

# Greene County, New York

## MASTER LOAN APPLICATION FORM

(Quantum Fund, Microenterprise and Rural Development Loans)

**PART 1. APPLICANT INFORMATION**

Name of Applicant: \_\_\_\_\_  Corporation Year \_\_\_\_\_ State \_\_\_\_\_

Business Address: \_\_\_\_\_  Partnership Year \_\_\_\_\_ State \_\_\_\_\_

\_\_\_\_\_  L.L.C. Year \_\_\_\_\_ State \_\_\_\_\_

Contact Person: \_\_\_\_\_  L.L.P. Year \_\_\_\_\_ State \_\_\_\_\_

Federal ID #: \_\_\_\_\_  Sole Proprietorship Year \_\_\_\_\_

Telephone: (    ) \_\_\_\_\_ FAX: (    ) \_\_\_\_\_ E-Mail: \_\_\_\_\_

Nature of Business: \_\_\_\_\_

\_\_\_\_\_

Company Attorney: \_\_\_\_\_ Accountant: \_\_\_\_\_

Firm Name: \_\_\_\_\_ Firm Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ Telephone: \_\_\_\_\_

Ownership (Shareholders / Partners)	% interest	Company Officers	Position

**(attach additional listing as necessary)**

- Is the company delinquent in the payment of any state or municipal property taxes? Yes No
- Is the company delinquent in the payment of any income tax obligation? Yes No
- Is the company delinquent in the payment of any loans? Yes No
- Is the company currently in default on any of its loans? Yes No
- Are there currently any unsatisfied judgments against the company? Yes No
- Are there currently any unsatisfied judgments against any of the company's principals? Yes No
- Has the company ever filed for bankruptcy? Yes No
- Are any of the company's principals delinquent in any tax or loan obligations? Yes No
- Have any of the company's principals ever personally filed for bankruptcy or in any way sought protection from creditors? Yes No

**If the answer to any of the questions above is "Yes," please provide additional comments in the space below and on additional pages if necessary.**

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<b>PART 2. PROJECT INFORMATION</b>
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Summary Project Description: \_\_\_\_\_

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**Project Costs**

Property Acquisition	\$ _____
New Construction	\$ _____
Renovation	\$ _____
Machinery	\$ _____
Equipment	\$ _____
Furnishings / Fixtures	\$ _____
Fees / Soft Costs	\$ _____
Inventory	\$ _____
Working Capital	\$ _____
_____	\$ _____
<b>Total</b>	\$ _____

**Sources of Funds**

Bank	\$ _____
Greene County	\$ _____
Equity	\$ _____
Cash	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
<b>Total</b>	\$ _____

**Current Employment.** Complete the following table for all employment of the business as of the date of this application. Do not include temporary employees, subcontracted labor, or positions filled by contracted labor through an agency.

Job Category	# of Full-Time Positions	# of Part-Time Positions
Management		
Production (including supervisory, shipping, etc.)		
Services (including retail)		
Sales (including retail)		
Administrative, Clerical & Maintenance		
Other (specify _____ )		
Totals		

**(attach additional listing as necessary)**

Complete the table below for all existing employment positions as of the date of this application. Do not include temporary employees, subcontracted labor, or positions filled by contracted labor through an agency.

Specific Job Title	# Full-Time	# Part-Time	Average Part-Time Hours Per Week	Salary / Wage (average or range)	Requisite Skills, Education or Experience (indicate if training is provided by the company)
Totals					

**(attach additional listing as necessary)**

**Projected Employment.** Complete the table below for all new employment positions expected to be created within three (3) years of the date of this application, assuming that Greene County loan financing is made available for the project described in this application. Do not consider projected turnover of employees. Attach evidence supporting the estimate of the total number of jobs and how the job number was determined. *Note: Borrowers are required to use the services of Columbia Greene Community College in recruiting new employees.*

Specific Job Title	# Full-Time	# Part-Time	Average Part-Time Hours Per Week	Salary / Wage (average or range)	Date when jobs will be filled	Requisite Skills, Education or Experience (indicate if training is provided by the company)
Totals						

(attach additional listing as necessary)

## PART 3. REQUIRED EXHIBITS CHECKLIST

### Exhibit A - Company Background

- A brief narrative describing the company's history, current operations, products, markets, management, etc.;
- A description of the company's current operating facilities - both owned and leased.
- A listing of the names, addresses, social security numbers, driver's license ID numbers, and percentage of ownership for all principals having a 20% or more ownership interest in the company.

### Exhibit B - Project Information

- Description of the proposed project and the company's need to undertake it;
- Source of all project costs shown in Part 2 of this application (vendor quotes, negotiated sales prices, engineer's or contractor's estimates, catalog prices, etc.);
- Details regarding other project financing including status of other loan applications, terms, conditions, and security for all financing, sources of equity capital, and current lien status for all company assets;
- Amount of loan assistance requested with this application, proposed repayment terms, and available security.
- Description, evidence of ownership, and mortgage balances for any real property to serve as collateral.
- Schedule of collateral on SBA Form 4, Schedule A, or equivalent.
- Credit check authorization.
- DUNS number reporting form.

### Exhibit C - Financial Information

***Note - Financial statements must be in a form acceptable to the lender. The applicant may wish to verify the acceptability of its statements prior to preparation.***

- Financial statements of the company for the last three completed fiscal years;
- Interim financial statements of the company through the most recent month available, but in no case more than three months prior to the loan application date;
- Federal income tax returns of the company for the last three years;
- Projected balance sheet and income statement for three years following completion of the project, and projected monthly cash flows for at least the first year following completion of the project;
- Signed personal financial statements (either on SBA Form 413, a standard bank form, or in a comparable format) for each principal owning at least 20% of the company;
- For each owner of a Sole Proprietorship, Partnership, L.L.C., L.L.P., or principals with 20% or more ownership in a corporation or partnership, the personal Federal income tax returns for the last three years;
- Financial statements for any other company or individual who will act as a guarantor of the requested financing.

### Exhibit D - Additional Information (as applicable)

- Documentation of other required financing including bank and other public lending agency commitment letters, bond inducements, and evidence of availability and commitment of cash equity requirements;
- For projects involving realty acquisition and/or development, evidence of site control or current ownership in the form of a binding option, sale agreement, deed, etc.;
- Any other information that may serve to document the information provided with this application or which may affect a credit decision by the lender.

## PART 4. Supplemental Information

The following information is requested by the Federal Government in order to monitor compliance with Federal laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race/national origin of the individual applicants on the basis of visual observation or surname.

Ethnicity:      Hispanic or Latino \_\_\_\_\_  
                  Not Hispanic or Latino \_\_\_\_\_

Race: (Mark one or more)  
White \_\_\_\_\_ Black or African American \_\_\_\_\_  
American Indian/Alaska Native \_\_\_\_\_ Asian \_\_\_\_\_  
Native Hawaiian or Other Pacific Islander \_\_\_\_\_

Gender:        Male \_\_\_\_\_ Female \_\_\_\_\_

**This is an equal opportunity program. Federal law prohibits discrimination on the basis of race, color, national origin, sex, age, disability, political beliefs, sexual orientation or marital or family status. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternate means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at 202-720-2600 (voice and TDD). To file a complaint of discrimination write: USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, SW Washington, DC 20250-9410 or call 202-720-5964 (voice and TDD).**



ACKNOWLEDGMENT OF SIGNATORY(IES)

State of New York )  
 )ss  
County of Greene )

On the \_\_\_\_\_ day of \_\_\_\_\_ in the year 20\_\_\_\_ before me, the undersigned, a Notary Public in and for said state, personally appeared \_\_\_\_\_ to me known or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

\_\_\_\_\_  
Signature of Notary Public

Loan Applicant:  
Office or Capacity of signatory(ies):  
Notary Stamp:

ACKNOWLEDGMENT OF SIGNATORY(IES)

State of New York )  
 )ss  
County of Greene )

On the \_\_\_\_\_ day of \_\_\_\_\_ in the year 20\_\_\_\_ before me, the undersigned, a Notary Public in and for said state, personally appeared \_\_\_\_\_ to me known or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

\_\_\_\_\_  
Signature of Notary Public

Loan Applicant:  
Office or Capacity of signatory(ies):  
Notary Stamp:





**PERSONAL FINANCIAL STATEMENT**

**U.S. SMALL BUSINESS ADMINISTRATION**

As of \_\_\_\_\_, \_\_\_\_\_

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, or (4) any person or entity providing a guaranty on the loan.

Name	Business Phone
Residence Address	Residence Phone
City, State, & Zip Code	
Business Name of Applicant/Borrower	

ASSETS	(Omit Cents)	LIABILITIES	(Omit Cents)
Cash on hand & in Banks .....	\$ _____	Accounts Payable .....	\$ _____
Savings Accounts .....	\$ _____	Notes Payable to Banks and Others .....	\$ _____
IRA or Other Retirement Account .....	\$ _____	(Describe in Section 2)	
Accounts & Notes Receivable .....	\$ _____	Installment Account (Auto) .....	\$ _____
Life Insurance-Cash Surrender Value Only .....	\$ _____	Mo. Payments \$ _____	
(Complete Section 8)		Installment Account (Other) .....	\$ _____
Stocks and Bonds .....	\$ _____	Mo. 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 .....	\$ _____
<b>Total</b>	\$ _____	Net Worth .....	\$ _____
		<b>Total</b>	\$ _____

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 Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

**Section 3. Stocks 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 separately. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed.)

	Property A	Property B	Property C
Type of Property			
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name & 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 and the 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. 1001).

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

PLEASE NOTE: The estimated average burden hours for the completion of this form is 1.5 hours per response. If you have questions or comments concerning this estimate or any other aspect of this information, please contact Chief, Administrative Branch, U.S. Small Business Administration, Washington, D.C. 20416, and Clearance Officer, Paper Reduction Project (3245-0188), Office of Management and Budget, Washington, D.C. 20503. **PLEASE DO NOT SEND FORMS TO OMB.**







# Greene County

Planning & Economic Development

411 Main Street • Catskill, NY 12414 • P: 518-719-3290 • F: 518-719-3789

[www.greeneeconomicdevelopment.com](http://www.greeneeconomicdevelopment.com)

## CREDIT CHECK AUTHORIZATION

Please provide the following information:

Full Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Current Address: \_\_\_\_\_

Date Of Birth: \_\_\_\_\_

Driver's License Number & State of Issue: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

Previous Addresses in the Last Five Years:

Number & Street, City, State, Zip: \_\_\_\_\_

Years: \_\_\_\_\_

Number & Street, City, State, Zip: \_\_\_\_\_

Years: \_\_\_\_\_

Number & Street, City, State, Zip: \_\_\_\_\_

Years: \_\_\_\_\_

I certify that I am the person named above and that I am, submitting this request for my own credit report.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_





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Recent changes in Federal regulations require all applicants for Federal grants (including economic development loans) and cooperative agreements to obtain a DUNS number and provide it to our office. The DUNS number is free, and is obtained in cooperation with Dun and Bradstreet, the national credit-reporting agency for commercial accounts. The Federal government has made these changes in order to better identify related organizations that are receiving funding under grants and cooperative agreements, and to provide consistent name and address data for electronic grant application systems.

To obtain a DUNS # on-line, go to <http://www.dnb.com/us/>. On the left side of the page, near the bottom, you will see a heading for **D&B Resources**, and under that a “clickable” **Get a D&B D-U-N-S #**. Click on that and follow instructions. You can also call a toll free number to get your DUNS #: 1-866-705-5711. Tell them that you are a federal grant applicant (or prospective federal grant applicant), and they will lead you through the process over the phone to provide you a DUNS number.

As soon as you have your DUNS number, please mail, email, fax or call it into our office for processing.

## DUNS Number Reporting Form

*For use with Greene County Economic Development Loan/Grant Projects*

Name of Business: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

DUNS Number (nine digits): \_\_\_\_\_

Person completing this form: \_\_\_\_\_

Date of completion: \_\_\_\_\_

**Federal funds will not be able to be accessed until this form is received.**







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### Payment Process for Greene County Loan and Grant Programs

Thank you for participating in the growth and revitalization of Greene County! As part of your participation in our loan and grant programs, we have developed a payment procedure to follow to ensure that you will be paid in an efficient and effective manner.

In order to be reimbursed for a grant, it is necessary to have the documentation in the office of the Department of Planning and Economic Development by the first of the month. While economic development loans do not have to follow the monthly cycle, payment of bills can take 10 days or more for processing and drawdown of funds.

Our documentation process is required to be followed in order to ensure payment. If the procedures are not followed, it may not be possible for the County to pay for approved business expenses.

***Both the amount of the Greene County loan/grant amount and the matching funds for the program must be documented using the same procedure. Expenses must correspond to the uses of the funds identified in your contract.***

The County's procedure is as follows:

#### **Documentation of Loan/Grant Expenses:**

Copies of paid invoices/receipts from the vendor **and** cancelled checks or debit card statement for reimbursement of expenses corresponding with the invoice/receipt, **or**

For economic development loans, a copy of the invoice for eligible project expenses, i.e. equipment or services ordered; a two party check will be issued.

#### **Documentation of Required Match amount:** i.e. equity, cash, other sources of financing:

Copies of paid invoices/receipts from the vendor **and** cancelled checks or debit card statement corresponding with the invoice/receipt.

If a credit card is used to pay an eligible project expense, the County can reimburse the applicant if they submit an invoice for the eligible project expense, the card statement and a copy of the cancelled check in an amount covering the full purchase price of the eligible project expense. When Internet banking is used, a print-out of the transaction acknowledgement along with a copy of the bill being paid by this transaction will also be acceptable.

For economic development loans only, upon submittal of the card statement showing the charge and an invoice for an eligible project expense, the County can pay the incurred cost to the credit card company as a two-party check.

For additional information, please contact Jane Patterson, Planning Assistant, at the Planning and Economic Development Department office at (518) 719-3290 or [jpatterson@discovergreene.com](mailto:jpatterson@discovergreene.com), or consult our web site at [www.greeneeconomicdevelopment.com](http://www.greeneeconomicdevelopment.com).





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## What to Expect When You Close Your Economic Development Loan/Grant

*All or Some of the Following May or May Not Apply to any One Particular Loan/Grant*

1. It is not necessary that the Borrower is represented by counsel, but we strongly recommend legal representation. All contact information for your attorney should be stated on the loan application form and loan commitment letter.
2. If your loan is secured by a mortgage on real property we require:
  - a. title search and title insurance;
  - b. survey;
  - c. appraisal; and
  - d. proof of insurance on real property with Greene County named as the insured.
3. If your loan is secured by a UCC (Uniform Code of Collateral) Security Agreement we require:
  - a. tax identification number if applicable;
  - b. name of each item of equipment;
  - c. description of each item of equipment;
  - d. model/serial number(s);
  - e. value;
  - f. proof of insurance; and
  - g. affidavit that equipment is not encumbered by another lien or leased.
4. BE SPECIFIC ON LOAN APPLICATION. Give exact name of loan applicant/exact name of owner of property to be mortgaged. If corporate entity-give exact name of corporation and names and titles of officers – or state if individual, give exact address of borrower and exact address of property to be mortgaged. THIS IS EXTREMELY IMPORTANT SO THAT THE LOAN COMMITMENT AND COUNTY RESOLUTION ARE IDENTICAL.
5. Corporations, LLC's, partnerships,d/b/a's, etc. must show all applicable paperwork as follows:
  - a. Bylaws;
  - b. Certificate of incorporation;
  - c. Certificate of Good Standing;
  - d. If LLC – Articles of Organization;
  - e. Affidavit of Corporate Authority\*;
  - f. Shareholders Affidavit\*; and
  - g. Proof of filing status
6. All loans are secured by a personal guarantee for 1 or more borrowers.

\*forms will be provided by the Office of the Greene County Attorney

For additional information, please contact the Office of the Greene County Attorney at (518) 719-3540.