuals listed under "Management" on parole or probation? If yes, please provide details as a separate exhibit. 7. Have any of the individuals listed under "Management" been convicted of a crime? If yes, please provide details as a separate exhibit. 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 OCONTO COUNTY ECONOMIC DEVELOPMENT CORPORATION OFFICE. THE FOLLOWING SPECIFIC INFORMATION SHOULD BE INCLUDED AS PART OF YOUR APPLICATION.			stand that	t the following questions are addressed to m	e (us) and I (we) have answered them as appropriate.	
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I (We) have explained fully under "Additional Remarks" on this page (or any attachment) my (our) "Yes"						
answers to the foregoing questions. SIGNATURE DATE	answ	ers to	the for			
DATE	3191	1A I U	NL		DAIL	
SIGNATURE DATE	SIGN	IATUI	RE		DATE	

√ IF INCLUDED IN PACKET	OTHER INFORMATION TO INCLUDE WITH REVOLVING LOAN FUND APPLICATION
	1. 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.
	3. Resumes for all individual listed under "Management".
	4. If you are buying equipment with loan proceeds, attach a list of the equipment to be purchased.
	5. If you are using loan proceeds for new construction, please attach plans and specifications along with a proposed construction contract.
	6. Commitments for all private financing. The commitments should contain no contingencies other than receipt of Revolving Loan Fund monies.
	7. Environmental Review Checklist – form enclosed.
	8. Lending Institution's Credit Analysis.
	9. Cash Flow analysis on monthly basis for first (1 st) year of operation.
	10. Personal Balance Sheet
	11. Explanation why Oconto County involvement is requested.
	12. Marketing analysis.
	13. Projected officer(s) salaries.
	14. Industry Average Ratios.
	15. Tax bill, appraisal, mortgage statement, etc.
	16. Environmental Assessment (if applicable).
EXISTING BUSINESS	ES ONLY
	17. Balance Sheet and Profit and Loss Statements for last three fiscal years.
	18. Balance Sheet and Profit and Loss Statement for an interim period less than ninety (90) days from date of application.
	19. Aging of Accounts Receivable and Payable corresponding with latest available statement.