Southernmost Illinois Delta Empowerment Zone, Inc. Micro Enterprise Revolving Loan Fund Program Requirements

Requirements and Terms for Loans Up to \$5,000

- Loan funds can be used to purchase machinery, equipment, working capital, construction or acquisition of buildings or property.
- ✓ Maximum term of 5 years.
- ✓ Complete sections of the application form listed on document checklist

Requirements and Terms for Loans between \$5,001 and \$50,000

- Loan funds used to purchase machinery, equipment and for working capital may be borrowed for up to 5 years.
- Loan funds used for construction or acquisition of buildings or property may be borrowed for up to 15 years.
- Submit a completed business plan along with the attached application form. The Business Plan submitted must be developed with technical assistance from the Shawnee Community College Small Business Development Center, Southern Illinois University Small Business Development Center, U of I Extension, a Certified Public Accountant, etc.
- ✓ Complete sections of the application form listed on the document checklist.
- Loans must be closed within 90 days of approval or a new application along with application fee must be submitted.

Requirements and Terms for ALL Loans

- ✓ Interest is fixed at 4.5%
- ✓ Owner/Partners must contribute 10% equity in the project.
- ✓ A \$50 non-refundable application fee must accompany the application when it is submitted to the SIDEZ office.
- ✓ A 1% closing fee will be charged at the time the loan is closed. This fee may be added to the loan amount if needed.
- ✓ Applicant will pay for all other closing fees including recording fees, filing fees, search fees, etc.
- ✓ There must be sufficient collateral to cover the loan.
- Replacement value insurance should be maintained on all equipment, property, or machinery in at least the value of the equipment, property, or machinery.

Approval Process

Step 1

Request loan application and meet with SIDEZ Financial Officer to review loan requirements. Meet with agency to develop business plan if required. Compile information needed for application.

Step 2

Submit loan application and required documents with \$50 application fee to SIDEZ office. Application must be received in the SIDEZ office by the 20th of the month to be considered at the following month's Board of Directors meeting. Board meetings are held on the third Thursday of each month.

Step 3

Application will be presented to SIDEZ Loan Review Committee.

Step 4

Upon approval of the Loan Review Committee, the loan is presented to the SIDEZ Board of Directors for final approval.

Step 5

Letter of terms and conditions is signed by borrower and SIDEZ. When conditions of the letter are met, loan will be made. Applicant attends loan closing.

Micro Enterprise Revolving Loan Fund Document Checklist

Please use this checklist to determine what sections of the application and what additional documentation you are **required** to submit.

Loans Up to \$5,000

Application Form

- ____ Section 1
- ____ Section 2
- ____ Section 4
- ____ Section 5
- ____ Section 6
- ____ Section 7
- ____ Section 8
- ____ Section 9
- _____ Section 10 (provide for all guarantors, partners and owners)
- ____ Section 11

_____ State and Federal Personal Tax Returns (Provide copies for the past 2 years, also provide for all guarantors, partners and owners. If not required to file taxes, you must submit copies of W-2 along with explanation about why you were not required to file.)

Loans between \$5,001 - \$50,000

Application Form

- ____ Section 1
- ____ Section 2
- ____ Section 3
- ____ Section 5
- ____ Section 6
- ____ Section 7
- ____ Section 8
- ____ Section 9
- _____ Section 10 (provide for all guarantors, partners and owners)
- ____ Section 11

___ Business Plan (should include the following components)

Business Description

History of Business, if applicable

Marketing Plan, including the following

- 1. Description of geographic market area.
- 2. Description of targeted customers.

Competition

Resumes

Licenses/Certifications to Conduct Business/Permits (if applicable)

Start Up/Expansion Expenses

Monthly & Annual Operating Expenses

_____ State and Federal Personal Tax Returns (Provide copies for the past 2 years, also provide for all guarantors, partners and owners. If not required to file taxes, you must submit copies of W-2 along with explanation about why you were not required to file.)

_____ Business Tax Return (previous 2 years, if applicable)

_____ Year to Date Business Financial Statement (if applicable)

____ Projected Income and Balance Sheets (for first two year's of operation)

Southernmost Illinois Delta Empowerment Zone, Inc. Microenterprise Loan Application

SIDEZ is an equal opportunity lender.

Section 1 – General Information					
Name	Phone ()				
Address	City State Zip				
Social Security Number	Date of Birth				
Race American Indian/Alaskan Native Asian Black/African A	American DWhite				
□Hawaiian/Pacific Islander □Other					
Ethnicity	□Male □Female				
This information is requested by SIDEZ to assure the Federal Government, and prohibiting discrimination against applicants on the basis of race, color, nation complied with. You are not required to furnish this information, but are encoura- your application or to discriminate against you in any way. However, if you of ethnicity and sex of individual applicants on the basis of visual observation or su	al origin, religion, sex, marital status, age and handicap are iged to do so. This information will not be used in evaluating choose not to furnish it, SIDEZ is required to note the race,				
Business Name	Phone ()				
Address	City State Zip				
Federal Tax ID Number	D.U.N.S. Number				
Are Facilities Owned or Leased?	Monthly Payment				
Name of Landlord	Phone ()				
Business Structure Sole Proprietorship Partnership S Corporation C Corporation					
Section 2 – Additional Company Owners (Attach addit					
Name	Phone ()				
Address	City State Zip				
Social Security Number	Date of Birth				
Name	Phone ()				
Address	City State Zip				
Social Security Number	Date of Birth				
Section 3 – Loan Information					
Amount RequestedHow will you use the funds?					
Collateral Value (Please	submit an appraisal less than 12 months old for real estate)				

Castion	4 D.		Info	
Section	4 – Bl	usiness	s into	rmation

Amount Requested \$	_What Specific Items Will Be Purchased with Loan Proceeds and How Much do
they Cost?	

How Long Do You Expect it Will Take to Pay the Loan Back? (Month, years, etc. Please note that final terms will be determined by SIDEZ.)_

How Often Would You Be Able to Make Payments? (Once a week, every other week, once a month, etc.)

Describe the Business You Want to Start

Where Will Your Business Be Located?

What Are Your Operating Hours? _____

Who are Your Customers?_____

Have You Had Any Special Training or Taken any Classes that have Expanded Your Knowledge About this Particular Kind of Business? If so, Please Describe. __

How Do You Plan to Market Your Business?_____

List Your Competitors and What Their Strengths and Weaknesses Are:

Strengths: _____

Competitor #1: _____

Weaknesses:



Competitor #2:								
Strengths:								
Weaknesses:								
Competitor #3:								
Strengths:								
Weaknesses:								
Section 5- Credit F	References (E	3anks, Utilities, et	c., do not includ	le credit	card com	panies. Pleas	se provid	de three
credit references for each Name	owner/partner on	a separate shee	t.)	one ()			
)	Ctata	7:0	
Address			Cit	-	/ienna	State	Zip	
Name				one ()	01.1		
Address			Cit	•		State	Zip	
Name				one ()			
Address			Cit	у		State	Zip	
Section 6 - Owner and type of equity, such a	's Equity (List s cash, equipmer	all business own it, etc.)	ers who are con	tributing	g equity to	the project. I	nclude tl	ne value
Name		Value \$	Ту	ре				
Name		Value \$	Ту	ре				
Section 7 – Prima	ry Financial	Institution (p	lease list for eac	h owne	r/partner,	use a separat	e sheet	of paper if
necessary.)								
Name Address			Phone City	Э ()	State	Zip	
Primary Contact				of Acco	ount	Slale	ΖIΡ	
Section 8 – Busin	ness Start-U	p/Expansior				Funds (plea	ase con	nplete the
attached form)		· ·				, i		•
	·							
Section 9– Operat	ing Expense	S (Complete the	attached Month	ly and A	nnual Ope	erating Staten	nent)	
Section 10 Day	oonal Einon	aial Statama						
Section 10 – Pers Personal Financial Statem					ached Fir	nancial Stater	nent.	Provide a
Section 11 - Emple	oyment Fore	cast Informa	ation					
Number of Employees								
Skilled	Current	Year 1	Year 2	Ye	ear 3			
		<u> </u>						
Unskilled								
Full Time								
Part Time		<u> </u>						
Job Titles & Description	าร:							

START UP/EXPANSION COSTS

Land Acquisition	\$
Building Acquisition	\$
Building Rehabilitation	\$
Building Construction	\$
New Machinery & Equipment	\$
Used Machinery & Equipment	\$
Inventory	\$
Supplies	\$
Working Capital	\$
Other	\$
Total Project Costs	\$

Sources of Funds			
Owner Contribution	\$		
Southernmost Illinois Delta Empowerment Zone, Inc.			
Other Sources	_\$		
Total Sources of Funds	\$ \$		

Line Item	
ncome	-
ales	\$
ess Cost of Materials	\$
otal Income	\$
xpenses	
mployee Salaries/Wages	\$
ayroll Taxes	\$
epairs and Maintenance	\$
dvertising	\$
upplies	\$
Itilities (Water, Gas, etc.)	\$
elephone	\$
ccounting and Legal	\$
lent	\$
axes	\$
nsurance	\$
oan Payment (principal & interest)	\$
liscellaneous	\$
icense & Fees	\$
otal Expenses	\$
let Profit (Income Less Expenses)	\$

Annual Operating Statement INCOME/EXPENSES				
Line Item				
Income				
Sales	\$			
Less Cost of Materials	\$			
Total Income	\$			
Expenses				
Employee Salaries/Wages	\$			
Payroll Taxes	\$			
Repairs and Maintenance	\$			
Advertising	\$			
Supplies	\$			
Utilities (Water, Gas, etc.)	\$			
Telephone	\$			
Accounting and Legal	\$			
Rent	\$			
Taxes	\$			
Insurance	\$			
Loan Payment (principal & interest)	\$			
Miscellaneous	\$			
License & Fees	\$			

Expenses	\$
Profit (Income Less Expenses)	\$

Total

Net

Southernmost IL Delta Empowerment Zone Loan Information

Amount of Loan Request _____

Term Request_____

Requested Payment Method _____(Monthly, Quarterly, Annual)

Requested 1st Payment _____

Collateral Description

Collateral will be valued as follows: Real Estate: 90% of appraised value or purchase price, the lesser of the two Machinery/Equipment: 75% of market value* Inventory/Supplies: 50% of market value* Accounts Receivable: 60% of book value with a maximum of 90 days past due

Include cost estimates for equipment and machinery.

Appraisals for real estate must be submitted to SIDEZ by the appraiser.

Please provide a legal description (preferably a copy of the property warranty deed) for real estate.

*Market value – purchase price or replacement cost – **must be documented**.

Type of Collateral	Value	SIDEZ Lien Position

Personal Financial Statement

for

(name)

Complete this form for each proprietor, partner or any other person providing guaranty on the loan.

As of _____, 200___

Assets		Liabilities	
Cash and Savings	\$	Accounts Payable	\$
IRA Or Retirement	\$	Credit Cards (Total)	\$
Life Insurance (Cash Salue)	\$	Auto Installment Account	\$
Stocks & Bonds	\$	Real Estate Payable	\$
Automobiles	\$	Loan on Life Insurance	\$
Machinery & Equipment	\$	Unpaid Taxes	\$
Real Estate	\$	Other Liabilities	\$
Other Personal Property	\$	Total Liabilities	\$
Total Assets	\$	Net Worth (total assets minus total liabilities)	\$
Sources of Income		·	
Salary	\$	Source of Salary	
Net Investment Income	\$		
Real Estate Income	\$		
Other Income (describe below			
	e		

*Alimony or Child Support Payments Do Not Need to Be Disclosed in Other Income Unless It is Desired to Have Such Payments Counted Towards Income

Notes Payable to Bank & Others

Name & Address of Noteholder	Original Balance	Current Balance	Payment Amount & Frequency	Collateral

Contingent Liabilities

Describe Any Liabilities in Which you are an Endorser or Co-Maker

Real Estate Owned (List each parcel separately. Use a separate sheet if more room is needed.)

	Property A	Property B	Property C
Type of Property			
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Balance			
Payment Amount & Frequency			

Other Personal Property & Assets

Describe & List Values

Other Liabilities

Describe in Detail, Including Amount and To Whom Liability is Owed, if Payments are Being Made, Amount and Frequency

Claims

I (we) hereby certify that all information contained herein is true and correct. This application has been duly authorized by the Board of Directors, Principal Partners or Sole Owner of the business on behalf of whom the application is made. The applicant will comply with all certifications and requirements necessary for fulfillment of the loan terms.

I (we) hereby grant permission to the Southernmost Illinois Delta Empowerment Zone, Inc. to collect information concerning the credit history of the business, primary owners or partners for the sake of evaluating the credit worthiness of this application. The information may include, but not be limited to credit bureau reports, contact with credit references and correspondence with applicant's financial institution.

Signature	Printed Name	Date
Signature	Printed Name	Date

Signature

Printed Name

Date