

# Ripley County EDC Revolving Loan Program

## Section I: Business Information

Owner(s) Name:                      Home Address                      Home Phone                      Email Address

---

---

---

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_ Zip: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Fax# \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Briefly describe the business product or service: \_\_\_\_\_

---

---

Organization Type:

"S" Corporation       "C" Corporation       Other  
 Partnership       Sole Proprietorship       Start up business

Federal ID# \_\_\_\_\_ Date Business Established \_\_\_\_\_

Any business judgements, bankruptcy, unsettled lawsuits, for the business or the owners as individuals?  
 Yes       No

If yes, please explain:

---

---

Veteran: \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

Race : \_\_\_\_\_

**Section II: Employment Information:**

Employees \_\_\_\_\_ Avg. Hourly Rate \_\_\_\_\_ Hours Per week \_\_\_\_\_

# FULL TIME \_\_\_\_\_ # PART TIME \_\_\_\_\_ #OWNER & FAMILY \_\_\_\_\_

Total number of new \_\_\_\_\_ or retained \_\_\_\_\_ jobs that will be created. @ hourly rate \_\_\_\_\_ hours per week \_\_\_\_\_

**Section III: Project information:**

Total Project Cost \_\_\_\_\_ Amount of Loan Requested \_\_\_\_\_

Other Sources of funding (if applicable) \_\_\_\_\_

Repayment Term Requested in Months: \_\_\_\_\_

Project Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Use of funds:	Description	Loan Funds	Other Funds
Equipment:	_____	_____	_____
Fixtures:	_____	_____	_____
Acquisition:	_____	_____	_____
Construction:	_____	_____	_____
Inventory:	_____	_____	_____
Other:	_____	_____	_____
<b>TOTAL</b>		_____	_____

Describe the Anticipated sources of repayment \_\_\_\_\_

Proposed Collateral: \_\_\_\_\_

What measures have been taken to obtain traditional financing? \_\_\_\_\_

---

Contacts made: \_\_\_\_\_  
\_\_\_\_\_

Please provide 3 credit references (Name, address, phone):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Section V: Other Financial Information**

Do you currently have any invoices more than 30 days past due? \_\_\_\_\_ Yes \_\_\_\_\_No

Items needed to complete loan application:

2 years of tax returns

Business Plan

Financial Statement for previous year.

Verification of use of funds (copy of new contract, estimate for new equipment, repairs, etc.).