



BLACK HILLS

COMMUNITY ECONOMIC DEVELOPMENT

730 E Watertown St, Suite 102, Rapid City, SD 57701 - 605.716.0012 - fwhite@tie.net

Application		
X	N/A	
		Completed and signed BHCED Pre-application (pgs 2-7)
		Bank commitment letter (provided by bank)
Business Information		
X	N/A	
		Franchise Agreement (including dealer agreements, jobber agreements, license agreements, etc.)
		Federal tax returns for the last 3 years for the Operating Company
		Federal tax returns for the last 3 years for the Real Estate Holding Company if applicable
		Federal tax returns for the last 2 years for any affiliate company
		Complete Business Debt Schedule (pg 5)
		Interim financial statements for Operating Company dated within the last 60 days
		Projected income statement for Operating Company for first 2 years after the loan; <i>Contact the Small Business Development Center for assistance 605-394-5311</i>
		Organizational documents
Personal Information for each owner of 20% or more		
X	N/A	
		Personal tax returns for last 2 years
		Personal History form (pg 6)
		Resume
		Personal financial statement dated within 60 days (use form on pgs 8-9 or any other template)
		Copy of driver's license
		Personal credit reports (provided by bank)
Real Estate Information		
X	N/A	
		Real estate purchase agreement or settlement statement
		Construction cost estimates or bids
		Equipment quotes or invoices
		Copies of proposed/existing lease agreements
		Existing environmental studies

PRE-APPLICATION

Operating Company Information

Company Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Principal in Charge: _____ Phone: _____ Fax: _____
Secondary Contact Person: _____ Phone: _____ Fax: _____
Email Address: _____
Type of Business: _____ Date Established: _____ Tax ID Number: _____
Type of Entity: (check one) ___ Proprietorship ___ Partnership ___ Corporation ___ LLC

Company Ownership

Name: _____ Title: _____ % of Ownership: _____
Name: _____ Title: _____ % of Ownership: _____
Name: _____ Title: _____ % of Ownership: _____
Name: _____ Title: _____ % of Ownership: _____

Real Estate Holding Company Information

Company Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Principal in Charge: _____ Phone: _____ Fax: _____
Secondary Contact Person: _____ Phone: _____ Fax: _____
Email Address: _____
Type of Business: _____ Date Established: _____ Tax ID Number: _____
Type of Entity: (check one) ___ Proprietorship ___ Partnership ___ Corporation ___ LLC

Company Ownership

Name: _____ Title: _____ % of Ownership: _____
Name: _____ Title: _____ % of Ownership: _____
Name: _____ Title: _____ % of Ownership: _____
Name: _____ Title: _____ % of Ownership: _____

Affiliate Businesses

Name: _____ Owner: _____ % of Ownership: _____
(Applicant company or individuals)
Name: _____ Owner: _____ % of Ownership: _____

Existing Business Locations

Address: _____ Square Feet: _____ Lease Payment: _____ Replaced by New Facility? _____
Address: _____ Square Feet: _____ Lease Payment: _____ Replaced by New Facility? _____

References

Bank Name: _____ Acct. No: _____ Acct. Officer: _____ Phone: _____
Accountant: _____ Firm Name: _____ Phone: _____
Attorney: _____ Firm Name: _____ Phone: _____

Nature of Your Business

When and by whom was your company established? _____
When did you gain control of the business? _____
Types of products or services (include any catalogs or brochures) _____

Geographic Market Area: _____
List Key Customers: _____
List Major Competitors: _____

Project Information

Street Address of Project: _____
City: _____ State: _____ Zip: _____ County: _____
What is the Square Footage of the New Building? _____
What is the Square Footage Your Company Will Occupy? * _____
*Please note – SBA requires your company to occupy 51% of an existing building and 60% of a new building.
Contract Closing Date: _____ Realtor’s Name: _____ Phone: _____

Total Project Costs

Purchase Existing Building or Equipment

Purchase Price \$ _____
Improvements \$ _____
Equipment* \$ _____
Other \$ _____
Total \$ _____

Construction Project

Land Acquisition \$ _____
Construction Bid \$ _____
Architects, permits, other soft costs \$ _____
Equipment* \$ _____
Other \$ _____
Total \$ _____

*Please note -- equipment to be financed must have a useful life of 10 years or greater.

If there are any tenants that will remain in the building, please provide the following information:

Also, please have your realtor provide copies of all existing leases.

Tenant Name	Square Footage	Lease Expiration	Rent Amount

Employee Questionnaire

Number of current full-time employees: _____

Number of current part-time employees: _____

Average # of hours per week part-time employees work: _____

Estimated number of new full-time employees within the next two years as a result of this project: _____

Estimated number of new part-time employees within the next two years as a result of this project: _____

Estimated average # of hours per week new part-time employees (as a result of this project) will work: _____

Key employees:

Name	Title	Responsibilities	Years with the Company	Years in the industry

Miscellaneous Questions

Have you or any officer of your company ever been involved in bankruptcy or insolvency proceedings? _____

Are you or your business involved in any pending or prior lawsuits? _____ If yes, please provide details on a separate sheet.

Have you ever received gov't financing? _____ If yes, please provide the following:

Original Amount \$ _____

Date of the Loan: _____

Current Balance \$ _____

Agency: _____

Business Debt Schedule

Indebtedness: Furnish the following information on all installment debts, contracts, notes, and mortgages payable.
Do not include accounts payable or accrued liabilities.

Date _____*

Creditor Name/Address	Original Amount	Original Date	Present Balance	Interest Rate	Maturity Date	Monthly Payment	Security	Current or Delinquent
Total present balance**				Total monthly payment				

* Should be the same date as current financial statement.

** Total must agree with balance shown on current financial statement.

Personal History Form

To be completed by each principal in business

To be completed by each principal in business

Name: _____
FIRST MIDDLE MAIDEN LAST

Date of Birth: _____ City, State of Birth: _____

Race: _____ Social Security No.: _____

■ U.S. Citizen -- if not, please provide alien registration number: _____

Home Address: _____ City: _____ State: _____ Zip: _____

From: _____ To: _____ Home Phone: _____ Business Phone: _____

Immediate Past Address: _____ City: _____ State: _____ Zip: _____

From: _____ To: _____

Are you employed by the U.S. Government? _____

If so, give the name of the agency and position: _____

Spouse's Name: _____
FIRST MIDDLE MAIDEN LAST

Date of Birth: _____ Place of Birth: _____ Race: _____ Social Security No.: _____

Personal Information

Be sure to answer the next three questions correctly because they are important. The fact that you have an arrest or conviction record will not necessarily disqualify you; an incorrect answer will probably cause your application to be turned down.

Are you presently subject to an indictment, criminal information arraignment, or other means by which formal criminal charges are brought in any jurisdiction? _____ Yes _____ No

Have you been arrested in the past six months for any criminal offense? _____ Yes _____ No

For any criminal offense – other than a minor vehicle violation – have you ever: 1) been convicted; 2) plead guilty; 3) plead nolo contendere; 4) been placed on pretrial diversion; or 5) been placed on any form of parole or probation (including probation before judgment). _____ Yes _____ No

If yes to any of the above, furnish details in a separate exhibit. List name(s) under which held.

Military Service Background

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Honorable? _____

Job Description: _____

Certifications

AUTHORIZATION TO RELEASE INFORMATION

I/We hereby authorize the release to Black Hills Community Economic Development of any information they may require at any time for any purpose related to my/our credit transaction with them including but not limited to credit checks or inquiries concerning my/our creditworthiness, credit standing, credit capacity, character, or general reputation.

I/We further authorize Black Hills Community Economic Development to release such information to any entity they deem necessary for any purpose related to my/our credit transaction with them.

IMPORTANT INFORMATION ABOUT IDENTIFICATION PROCEDURES WHEN OBTAINING A 504 LOAN

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all Certified Development Companies to obtain, verify, and record information that identifies each person who applied for a 504 Loan.

When you apply for a 504 Loan, we will ask for your name, address, date of birth, another information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

CERTIFICATION

I declare and affirm under the penalties of perjury that the claim (petition, application, information) has been examined by me, and to the best of my knowledge and belief, is in all things true and correct. Applicant recognizes that this is an ongoing certification that the information contained herein is accurate and pledges to supplement this application at any time necessary to add, update, or correct information previously supplied.

Black Hills Community Economic Development prohibits discrimination in all its programs and activities on the basis of race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, marital or family status.

Applicant authorized that, upon approval by the Small Business Administration of the loan, Black Hills Community Economic Development has the authority to release and disclose to the general public information regarding the applicant's identity and relationship with Black Hills Community Economic Development, such as: name of the business, address, number of jobs created, and photos of the business. Applicant agrees and understands that the above information is being provided for publicity and/or program funding reasons only.

Name of Applicant(s) _____

Signature of Applicant(s) _____

Date _____

Name of Applicant(s) _____

Signature of Applicant(s) _____

Date _____

Personal Financial Statement

As of _____, 20__

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 and each corporate officer and director, or (4) any other person or entity providing a guaranty on the loan.

Name: _____ Home Phone: _____ Business Phone: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Business Name of Applicant/Borrower: _____

Assets		Omit Cents	Liabilities		Omit Cents
Cash on hand and in banks	\$	_____	Accounts payable.....	\$	_____
Savings accounts.....	\$	_____	Notes payable to banks and others	\$	_____
IRA or other retirement account	\$	_____	(Describe in Section 2)		
Accounts and notes receivable.....	\$	_____	Installment account (Auto)	\$	_____
Life insurance-cash surrender value only	\$	_____	Monthly payments		
(Complete Section 8)			Installment account (Other)	\$	_____
Stocks and bonds	\$	_____	Monthly 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 noteholders	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How secured or endorsed type of collateral

Section 3. Stock 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 SEPERATELY. USE ATTACHMENTS IF NECESSARY. EACH ATTACHMENT MUST BE IDENTIFIED AS A PART OF THIS STATEMENT AND SIGNED.

	Property A	Property B	Property C
Type of property			
Owner			
Property address			
Date purchased			
Original cost			
Present market value			
Mortgage holder			
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 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. 10001).

Signature: _____ Date: _____ Social Security No: _____

Signature: _____ Date: _____ Social Security No: _____