**Boonslick Regional Planning Commission- Revolving Loan Fund- Loan Application** **Package**

**BOONSLICK REGIONAL PLANNING COMMISSION**

**LINCOLN COUNTY**

Chain of Rocks

Elsberry

Foley

Fountain N Lakes

Hawk Point

Moscow Mills

Old Monroe

Silex

Troy

Truxton

Whiteside

Winfield

**MONTGOMERY COUNTY**

Bellflower

High Hill

Jonesburg

McKittrick

Middletown

Montgomery City

New Florence

Rhineland

Wellsville

**WARREN COUNTY**

Innsbrook

Marthasville

Pendleton

Truesdale

Warrenton

Wright City

CHAIRMAN

Ryan Poston

EXECUTIVE DIRECTOR

Chad M. Eggen

Established: May 27, 1968

111 Steinhagen

PO Box 429

Warrenton, MO 63383

Phone: (636) 456-3473

Fax: (636) 456-2329

<http://boonslick.org>

Thank you for your interest in obtaining a revolving loan through Boonslick Regional Planning Commission. This application package is provided in order to complete a business and credit evaluation, and determine eligibility for the program. The application package must be completed and all requested documents received before the request can be made to the loan committee. However, completion of the loan package does not guarantee the approval of your loan request.

When preparing the application package, you may want to consult with your lawyer and/or accountant.

If you have any other questions, or need clarification on any items requested in the application package, please feel free to contact me. When you have completed the application package, please submit the package to me at the address listed below (please make sure and write my name on the outside of the envelope). Please note, I do need original signatures on all documents.

Sincerely,



***Linda J. Buschman***

Boonslick Regional Planning Commission

111 Steinhagen Rd

PO Box 429

Warrenton, MO 63383

lbuschman@boonslick.org

(636) 456-3473

**Required Document Checklist for Revolving Loan Application**

|  |  |
| --- | --- |
| **Borrower Documents** | **Business Documents** |
|  |  |
| Application - Completed and signed | Articles of Incorporation |
| Borrower Information - Completed for each owner  | Business Plan |
| Personal Financial Statement - Completed for each owner | 3 Years of Business Balance Sheets |
| Borrower’s Resume - Can be included in Business Plan | 3 Years of Business Income Statements |
| Each Borrower’s Personal Tax Return for previous three (3) years | Project Narrative |
| \*\*Borrower’s Credit Report | \*Current expenditures related to this project |
|  | Operating Agreement |
|  | Proof of Hazzard/Liability Insurance |
|  | \*Bank Loan Agreement |
|  | \*Document of Non-Substitution |
|  | \*Environmental Reports |
|  | \*Certificate of Life Insurance on owners |
| \*If applicable  |
| \*\*Boonslick Regional Planning Commission will pull applicant’s credit for a fee  |

**BOONSLICK REGIONAL PLANNING COMMISSION**

111 STEINHAGEN RD

WARRENTON, MO 63383

**CREDIT REPORTING SERVICES, LLC**

1024 IRON POINT ROAD

FOLSOM, CA 95630

**BORROWER SIGNATURE AUTHORIZATION FORM**

I/We hereby authorize BOONSLICK REGIONAL PLANNING COMMISSION to verify my

past and present employment earnings records, bank accounts, stockholdings, and any

other asset balances that are needed to process my mortgage loan application. I/We

further authorize BOONSLICK REGIONAL PLANNING COMMISSION to order a

consumer credit report and verify other credit information, including past and present

mortgages, and landlord references.

BOONSLICK REGIONAL PLANNING COMMISSION may also utilize the services of

CREDIT REPORTING SERVICES, LLC to further verify my personal credit information

and the information BOONSLICK REGIONAL PLANNING COMMISSION obtains is only

to be used in the processing of my application for a mortgage loan. It is understood that

a copy of this form will also serve as authorization. This authorization expires 120 days

from the date indicated below.

**Privacy Act Notice:** This information is to be used by the agency collecting it or its

assignees in determining whether you qualify as a prospective mortgagor under its

program. It will not be disclosed outside the agency except as required and permitted by

law. You do not have to provide this information, but if you do not your application for

approval as a prospective mortgagor or borrower may be delayed or rejected. The

information requested in this form is authorized by Title 38, USC, Chapter 37 (if VA); by

12 USC, Section 1701 et. seq. (if HUD/FHA); by 42 USC, Section 1452b (if HUD/CPD);

and Title 42 USC, 1471 et. seq., or 7 USC, 1921 et. seq. (if USDA/FmHA).

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Borrower Signature Borrower Name SSN Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Borrower Signature Borrower Name SSN Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Borrower Signature Borrower Name SSN Date

**Borrower Information** *Any owner with more than 20% Ownership must complete the following:*

Name: Last name, First Name Middle Initial Other names used: Include Maiden name

Title: Title Owner Percentage: Owner Percentage

Date of Birth: Click here to enter a date. Place of Birth: City, County, State

Home Address: Address City/State/Zip: City/State/Zip

1. Are you a Citizen of the United States? Yes or No
2. Have you ever declared bankruptcy? If Yes, when? Yes or No
3. Are you presently under indictment, on parole or probation? Yes or No
4. Have you ever been convicted, placed on pretrial diversion or placed on any form of probation including adjudication withheld pending probation for any criminal offense other than a minor vehicle violation? Yes or No
5. Are you presently a plaintiff or defendant in any legal action? Yes or No

If yes, please explain: Explanation.

1. Have you ever been charged for any criminal offense other than a minor traffic violation? Yes or No

If yes, please explain: Explanation.

1. Are there unsatisfied judgements against you? Yes or No

If yes, please explain: Explanation.

1. Have you cosigned or guaranteed someone else’s obligations? Yes or No

If yes, please explain: Explanation.

1. Have you ever requested government financing? Yes or No

If yes, please explain: Explanation.

First Name Middle Initial Last NameSocial Security Number

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 ***Print Applicant’s Name Social Security Number***

Click here to enter a date.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 ***Signature Date***

1. Personal Financial Statements: *To be completed by the Borrower and each Co-Borrower (if applicable)*

|  |
| --- |
| **Summary of Net Worth Personal Financial Statement:** Last Name, First Name Middle Initial |
| **Date:** Click here to enter a date. |  |  |
|  |  |  |
|  |  |  |
| **Assets** | **Amount in Dollars** |
| Cash - checking accounts | $$$$ | Notes |
| Cash - savings accounts | $$$ | Notes |
| Certificates of deposit | $$$ | Notes |
| Securities - stocks / bonds / mutual funds | $$$ | Notes |
| Notes & contracts receivable | $$$ | Notes |
| Life insurance (cash surrender value) | $$$ | Notes |
| Personal property (autos, jewelry, etc.) | $$$ | Notes |
| Retirement Funds (eg. IRAs, 401k) | $$$ | Notes |
| Real estate (market value) | $$$ | Notes |
| Other assets (specify below) | $$$ | Notes |
| Other assets (specify below) | $$$ | Notes |
| **Total Assets** | **$**$$$ | Notes |
|  |  |  |
| **Liabilities** | **Amount in Dollars** |
| Current Debt (Credit cards, Accounts) | $$$$ | Notes |
| Notes payable (describe below) | $$$ | Notes |
| Taxes payable | $$$ | Notes |
| Real estate mortgages (describe below) | $$$ | Notes |
| Other liabilities (specify below) | $$$ | Notes |
| Other liabilities (specify below) | $$$ | Notes |
| **Total Liabilities** | **$** $$$ | Notes |
|  |  |  |
| **Net Worth** | $$$$ | Notes |

1. Other Personal Income: *To be completed by the Borrower and each Co-Borrower (if applicable)*

|  |
| --- |
| **Income Details Personal Finance Statement of:** Last Name, First Name Middle Initial |
|  |  |  |  |  |
| **Date:** Click here to enter a date. |
|  |  |  |  |  |
| ***Personal Income*** |
|  | Amount | Is this income expected to remain over the term of the loan? |  |
| Gross Annual Income | $$$ | Yes or No |  |
| Alimony | $$$ | Yes or No |  |
| Child Support | $$$ | Yes or No |  |
| Dividends | $$$ | Yes or No |  |
| Spouses Income | $$$ | Yes or No |  |
| Other | $$$ | Yes or No | Describe |

**Business Information**

Legal Name of Business: Click here to enter text.

EIN: Click here to enter text. MO Tax Number: Click here to enter text.

DUNS Number: Click here to enter text.

Legal Address of Business: Click here to enter text.

Does the Business operate separately from the legal address? Yes or No

If Yes, what is that address? Click here to enter text.

What is the legal formation of the business? Sole Proprietor/LLC/S-Corp/C-Corp

Date of incorporation: Click here to enter text.

Has the business ever declared bankruptcy? Yes or No

**List the officers and percentage of ownership**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | Percentage Owned | Social Security Number | Year Started with Company | Company held Life Insurance? |
| Last Name, First Name MI | % | Last Name, First Name MI | Year | Yes or No |
| Last Name, First Name MI | % | SS# | Year | Yes or No |
| Last Name, First Name MI | % | SS# | Year | Yes or No |
| Last Name, First Name MI | % | SS# | Year | Yes or No |
| Last Name, First Name MI | % | SS# | Year | Yes or No |

*If Company holds Life Insurance on officers, please provide a copy of the policy*

Does the company have an Operating Agreement? Yes or No

Who is the fiscal manager? Last Name, First Name MI

Who is responsible for the day-to-day operations? Last Name, First Name MI

Briefly describe the businesses operations including target customer: Click here to enter text.

Is your company engaged in exporting? Yes or No

If No, will the company engage in exporting after receiving the loan? Yes or No

How many employees does the company currently employ? ##

How many employees will the company employ after receiving the loan? ##

Does the company have three (3) years of Tax Returns\*? Yes or No

*\*To apply for the Revolving Loan Fund, the company will need to provide 3 years of Profit/Loss Statements and Balance Sheets, 3 years of projections or a combination of both.*

Does the company have a current Business Plan? Yes or No

If the business has been in business for ***over three years***, please provide a page business plan that includes the following:

* + 1. Mission
		2. Vision
		3. Income Streams
		4. Pricing and Billing Strategy
		5. Customer
		6. Customer Reach Strategy
		7. Competitive Advantage
		8. Strengths, Weakness, Opportunity and Threat (SWOT) Analysis
		9. Three Year Strategic Plan

If the business is a start-up or been in business ***for less than three (3) years***, a complete business plan will be required with the application. Our office can help guide facilitate introduction to the following Small Business Administration (SBA) organizations if you need assistance.

1. Service Corp of Retired Executives (SCORE) - (314) 854-6861.
2. Small Business Development Center (SBDC) - 660-665-3348
3. Veterans Business Resource Center (VBRC) – 314-531-VETS (8387)
4. Grace Hill Women’s Business Center - 314-584-6700

**III Project Details: Please provide a detailed project narrative in addition to completing the following:**

1. Complete the Use of Proceeds Worksheet. *Note the requested amount cannot exceed $150,000*

|  |
| --- |
| **Company Name:** Company Name |
| **Date:** Click here to enter a date. |
| **Use of Proceeds**  | **Amount** |
| Commercial Real Estate | $$$ |
| Land Acquisition | $$$ |
| New Build/Construction/Expansion/Repair | $$$ |
| Machinery/Equipment | $$$ |
|  Acquisition of Existing Business | $$$ |
| Working Capital | $$$ |
| Inventory | $$$ |
| Research/Technology/Patents/Intangible Assets | $$$ |
| Other Click here to enter text. | $$$ |
| Other Click here to enter text. | $$$ |
| Total Loan Requested | $$$ |

***The loan will be assessed an origination fee as well as a***

 ***required 10% of the loan value in private equity***

1. Collateral Worksheet –

|  |
| --- |
| **Company Name:** Company Name |
| **Date:** Click here to enter a date. |
| **Collateral Worksheet** |
| **Description/Manufacturer** | **Year Purchased** | **Purchase Amount** | **Market Value** | **Current Lien Balance** | **Applicable Collateral**  |
| Click here to enter text. | Year | $$$ | $$$ | $$$ |  |
| Click here to enter text. | Year | $$$ | $$$ | $$$ |  |
| Click here to enter text. | Year | $$$ | $$$ | $$$ |  |
| Click here to enter text. | Year | $$$ | $$$ | $$$ |  |
| Click here to enter text. | Year | $$$ | $$$ | $$$ |  |
| Click here to enter text. | Year | $$$ | $$$ | $$$ |  |
| Click here to enter text. | Year | $$$ | $$$ | $$$ |  |
| Click here to enter text. | Year | $$$ | $$$ | $$$ |  |
| Click here to enter text. | Year | $$$ | $$$ | $$$ |  |
| Click here to enter text. | Year | $$$ | $$$ | $$$ |  |
| **Totals** |  |  |  |  |  |
| **Applicable Collateral to be completed by BRPC** |