

## Application For Financial Assistance

**Check all financing programs for which you are applying:**

- North Country Alliance Regional Revolving Loan Fund
- Development Authority of the North Country Community Development Loan Fund
- Jefferson County Industrial Development Agency Microenterprise Loan Fund
  - Business Loan
  - Technical Assistance Loan
- Jefferson County Industrial Development Agency Revolving Loan Fund
- Watertown Economic Growth Fund
- Watertown Local Development Corporation Revolving Loan Fund
- Empire Zone / Statewide Zone Capital Corporation
- Economic Development Corporation of Carthage (EDCC)

Applicant's Legal Name \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_

Fax Number \_\_\_\_\_

Date of Application \_\_\_\_\_

## Checklist of Schedules

	Included	Not Applicable
Schedule "A" - Business Name and Form	_____	_____
Schedule "B" - Income Eligibility	_____	_____
Schedule "C" - Principals and Officers	_____	_____
Schedule "D" - Resumes	_____	_____
Schedule "E" - Personal Financial Statements and Tax Returns	_____	_____
Schedule "F" - Bankruptcy, Litigation, Felony History	_____	_____
Schedule "G" - Physical Description of Project	_____	_____
Schedule "H" - Business Plan	_____	_____
Schedule "I" - Employment Plan	_____	_____
Schedule "J" - Project Costs and Financing Sources	_____	_____
Schedule "K" - Profit and Loss Statements/Balance Sheets	_____	_____
Schedule "L" - Outstanding Debt Details	_____	_____
Schedule "M" - Projected Profit and Loss Statements	_____	_____
Schedule "N" - Projected Cash Flow Statement	_____	_____
Schedule "O" - Projected Realty Taxes	_____	_____
Schedule "P" - Bank References	_____	_____
Schedule "Q" - Security Collateral	_____	_____
North Country Alliance Form IA (NCA RRLF Only)	_____	_____
Certification and Authorization to Release Credit Information	_____	_____

## Description of Schedules

### **Schedule "A" - Business Name and Form**

Indicate legal name, address, telephone number and Federal Employment Identification Number if available. Indicate form of Business (corporation, partnership, sole proprietorship), year of organization, Federal Tax Identification Number, New York State Unemployment Insurance Identification Number and Standard Industry Classification (SIC) Code.

### **Schedule "B" - Income Eligibility (Schedule Included)**

**(For Microenterprise Loan Applicants Only)** An employee questionnaire is provided for this purpose. Check the line that best describes your income **for your family size**. Each owner must complete a copy of Schedule "B" and include it with the application.

### **Schedule "C" - Principals and Officers**

Indicate names and addresses including percentage of ownership of all principals and officers.

### **Schedule "D" - Resumes**

Attach resumes of principals including date of birth, business experience, length of association with business, salary, other compensation and outside directorships and business affiliations.

### **Schedule "E" - Personal Financial Statements (Schedule Included) & Tax Returns, Including All Supporting Data**

Provide personal financial statements for each proprietor, partner, officer, and stockholder with ten percent or more ownership in the business. Also, include copies of personal tax returns for the last three (3) years for each personal financial statement.

### **Schedule "F" - Bankruptcy, Litigation, Felony History (Schedule Included)**

Describe any bankruptcy history, litigation history having a material effect on the business solvency, or convicted felony activity associated with the owners, management, or officers of the business.

### **Schedule "G" - Physical Description of Project**

Indicate the address of the project and provide a narrative description of the physical components of the business or project. Please attach diagrams and pictures if relevant.

### **Schedule "H" - Business Plan (Format Included)**

Describe in detail the history of the business, location of business, management, market and competition. Include significant developments in operation and financial condition. A description of information to be included in each section is provided herewith.

### **Schedule "I" - Employment Plan (Schedule Included)**

Information regarding the types, number and wage levels of current and anticipated positions must be provided for new and existing businesses.

## **Schedule "J" - Project Costs and Financing Sources**

Provide details on total project costs and sources of financing. All costs associated with the project should be supported by third party quotations, purchase offers, appraisals, contractors estimates or similar documentation as appropriate. Explain how each component of the project will be financed, including the use of a loan through these programs. Indicate the order of lien preference and all sources of financing (include participants, amounts, percent of total, interest rate, and term). IN ALL CASES, where other lenders are proposed in the capital structure of the project, attach commitments from banks or other lending institutions. Where funding from these programs are the only lending source, provide documented evidence of the unavailability of other funding.

## **Schedule "K" - Profit and Loss Statements/Balance Sheets**

For existing businesses, provide profit and loss statements and balance sheets for the last three (3) fiscal years. Statements must include or be accompanied by separate expense schedules for Cost of Goods Sold, Selling and General Administrative Expenses, including depreciation, salaries, and dividends. **If the most recent available statements are more than ninety (90) days old, interim statements must be provided. Where the request represents a refinancing, or where the business exhibits a degree of financial distress, an aging of accounts payable and receivable must be provided.** Provide business income tax returns for the last three (3) years.

## **Schedule "L" - Outstanding Debt Details (Schedule Included)**

Describe outstanding debt for the business including installment loans, notes and mortgages payable, and capitalized leases showing to whom payable, balance, interest rate, maturity date, monthly payment, security, and whether current or delinquent. A form for the completion of this schedule is provided herewith. Notes to existing financial statements are also sufficient satisfaction of this requirement.

## **Schedule "M" - Projected Profit and Loss Statements**

Provide projected profit and loss statements for three (3) years in the same format as Schedule "K". Statement must include projected interest payments and depreciation expenses. Describe assumptions on which projections were based. The projections should be supported by and be relevant to the narrative contained in Schedule H. *Note: Different programs require projections for different numbers of years into the future. It is important to consult program representatives before investing in the development of financial projections.*

## **Schedule "N" - Projected Cash Flow Statement**

Provide projected cash flow statements, by month, for the first year of operation of the project. *Note: Different programs require projections for different numbers of years into the future. It is important to consult program representatives before investing in the development of financial projections.*

## **Schedule "O" - Projected Realty Taxes**

List realty taxes for the first year of operation of the project. If the project is the subject of a Payment-In-Lieu-Of-Tax (PILOT) Program, describe the details of that agreement and the resulting payment for the first year. Where a project is subject to full taxation, provide an estimate of taxes based on the latest tax rate.

### **Schedule "P" - Bank References**

Provide bank references including name, address, telephone number and contact person.

### **Schedule "Q" - Security Collateral**

List any additional collateral (such as land, buildings, machinery, equipment) available for security. Indicate cost, net book value (cost less depreciation), an estimate of present market value and present loan balance. **For each item of collateral listed, provide a description of all associated liens thereon.**

**Jefferson County Microenterprise Loan Fund  
Employee Questionnaire**

Your business has requested assistance from Jefferson County through the US Department of Housing and Urban Development. A condition of receipt of this assistance is that your business must provide certain information regarding the income of the owner(s) as of the day that assistance was provided. Please provide the information requested below. Your responses will be kept entirely confidential.

COMPANY NAME \_\_\_\_\_

OWNER'S NAME \_\_\_\_\_ DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

Please circle the appropriate number of persons in your family. (Family is defined as all persons living in the same household who are related by birth, marriage or adoption). Check the income range that most closely matches the total of the annualized income(s) of your family. Be sure to indicate an income range **for only your family size.**

	BELOW		BETWEEN		ABOVE
1 Person	_____	\$14,500	_____	\$23,200	_____
2 Persons	_____	\$16,550	_____	\$26,500	_____
3-Persons	_____	\$18,650	_____	\$29,800	_____
4-Persons	_____	\$20,700	_____	\$33,100	_____
5 Persons	_____	\$22,350	_____	\$35,750	_____
6-Persons	_____	\$24,000	_____	\$38,400	_____
7-Persons	_____	\$25,650	_____	\$41,050	_____
8-Persons	_____	\$27,300	_____	\$43,700	_____

The above information provided is true to the best of my knowledge.

SIGNED \_\_\_\_\_ DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

In order to ensure that non-discrimination requirements of this federal program are met, you are requested to complete the following:

"I consider myself to be one of the following." (Check appropriate category)  
 \_\_\_ White \_\_\_ Asian \_\_\_ Black \_\_\_ Hispanic \_\_\_ Native American

Is the head of your household female? \_\_\_ Yes \_\_\_ No

**\*Make additional copies as needed.**

# Schedule E

## Personal Financial Statement

As of: \_\_\_\_\_, 20 \_\_\_\_\_

Complete this form for: (1) each proprietor, or (2) each limited partner who owns 10% or more interest and each general partner, or (3) each stockholder owning 10% 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 \_\_\_\_\_ Business Phone ( ) \_\_\_\_\_

Residence Address \_\_\_\_\_ Residence Phone: ( ) \_\_\_\_\_

City, State, & Zip Code \_\_\_\_\_

Business Name of Applicant/Borrower \_\_\_\_\_

ASSETS	(Omit Cents)	LIABILITIES	(Omit Cents)
Cash on hands & 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. Payment \$ _____	
(Complete Section 8)		Installment Account (other)	\$ _____
Stocks and Bonds	\$ _____	Mo. Payment \$ _____	
(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	\$ _____	Other Liabilities	\$ _____
Other Assets	\$ _____	(Describe in Section 7)	
(Describe in Section 5)		Total Liabilities	\$ _____
		Net Worth	\$ _____
<b>Total</b>	<b>\$ _____</b>	<b>Total</b>	<b>\$ _____</b>

Section 1. Source of income	Contingent Liabilities
Salary	\$ _____
Net Investment Income	\$ _____
Real Estate Income	\$ _____
Other Income (Describe below)*	\$ _____
	\$ _____
	\$ _____
	\$ _____

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.					
Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency	y 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 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			
Name & Address of Title Holder			
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 the 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.

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

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

### Bankruptcy, Litigation and Felony History

Describe any bankruptcy history, litigation history having a material effect on the business solvency, or convicted felony activity associated with the owners, management, or officers of the business.

	YES	NO
1. Are any of the officers, owners, or management of the business presently under indictment, on parole, or probation? If yes, describe below:	_____	_____

---

---

---

---

2. Have any of the owners, officers, or management of the business ever been charged with or arrested for any criminal offense other than a minor traffic infraction? If yes, describe below.	_____	_____
---	-------	-------

---

---

---

---

3. Have any of the owners, officers, or management of the business ever been convicted of any criminal offense, other than a minor traffic infraction? If yes, describe below.	_____	_____
--	-------	-------

---

---

---

---

4. Has the business, its present owners, officers, or management ever been the subject of bankruptcy proceedings? If yes, describe below.	_____	_____
---	-------	-------

---

---

---

---

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name and Title

**Business Plan****Description of the Business**

Describe the business including history if an existing business. Please be sure to include descriptions of the following: type of business; status of business; when did (will) it start; hours of operation; who are your customers; why is your business successful (will succeed); and any seasonal fluctuations in sales or employment. Include significant developments in operation and financial condition. Indicate current number and titles of employees for business start-up; describe how the background of the principals will contribute to the success of the new business.

If applicable, indicate the names and addresses of all concerns that may be parent companies, subsidiaries, or affiliates of the business including concerns in which the business, or any of its principals, hold an interest greater than ten (10%) percent.

**Location of the Business**

Describe the location of the business and be sure to include information about the following: physical address of business; is site leased or owned; physical features and characteristics of the site including size and use of space; description of neighborhood and surrounding businesses; any renovations needed; and the reason for choosing this location.

**Management**

Describe the business background, management experience, and education for each key partner or key manager with 10% or greater interest in the business. Include both formal and informal learning experience, which have a bearing on your managerial abilities.

Include a description of the following: why this type of business was chosen; direct operational and/or managerial experience in this type of business; organizational structure (including a description of who does what); time devoted to running the business; and local resources available to management.

**Market**

Describe in detail who exactly is your market; where your market is located; present size and growth potential of the market; and the price you anticipate getting for your product or service. Also, include information on how you will attract and keep your segment of the market (including advertising); how you will promote your product or service; trends in your industry; future goals; and how the business can expand.

Describe business objectives in terms of production, sales, and earnings for the proposed business or project. An emphasis should be placed on describing the specific marketing actions that the business will take to meet its projected earnings in its competitive environment. Include letters of intent from prospective suppliers or any firm contracts for your business. This schedule should be supported by the projections contained in later schedules.

**Competition**

Describe in detail who your competition is and include information on the following: what products/services they offer; where their business and market are located; what their reputation or image is; what their marketing strategies are and how their business is doing. Also, discuss how your operation will be different and what you have learned from watching them.

## Employment Plan

(A)	(B)	(C)	(D)	(E)	(F)	(G)
Job Title	Annual or Hourly Wages	Current Number of Positions	Jobs Created: Year One	Jobs Created: Year Two	Jobs Created: Year Three	Total Jobs to be Created
<b>TOTALS:</b>						

**Instructions:**

- Column A:** Insert the job titles that exist within the company at the time of application, as well as any job titles that will be established as a result of the project.
- Column B:** Indicate the entry level wage for each listed job title either in terms of hourly pay or annual salary.
- Column C:** For each listed job title insert the number of positions that exist at the time of application.
- Column D:** Insert the number of jobs to be created during year one of the project for each listed job title.
- Column E:** Insert the number of jobs to be created during year two of the project for each listed job title.
- Column F:** Insert the number of jobs to be created during year three of the project for each listed job title.
- Column G:** Indicate the total number of jobs to be created for each listed title as a result of the project. (Column D + Column E + Column F = Column G)

**Use as many copies of this form as necessary.**

### Outstanding Debt Details

Describe outstanding debt for the business including installment loans, notes, mortgages payable and capitalized leases, showing to whom payable, balance, interest rate, maturity date, monthly payment, security and whether current or delinquent. **If business is a sole proprietorship, provide personal indebtedness information.** Fill out as many sections as necessary. Make additional copies of this sheet if necessary.

---

Debt Type: _____ (installment loan, mortgage, lease, etc.)	Lender: _____ (bank, individual, etc.)
Term (Months): _____	Interest Rate: _____ %
Date: _____	Maturity Date: _____
Original Amount: _____	Current Balance: _____
Collateral _____	
Supporting Debt: _____	
Monthly Payment: _____	Current: _____ YES / NO

---

Debt Type: _____ (installment loan, mortgage, lease, etc.)	Lender: _____ (bank, individual, etc.)
Term (Months): _____	Interest Rate: _____ %
Date: _____	Maturity Date: _____
Original Amount: _____	Current Balance: _____
Collateral _____	
Supporting Debt: _____	
Monthly Payment: _____	Current: _____ YES / NO

---

Debt Type: _____ (installment loan, mortgage, lease, etc.)	Lender: _____ (bank, individual, etc.)
Term (Months): _____	Interest Rate: _____ %
Date: _____	Maturity Date: _____
Original Amount: _____	Current Balance: _____
Collateral _____	
Supporting Debt: _____	
Monthly Payment: _____	Current: _____ YES / NO

---

Signed \_\_\_\_\_ Date \_\_\_\_\_

**CERTIFICATION AND AUTHORIZATION TO RELEASE CREDIT INFORMATION**

\_\_\_\_\_, being duly sworn, deposes and says: that (s)he is the president of \_\_\_\_\_, the Project occupant (the Company) described in the foregoing application; that (s)he has read the foregoing application and knows the contents thereof; that the same is true to his/her own knowledge except as to the matters stated therein to be alleged upon his/her information and belief, and as to those matters (s)he believes it to be true; that to the best of here/his knowledge (s)he is in compliance with all federal and state legislation dealing with the hiring of illegal aliens and equal employment opportunity; that (s)he has read and understood rule 1 of the \_\_\_\_\_ (Lending Agency) as heretofore set forth; and that the execution of this application has been duly authorized by the board of directors of the Company; and authorizes the lender to investigate and obtain a report concerning my (our) credit for the purpose of processing and underwriting my (our) loan application.

\_\_\_\_\_  
President, Project Occupant

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public

Applicant's Full Legal Name \_\_\_\_\_

Applicant's Street Address \_\_\_\_\_

City/State (Province)/Country, Postal Code \_\_\_\_\_

Current Place of Employment \_\_\_\_\_

Current Employment Address \_\_\_\_\_

Previous Employer \_\_\_\_\_

Previous Employer Address \_\_\_\_\_

Applicant's SS# or SIN# \_\_\_\_\_

Applicant's Date of Birth \_\_\_\_\_

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

**To Be Completed By The Financing Agency**

Credit Reporting Agency \_\_\_\_\_

Credit Report Requested \_\_\_\_\_

Credit Report Received \_\_\_\_\_

## NORTH COUNTRY ALLIANCE FORM IA

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 chose not furnish it, we are required to note the race/national origin of individual applicants on the basis of visual observation or surname.

Race: (mark one or more)

White

---

Black or African American

---

American Indian / Alaska Native

---

Asian

---

Native Hawaiian or Other Pacific Islander

---

Ethnicity: (mark one)

Hispanic or Latino

---

Not Hispanic or Latino

---