

ENTERPRISE DEVELOPMENT CORPORATION SBA 504 LOAN APPLICATION

OPERATING COMPANY INFORMATION

Company Name

Address

County

City

State

Zip

Name of Principal Owner

Email

Office Phone #

Cell Phone #

Type of Business

Date Established

Tax ID #

Type of Entity

OWNERS/MEMBER	% Owned	Title

Is the business engaged in exporting? Yes No If so, what percentage?

Is the business Veteran Owned? Yes No If so, what percentage?

Is the business Woman Owned? Yes No If so, what percentage?

Is the business Minority Owned? Yes No If so, what percentage?

BORROWING ENTITY (IF DIFFERENT FROM OPERATING COMPANY)

Name of Borrower

Tax ID#

Date Established

Type of Entity

Owners/Members	Ownership %age	Title

PERSONAL HISTORY INFORMATION

Applicant 1 (State name in full, if no middle name state NMN, or initial only). Include all previous names used.

First	Middle	Last	Social Security Number

Include current and most recent prior address (omit if over 10 years)

Address	City	State	Zip Code

Include home phone number, cell phone number and email address

Home Phone Number	Cellular Phone Number	Email Address

Include birth and resident status

Date of Birth (Month, Day and Year)	Place of Birth	US Citizen? (Y or N)	Permanent Resident (Y or N)	Alien Registration #

Are you presently under indictment, parole or probation?

Yes No

Have you ever been charged with, and/or arrested for, any criminal offense other than a minor motor vehicle violation? Include offenses which have been dismissed, discharged, or not prosecuted (All arrests and charges must be disclosed and explained on a separate sheet).

Yes No

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 No

Applicant 2 (State name in full, if no middle name state NMN, or initial only). Include all previous names used.

First	Middle	Last	Social Security Number

Include current and most recent prior address (omit if over 10 years)

Address	City	State	Zip Code

Include home phone number, cell phone number and email address

Home Phone Number	Cellular Phone Number	Email Address

Include birth and resident status

Date of Birth (Month, Day and Year)	Place of Birth	US Citizen? (Y or N)	Permanent Resident (Y or N)	Alien Registration #

Are you presently under indictment, parole or probation?

Yes No

Have you ever been charged with, and/or arrested for, any criminal offense other than a minor motor vehicle violation? Include offenses which have been dismissed, discharged, or not prosecuted (All arrests and charges must be disclosed and explained on a separate sheet).

Yes No

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 No

Applicant 3 (State name in full, if no middle name state NMN, or initial only). Include all previous names used.

First	Middle	Last	Social Security Number

Include current and most recent prior address (omit if over 10 years)

Address	City	State	Zip Code

Include home phone number, cell phone number and email address

Home Phone Number	Cellular Phone Number	Email Address

Include birth and resident status

Date of Birth (Month, Day and Year)	Place of Birth	US Citizen? (Y or N)	Permanent Resident (Y or N)	Alien Registration #

Are you presently under indictment, parole or probation?

Yes No

Have you ever been charged with, and/or arrested for, any criminal offense other than a minor motor vehicle violation? Include offenses which have been dismissed, discharged, or not prosecuted (All arrests and charges must be disclosed and explained on a separate sheet).

Yes No

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 No

Applicant 4 (State name in full, if no middle name state NMN, or initial only). Include all previous names used.

First	Middle	Last	Social Security Number

Include current and most recent prior address (omit if over 10 years)

Address	City	State	Zip Code

Include home phone number, cell phone number and email address

Home Phone Number	Cellular Phone Number	Email Address

Include birth and resident status

Date of Birth (Month, Day and Year)	Place of Birth	US Citizen? (Y or N)	Permanent Resident (Y or N)	Alien Registration #

Are you presently under indictment, parole or probation?

Yes No

Have you ever been charged with, and/or arrested for, any criminal offense other than a minor motor vehicle violation? Include offenses which have been dismissed, discharged, or not prosecuted (All arrests and charges must be disclosed and explained on a separate sheet).

Yes No

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 No

AFFILIATE INFORMATION

Do any owners who own 20% or more of the operating or borrowing entity also own 20% or more of any other business? Yes No

If yes, list ownership interest in those companies on the following page. You must provide current financial statements and two years' tax returns for all companies listed.

Owner/Members	Name of Affiliated Business	% Owned

PROJECT INFORMATION

Street Address of Project

City

State

Zip

Building Space (sqf)

Land (acres or sqf)

Percentage of building occupied by the business _____%

Are there any existing or proposed tenants that will lease part of the building? Yes No

If yes, complete the information below:

Tenant	Square Footage	Lease Expires	Lease Income

Number of current employees:

Full time:

Part time:

Number of new jobs to be created as a result of this project:

Full time:

Part time:

Who will hold the title to the land?

Who will hold the title to the machinery and equipment?

Please provide a brief description of the Project:

NARRATIVE OF HISTORY OF BUSINESS

Please provide a brief history of your business. Use additional sheets if necessary.

I/We authorize the release to EDC of any information they may require at any time for any purpose related to my/our credit transaction with them. By signing below and submitting this form, I/We further authorize EDC to release such information to any entity they deem necessary for any purpose related to my/our credit transaction with them.

I/We authorize EDC to obtain a credit report on me/us through the credit reporting agency of its choice, as well as to answer questions others may ask about my/our record with EDC. I/We understand that I/we must update credit and financial information as requested if my/our financial condition changes.

I/we understand that if the applicant(s) or an entity owned by the applicant(s) has defaulted on a loan that resulted in a loss to the federal government, then the applicant(s) is not eligible to receive financing from the SBA.

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

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____