

Ocean State Business Development Authority, Inc.

Company Information

Company name _____

Address _____ City _____ State _____ Zip _____

Principal in charge _____ Phone () _____ Fax () _____

Secondary contact person _____ Phone () _____ Fax () _____
(IN-HOUSE CONTROLLER OR BOOKKEEPER)

Type of business _____ Date established _____

Type of entity (check one): Proprietorship Partnership Corporation LLC

Company Ownership

Name _____ Title _____ % of Ownership _____

Name _____ Title _____ % of Ownership _____

Name _____ Title _____ % of Ownership _____

Affiliate Businesses

IF APPLICABLE

Name _____ Owner _____ % of Ownership _____
(APPLICANT COMPANY OR INDIVIDUALS)

Name _____ Owner _____ % of Ownership _____
(APPLICANT COMPANY OR INDIVIDUALS)

If a corporation, please indicate who is President and Secretary

Existing Business Locations

Address _____ Square feet _____ Lease payment _____ Lease expiration _____

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Address _____ Square feet _____ Lease payment _____ Lease expiration _____

Address _____ Square feet _____ Lease payment _____ Lease expiration _____

References

Bank name _____ Acct. no. _____ Acct. officer _____ Phone _____

Accountant _____ Firm name _____ Phone _____

Attorney _____ Firm name _____ Phone _____

Trade references _____ Contact Person _____ Phone _____

Nature of Your Business

Nature of your business _____

 Type 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 -- We require your company to occupy 51% of an existing building and 60% of a new building.
 Escrow closing date _____ Realtor's name _____ Phone _____
 If known, how will the property be vested (i.e. individually, husband and wife, partnership, LLC, corporation, trust ...) _____
 Please provide appropriate document (i.e. Partnership Agreement, LLC documents, Articles of Incorporation, Trust Agreement ...)

Total Project Costs

Purchase existing building		Construction Project	
Purchase price	\$ _____	Land acquisition	\$ _____
Improvements	\$ _____	Construction bid	\$ _____
Equipment*	\$ _____	Architects, permits, other soft costs	\$ _____
Other	\$ _____	Equipment*	\$ _____
	Total..... \$ _____	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

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.

Company Name _____ 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.

Employee Questionnaire

Number of current employees _____

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

Key employees

Name	Title	Responsibilities	Years with 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 a SBA loan? _____ *If yes, please provide a copy of the SBA Loan Authorization Document and the following:*

Original Amount \$ _____ Date of the loan _____

Current Balance \$ _____ Status _____

Has the applicant business or businesses owned or controlled by the applicant or any of its associates which previously owned, operated or controlled a business defaulted on a Federal loan, causing a loss to the government (including SBA, FHA, USDA, student loans, etc?) _____

If yes, please provide details including name of agency, loan amount, original date and amount, and the amount of the loss to the government.

Checklist

Business Information

<input type="checkbox"/>	Business financial statements for the last three years
<input type="checkbox"/>	Projections (if business is less than three years old)
<input type="checkbox"/>	Interim financial statement dated within the last 45 days
<input type="checkbox"/>	Business debt schedule (form attached)
<input type="checkbox"/>	Federal tax returns for the last three years
<input type="checkbox"/>	Articles of Incorporation, Amendments thereto, and By-Laws (if corporation)
<input type="checkbox"/>	Articles of Organization and Operating Agreement (if LLC)
<input type="checkbox"/>	Partnership Agreement (if partnership)
<input type="checkbox"/>	Business License <i>and</i> Fictitious Business Name Statement (if proprietorship)
<input type="checkbox"/>	Franchise Agreement

Personal information (for each owner of 20% or greater)

<input type="checkbox"/>	Personal tax returns for the last three years
<input type="checkbox"/>	Personal resume (form attached)
<input type="checkbox"/>	Personal financial statement (form attached)
<input type="checkbox"/>	Photocopy of driver's license/I.D. card

Real estate information

<input type="checkbox"/>	Real Estate Purchase Agreement or settlement sheet
<input type="checkbox"/>	Construction cost budget and/or equipment invoices
<input type="checkbox"/>	Existing environmental studies

Authorization to Release Information

I/We hereby authorize the release to Ocean State Business Development Authority, Inc. of any information they may require at any time for any purpose related to my/our credit transaction with them.

I/We further authorize Ocean State Business Development Authority, Inc. to release such information to any entity they deem necessary for any purpose related to my/our credit transaction with them.

I/We hereby certify that the enclosed information, including any attachments or exhibits provided here within or at a later date, is valid and correct to the best of my/our knowledge.

Name of applicant(s) _____

Signature of applicant(s) _____ Date _____

Name of applicant(s) _____

Signature of applicant(s) _____ Date _____