



SMALL BUSINESS LOAN APPLICATION

Yuba-Sutter Economic Development Corporation offers a business assistance loan fund program for businesses starting or expanding in the Yuba-Sutter area. The program is designed to fill the financing gap between private debt financing and private equity. Funds are provided to create economic benefit in the Yuba-Sutter region through increased revenues and the creation and/or retention of jobs.

The information you provide must be truthful and accurate to the best of your knowledge. Failure to provide truthful and accurate information or the making of any material misrepresentation may constitute a fraud and will result in the immediate termination of the application process.

The application and all required attachments, along with a \$250 non-refundable application fee, should be completed and returned to Yuba-Sutter Economic Development Corporation at the address below. **INCOMPLETE APPLICATION PACKAGES WILL NOT BE ACCEPTED.** For additional information contact Yuba-Sutter Economic Development Corporation at (530) 751-8555 or 950 Tharp Road, Ste. 1303, Yuba City, CA 95993 or visit our website at www.ysecdc.org.

YUBA-SUTTER ECONOMIC DEVELOPMENT CORPORATION
950 Tharp Road, Suite 1303, Yuba City, CA 95993
(530) 751-8555 ■ www.ysecdc.org

Who can apply?

Eligible applicants are private, for-profit businesses including, but not limited to, corporations, partnerships, sole proprietors, and certain cooperatives organized for the conduct of business.

What can the funds be used for?

Funds can be used to purchase land and buildings, machinery and equipment, an existing business, working capital for purchase of inventory, supplies, payment of wages, marketing and advertising or start-up costs.

What are the job creation requirements?

Generally speaking, YSEDC wants each business loan participant to create one full-time job or two part-time jobs for every \$35,000 borrowed. The loan participant could have up to the full loan term to create the jobs.

What are the equity requirements?

Minimum owner equity in the project must be ten percent for existing businesses and at least 20 percent for start up businesses.

Are personal guarantees required?

Personal guarantees may be required from individuals with more than a 20 percent ownership interest.

What types of collateral are required?

Various types of collateral can be accepted. This may include Deeds of Trust on land and buildings, Liens on machinery, equipment and fixtures, Lease assignments and Vehicles. In general, an applicant will be required to pledge at least \$1.00 in collateral for each \$1.00 borrowed.

Are there any fees involved?

Applicants will be required to pay a \$250 non-refundable application fee. Applicants will also be required to pay loan fees of approximately 200 basis points (two percent of the loan amount), plus any related costs including, but not limited to, attorneys fees, appraisals, credit reports, recording fees, title insurance premiums and environmental review/mitigation costs. Loan fees can be included in the finance package.

What are the interest rates?

Interest rates may be influenced by specific project need, strength of the application and collateral position but are always fixed. Our current interest rate ranges between 8-10%.

What is the loan term?

Determined by project and financial need, the term of other project lenders, the economic life of assets being financed or a combination of these factors.

How long must I wait before receiving my loan?

Applications are generally approved or declined within 30 days of receipt of a complete application package. Approved applications can generally be funded within 90 days of receipt of a complete application package.

What are the minimum and maximum loan amounts?

The minimum loan amount required is \$25,000. The maximum loan amount is generally \$150,000.

Loan Application Checklist

Applicant's Name:

In an attempt to expedite the loan process, the following is a list of items required to evaluate your loan request:

Enclosed

- Completed Loan Application (must have DUNS #)
- Non-Refundable loan application fee of \$250. Please make check payable to: YSEDC
- Personal Financial Statements from all 20% or more owners and all guarantors. Include supporting documents to substantiate your numbers. (ex.-bank statements, life insurance policy, retirement account statements, etc.)
- 3 years Personal Tax Returns including all schedules for all 20% or more owners and all guarantors
- Personal Resumes for all 20% or more owners and all guarantors
- 3 years Business Tax Returns including all schedules
- 3 years Business Income Statements and Balance Sheets including interim Income Statement and Balance Sheet
- 3 years Business Financial Projections with narrative to support the borrower's estimates. Include Income Statements, Cash Flow Statements and Balance Sheets. Submit in Microsoft Excel format.
- Business Debt Schedule
- Business Accounts Receivable & Accounts Payable Aging Reports
- Business Plan
- Copy of Business License, Fictitious Business Name Statement, professional licenses and/or permits as required
- Lease and/or Purchase Agreement for the project site. Include escrow instructions for real estate being purchased.
- If purchasing equipment/machinery with loan proceeds, at least two 3rd party cost estimates
- Appraisals (if applicable, for Real Estate, Titled, Business Equipment/Inventory and Possessory property)
- For Corporations, please include:
 - Articles of Incorporation
 - Corporate Bylaws
 - Corporate Borrowing Resolution
- For Limited Liability Companies, please include:
 - Articles of Organization
 - Certificate of Registration
- For Partnerships, please include:
 - Partnership Agreement and Authorization to Borrow
- For a Franchise, please include:
 - Copy of Franchise Agreement
 - FTC Disclosure Statement
- Completed form no: USDA 1940-20 "Request for Environmental Information" (form enclosed)
- Signed Application Certification and Credit Authorization (form enclosed)
- Signed Authorization for Release of Information (form enclosed)
- Signed Fax/Email Consent Form (form enclosed)
- One hour consultation with the Small Business Development Center

Applicant Information

Company Name/DBA			
Street Address		City	State Zip Code
Phone	Fax	Email	Website
Date Company was Started:		Tax ID #:	DUNS #:
Type of Organization: <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Other (describe):			
Business Status: <input type="checkbox"/> Purchase of Existing Business <input type="checkbox"/> Expansion of Existing Business <input type="checkbox"/> New Business (Start-up)			
Number of Current Employees: #Part Time: #Full Time: Projected Number of Employees After Financing:			
Type of Business: <input type="checkbox"/> Service <input type="checkbox"/> Retail <input type="checkbox"/> Wholesale <input type="checkbox"/> Manufacturing <input type="checkbox"/> Distribution <input type="checkbox"/> Other (describe):			
Has the company ever relocated? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, why?			
Have you or any officers of the company ever been involved in bankruptcy or insolvency proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please attach additional page explaining the details			
Is the Business Applicant liable as a guarantor, co-maker or endorser on an existing or outstanding loan or obligation not listed in the financial statement? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what is the contingent liability and date of occurrence _____			
Is any Principal, Guarantor or Co-applicant liable as guarantor, co-maker or endorser on an existing or outstanding loan or obligation not listed in their financial statement? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what is the contingent liability and date of occurrence _____			

Owners/Principals

Name	Title	Ownership %	Social Security #
Street Address		City	State Zip Code
Name	Title	Ownership %	Social Security #
Street Address		City	State Zip Code
Name	Title	Ownership %	Social Security #
Street Address		City	State Zip Code
Name	Title	Ownership %	Social Security #
Street Address		City	State Zip Code

Affiliated Companies

List below all business concerns in which the applicant company or any of the individuals listed above have 20 percent ownership or controlling interest.

Company Name	Owned By	Ownership %
Street Address		State Zip Code

Company Name	Owned By	Ownership %
Street Address		State Zip Code

Project Information

Briefly describe your project:

Indicate all sources of financing for the project in columns below and total at bottom. Please be as specific as possible.

Sources and Uses of Funds	*Owner Injection	YSEDC Loan Request	Bank	Other	TOTALS
Real Property Acquisition					
Business Acquisition					
Machinery/ Equipment Acquisition					
Inventory					
Working Capital					
Debt Refinance					
Leasehold Improvements					
Loan Fees/Costs					
Other (Explain)					
TOTALS	\$	\$	\$	\$	\$

*10% minimum owner injection required for existing business, 20% for start-up businesses.

Participating Lenders

Financial Institution	Loan Officer	Telephone
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Collateral Offered for Loan

Type	Estimated Value	Description	Owner

Contact List

Primary Bank		Contact	Phone	
Street Address	City	State	Zip Code	
Accountant		Contact	Phone	
Street Address	City	State	Zip Code	

Attorney/Law Firm		Contact	Phone		
Street Address		City		State	Zip Code
Insurance Company		Contact	Phone		
Street Address		City		State	Zip Code

Financing/Trade References

Business Name	Contact	Phone	City/State	Account #
1				
2				
3				

Application Certification and Credit Authorization

I/we certify that all information in this application and all information provided in support of this application is true and complete to the best of my/our knowledge and belief.

I/we authorize Yuba-Sutter Economic Development Corporation (YSEDC) to obtain business and consumer credit reports and conduct any other inquiries deemed necessary to determine the creditworthiness of the applicant business.

I/we certify that no owner or officer of my/our company is currently an employee or director of the YSEDC, HUD, HCD, or USDA and that YSEDC has no ownership interest in my/our company.

I/we certify that as consideration for any management and technical assistance that may be provided, to waive all claims against the YSEDC, its officers, directors and/or members.

Each person signing below certifies that he/she is signing on behalf of the applicant business in the capacity indicated next to the signer's name and such signer is authorized to execute this application on behalf of the applicant business.

Authorized Signer	Print Name & Position Title	Date
Authorized Signer	Print Name & Position Title	Date
Authorized Signer	Print Name & Position Title	Date
Authorized Signer	Print Name & Position Title	Date

Authorization for Release of Information

To Whom It May Concern:

In connection with a loan application that I/we have made through Yuba-Sutter Economic Development Corporation (YSEDC), I/we hereby authorize you to release any information requested by YSEDC. Such information may include, but may not necessarily be limited to, employment and income verification, credit histories and balances, loan/obligation payment histories and balances, and account deposit histories and balances.

A photographic copy of this authorization may be deemed to be the equivalent of the original document and may be substituted as a duplicate original. Your prompt reply will help to expedite my loan transaction. Thank You.

Signature	Print Name	Social Security Number	Date
Signature	Print Name	Social Security Number	Date
Signature	Print Name	Social Security Number	Date
Signature	Print Name	Social Security Number	Date

Personal History

This form should be completed by each owner, partner, or stockholder with 20 percent or more ownership in applicant company and any person or entity providing a guaranty of the loan.

First Name		Middle Name	Last Name		Maiden Name
Social Security Number		Date of Birth	Place of Birth		U.S. Citizen?
Residence Phone		Business Phone		Cellular Phone	
Current Residence Street Address		City		State	Zip
Previous Residence Street Address		City		State	Zip
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Other					
Have you any dependents? <input type="checkbox"/> Yes <input type="checkbox"/> No					

Employment History

1) Company Name/Location	From	To	Job Title
Duties			
2) Company Name/Location	From	To	Job Title
Duties			
3) Company Name/Location	From	To	Job Title
Duties			

Education

(College or Technical Training)

Institution Name and Location	Dates Attended- From / To	Major	Degree or Certificate

Military Service Background

Branch	From	To	Honorable Discharge? <input type="checkbox"/> Yes <input type="checkbox"/> No
Rank at Discharge	Major Assignment/Accomplishment		
Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Community Work/Affiliations

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Demographic Data

The following information requested below is voluntary and for statistical purposes only. It will not impact the credit decision by the YSEDC.

Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Female Head of Household: <input type="checkbox"/> Yes <input type="checkbox"/> No
Race: <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American	<input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> White
Ethnicity: <input type="checkbox"/> Hispanic <input type="checkbox"/> Not Hispanic	Veteran Status: <input type="checkbox"/> Non-Veteran <input type="checkbox"/> Veteran <input type="checkbox"/> Disabled Veteran
Physically challenged/handicapped: <input type="checkbox"/> Yes <input type="checkbox"/> No	

Personal Financial Statement

This form should be completed by each owner, partner, or stockholder with 20 percent or more ownership in applicant company and any person or entity providing a guaranty of the loan.

As of _____, _____

Name Business Phone Residence Phone

Residence Address City, State, & Zip Code

Business Name of Applicant/Borrower

Are you requesting this financial accommodation: Separately Jointly with your spouse

ASSETS		LIABILITIES	
Cash on Hand & in Banks	\$	Accounts Payable	\$
Savings Accounts		Notes Payable to Banks and Others (Describe in Section 2)	
IRA or Other Retirement Account		Installment Account (Auto) Mo. Payments _____	
Life Insurance-Cash Surrender Value Only (Complete Section 8)		Installment Account (Other) Mo. Payments _____	
Stocks and Bonds (Describe in Section 3)		Loan on Life Insurance	
Real Estate (Describe in Section 4)		Mortgages on Real Estate (Describe in Section 4)	
Automobile-Present Value		Unpaid Taxes (Describe in Section 6)	
Other Personal Property (Describe in Section 5)		Other Liabilities (Describe in Section 7)	
Other Assets (Describe in Section 5)		Total Liabilities	
		Net Worth	
Total	\$	Total	\$

Section 1. Source of Income		Annual Expenditures		Contingent Liabilities	
Salary		Property Taxes/Assessments		As Endorser or Co-Maker	
Net Investment Income		Income & Other Taxes		Legal Claims & Judgments	
Real Estate Income		Mortgage Payments & Interest		As Guarantor	
Interest Income		Other Contract Payments		Provision for Federal Income Tax	
Other Income (describe below)*		Insurance		Other Special Debt	
		Living Expenses		<input type="checkbox"/> Check here if None	
Total Income	\$	Total Expenditures	\$	Total Contingent Liabilities	\$

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 & 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 & signed.)					
	Property A	Property B	Property C		
Type of Property					
Legal Owner					
Property Address					
Date Purchased					
Original Cost					
Present Market Value					
Name & Address of Mortgage Holder					
Mortgage Account Number					
Present Mortgage Balance					
Amount of Payment per Month/Year					
Status of Mortgage					
1 st or 2 nd lien					
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/we authorize YSEDC to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I/we 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/we understand FALSE statements may result in forfeiture of benefits and possible prosecution by the U.S. Attorney General.					
Signature	Name (Print)	Title	Date		
Signature	Name (Print)	Title	Date		

History of Business	
When and how was the business established?	
Types of products and services	
Customer profile	
List key customers	List major competitors
Major suppliers	Geographical sales area
Major past accomplishment	Future plans for growth/expansion
How do you market your product or service?	
How will this loan benefit your company?	
Will the funding of the loan create new employment opportunities?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, state how and what positions will be created:	

BUSINESS DEBT SCHEDULE

Company Name	Signature X	Date*
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Indebtedness: Furnish the following information on all installment debts, contract, notes, and mortgages payable. Indicate by an asterisk (*) items to be paid by loan proceeds. Do not include accounts payable or accrued liabilities.

Creditor Name/Address	Original Date	Original Balance	Current Balance	Interest Rate	Monthly Payment	Maturity Date	Collateral / Security	Current or Delinquent

MONTHLY PROJECTED INCOME STATEMENT

Company Name	Signature X	Date
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Projections must be completed in Excel format and available electronically. Please copy worksheet for additional years.

Year _____	Jan.	Feb.	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Gross Sales or Receipts													
Less: Cost of Goods Sold													
Gross Profit													
Expenses													
Rent – Property													
Rent – Equipment													
Insurance													
Utilities													
Advertising													
Supplies													
Taxes & Licenses													
Repairs & Maintenance													
Accounting & Legal													
Travel & Auto													
Salaries-paid to others													
Salaries-paid to officers													
Depreciation													
Interest Expense													
Other:													
Other:													
Other:													
Total Expenses													
Net Profit (Subtotal)													
Less: Debt Service													
Less: Owner Draw													
Net Profit													

AGING OF ACCOUNTS RECEIVABLES AND PAYABLES

Company Name

Please complete this form with information that matches the most current balance sheet being submitted as a part of this application.

ACCOUNTS RECEIVABLE

	RECEIVABLE AMOUNT	PERCENT OF TOTAL
0 – 30 DAYS		
31 – 60 DAYS		
61 – 90 DAYS		
91 AND OVER		
TOTAL AMOUNT	\$	100%

ACCOUNTS PAYABLE

	PAYABLE AMOUNT	PERCENT OF TOTAL
0 – 30 DAYS		
31 – 60 DAYS		
61 – 90 DAYS		
91 AND OVER		
TOTAL AMOUNT	\$	100%

As of Date

Signed

Date

FAX/E-mail CONSENT FORM

On July 3, 2003 the Federal Communications Commission (FCC) issued new rules for the federal Telephone Consumer Protection Act (TCPA). Published in the Federal Register on July 25, 2003, these new rules are scheduled to become effective on August 25, 2003.

These new rules stipulate that written consent must be obtained prior to sending faxes that contain ... “any material advertising the commercial availability or quality of any property, goods, or services”. This could include program/seminar/meeting announcements, program reports and other information relative to YSEDC products and services.

To ensure YSEDC is in compliance with these stipulations, we are requesting that you complete and sign this form and return it with your completed application to 950 Tharp Road, Suite 1303, Yuba City, CA 95993.

Name	
Organization	
Street Address	
City/State/Zip	
Fax Number	
Phone Number	
E-mail	

I understand that by providing my fax number and e-mail address along with my signature, I consent that I, as well as staff members at my organization, may receive faxes and e-mail messages sent by or on behalf of YSEDC.

Signature	Date
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Title

REQUEST FOR ENVIRONMENTAL INFORMATION

Item 1a. Has a Federal, State or Local Environmental Impact Statement or Analysis been prepared for this project?
 Yes No Copy attached as EXHIBIT I-A
1b. If "No" provide the information requested in Instructions as EXHIBIT I.

Item 2. The State Historic Preservation Officer (SHPO) has been provided a detailed project description and has been requested to submit comments to the appropriate Rural Development Office.
 Yes No Date description submitted to SHPO _____

Item 3. Are any of the following land uses or environmental resources either to be affected by the proposal or located within or adjacent to the project site (s)? *(Check appropriate box for every item of the following checklist).*

	Yes	No	Unknown		Yes	No	Unknown
1. Industrial	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	19. Dunes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Commercial	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	20. Estuary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Residential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	21. Wetlands	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Agricultural	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	22. Floodplain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Grazing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	23. Wilderness <i>(designated or proposed under the Wilderness Act)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Mining, Quarrying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
7. Forests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	24. Wild or Scenic River <i>(proposed or designated under the Wild and Scenic Rivers Act)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Recreational	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
9. Transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	25. Historical, Archeological Sites <i>(Listed on the National Register of Historic Places or which may be eligible for listing)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Parks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
11. Hospital	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	26. Critical Habitats <i>(endangered/threatened species)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Schools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	27. Wildlife	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Open spaces	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	28. Air Quality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Aquifer Recharge Area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	29. Solid Waste Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Steep Slopes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30. Energy Supplies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Wildlife Refuge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	31. Natural Landmark <i>(Listed on National Registry of Natural Landmarks)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Shoreline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
18. Beaches	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	32. Coastal Barrier Resources System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Item 4. Are any facilities under your ownership, lease, or supervision to be utilized in the accomplishment of this project, either listed or under consideration for listing on the Environmental Protection Agency's List of Violating Facilities? Yes No

	Signed:	
(Date)		(Applicant)
		(Title)

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number of this information collection is 0575-0094. The time required to complete this information collection is estimated to average 6 to 10 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.