

BUSINESS DEBT SCHEDULE

COMPANY NAME: _____

DATE: _____

Indebtedness: Furnish the following information on all installment debts, contracts, notes and mortgages payable. Do not include accounts payable or accrued liabilities.

CREDITOR Name & Address	Original Date	Original Amount	Present Balance	Interest Rate	Monthly Payment	Maturity Date	Status	Collateral/Security
Total Present Balance & Monthly Payment								

SIGNATURE: _____



BUSINESS LOAN APPLICATION

Red River Regional Council

516 Cooper Avenue, Suite 101 | Grafton, ND 58237

P: (701) 352-3550 | Website: www.redriverrc.com

This loan application and associated attachments is applicable to for any financing requests of the Red River Regional Council and Pembina and Nelson County Job Development Authorities. More information on available resources may be found at www.redriverrc.com or calling (701) 352-3550.

BORROWER INFORMATION

Borrower Name:

Address:

Cell: ()

Email:

SS#:

Birth Date:

% of Ownership:

Title:

Borrower Name:

Address:

Cell: ()

Email:

SS#:

Birth Date:

% of Ownership:

Title:

BUSINESS INFORMATION

Business Name:

Physical Location:

County:

Mailing Address:

Telephone: ()

Email:

Website:

New Business []

Existing Business []

Date Established:

Own []

Lease []

Online Business []

Years at Present Location:

Tax ID:

NAICS Code:

Nature of Business:

Type of Business Organization:

Sole Proprietorship [] Partnership [] Joint Venture [] Corporation [] LLC [] Non-Profit [] Other []

Current Number of Employees: FT* PT *32 hours per week; do not include owners

Projected Employees in 1 year: FT* PT *32 hours per week; do not include owners

Have you completed a business plan? Yes [] No []

When and by whom was the business plan prepared? (please provide name, address and phone number)

If you have not completed a business plan, would you like information on available assistance? Yes [] No []

PROJECT SOURCE & USE

Please outline the total project costs and intended sources of funding in the following table.

	Owner Equity	Bank	Other	Other
Machinery/Equipment				
Real Estate				
Real Estate Improvements				
Working Capital				
Other				
Totals				

LOAN REQUEST

Amount of Loan Requested: \$ _____

Requested Term of Loan: _____

Have you contacted a bank for financing? Yes No

Bank Name: _____

Contact: _____

Phone: _____

Email: _____

Do you provide consent for your lender to speak to RRRC staff regarding your project? Yes No

Specific Loan Purpose (Check all that apply)

Working Capital

Refinance Existing Loan or Debts

Purchase of Inventory

Other (list specific details)

Purchase of Equipment

Purchase of Real Estate

Purchase of Business

Use of Loan Proceeds

Item	Description	\$ Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total \$ _____

MISCELLANEOUS INFORMATION

Are tax liabilities current: Yes No

Has the business or principal owner ever declared bankruptcy? Yes No

If yes, provide details on a separate sheet.

Is the business a defendant in any lawsuit? Yes [] No []

If yes, provide details on a separate sheet.

Nearest Relatives – List two not living with you

Name	Address	City/State/Zip	Phone Number

CERTIFICATION

Credit Release Consent:

The undersigned certifies that, to the best of his or her knowledge and belief, all information contained in this loan application and in the accompanying statements and documents is true, complete, and correct. The undersigned agrees to notify Red River Regional Council (RRRC) immediately of any material changes in this information. The undersigned authorizes RRRC to contact any bank and trade creditors it deems necessary without further notice, including, but not limited to, Dunn & Bradstreet reports or information from Experian Credit Data. I understand that RRRC in accordance with program requirements retains the sole decision as to whether this Loan Application is approved, disapproved, or modified. It is my right to accept or decline the loan amount, rate and terms approved by the program.

Tax Return Information Consent:

I understand, acknowledge, and agree that the Lender and Other Loan Participants can obtain, use and share personal and business tax return information for purposes of (i) providing an offer; (ii) originating, maintaining, managing, monitoring, servicing, selling, insuring, and securitizing a loan; (iii) marketing; or (iv) as otherwise permitted by applicable laws, including state and federal privacy and data security laws. The Lender includes the Lender’s affiliates, agents, service providers and any of aforementioned parties’ successors and assigns. The Other Loan Participants includes any actual or potential owners of a loan resulting from your loan application, or acquirers of any beneficial or other interest in the loan, any mortgage insurer, guarantor, any servicers or service providers for these parties and any of aforementioned parties’ successors and assigns. All persons with >20% ownership must complete and sign

Name (print): _____ Signature: _____ Date: _____

Name (print): _____ Signature: _____ Date: _____

*For additional ownership, please complete borrower information and certification on a second application.

LOAN APPLICATION CHECKLIST

Please be sure all the following applicable documentation has been included for your business loan application to be processed. Additional information may be required.

- [] Business Loan Application
- [] Resume(s) for all owners
- [] Organizational Papers and copies of necessary permits/licenses to operate the business
- [] Business Plan
- [] Interim Financial Statements (most recent month end)
- [] Financial Projections with assumptions for at least the first 2 years of operation

- 2 years of Business Tax Returns
- Debt Schedule
- Bank commitment letter
- Personal Financial Statement(s) for all owners
- 2 years of Personal Tax Returns for all owners
- Evidence of at least 10% equity available (copy of bank statement)
- Detailed list of available collateral and associated values

THE BUSINESS PLAN & ITS PARTS

An Outline

Here's an outline to illustrate the complexity and detail of a good business plan. Don't forget to consult the Small Business Development Center closest to you for help. Books abound on writing a business plan. We recommend one written by a North Dakotan, *The Business Plan: A State-of-the-Art Guide* (1988) by Michael O'Donnell, Lord Publishing, Inc., P.O. Box 806, Dover MA 02030, 1-800-525-5673. You can find it and other useful books at most libraries and bookstores.

I. Your Summary

- A. Describe your business.
 - 1. Tell where you want to locate.
 - 2. Name your products or services.
 - 3. Briefly tell about your market and your competition.
 - 4. Tell why you and others are qualified to run the business.
- B. State your business goals and objectives.
- C. Tell how much money you'll need and where you'll get it.
- D. Project out the business' earnings.

II. Your Market

- A. Describe your market.
- B. Tell where you think your particular industry is headed.
- C. Define your target market.
- D. List, with an analysis, all of your competition.

III. Your Product or Service

- A. Describe in detail your products or services.
- B. Indicate if you'll need to patent your idea, if you've already done so, and what other steps you've taken or will take to protect your products, business name, and identity.
- C. Compare your products or services, your location, and your ability to reach the market to those of your competitors.

IV. Manufacturing Process or Service Details.

- A. List the materials you will need.
- B. Tell where you will buy your materials.
- C. Describe how you are going to turn raw material into a finished product.

OR...

- A. Go into more detail about your service.
 - 1. Tell what sets you apart from your competitors.
 - 2. Describe how you will ensure customer loyalty.

V. Marketing Strategy

- A. State your overall strategy for reaching your goals.
- B. Tell how you will price your products or services.
- C. Describe the methods you will use to get your products into the hands of your target market.

VI. How Your Business Will Operate

- A. Indicate whether your business will be a sole proprietorship, partnership, or a Corporation.
- B. Describe the main people in the business and their duties.
- C. State the kind of people you will need to hire and how many of each job classification.
- D. Tell where you will be located and the kind of building you will need.
- E. Tell what your operating plans are for your first 18 to 24 months in business.

VII. Money Matters

- A. Give a complete picture of your personal finances, and present a carefully drawn up budget for your business and personal finances (if you're going to be a sole proprietorship or a partnership).
- B. Project how your business will do over its first five years in operation.
- C. State who will keep your books – you, your spouse, or a professional accountant.

VIII. Other Information, Plans, Ideas

- A. Restate your case, inject your enthusiasm, and show your determination to succeed.
- B. Include product diagrams and building blueprints, and any licenses, permits, or patents you have already received.
- C. You may want to list your attorney, accountant, and other business consultants, with letters from each acknowledging your relationship.

CONFIDENTIAL FINANCIAL STATEMENT

Name		Social Security No.		Age	Home Phone No.	Home Address	
Name of Spouse (if married)		Social Security No.		Age	Dependent Children	City	State Zip
Name of Employer	Position		Years	Business Phone No.		Address of Employer	
City	State	Zip	Name of Attorney		Business Phone No.	Name of CPA	Business Phone No.

FINANCIAL CONDITION AS OF (DATE)

PLEASE DO NOT LEAVE ANY QUESTIONS UNANSWERED. USE "NO" OR "NONE" WHERE NECESSARY.

ASSETS		Market Value	LIABILITIES		(omit cents)
Cash	In this bank		Due to brokers in margin accounts		
	Checking		Notes Payable to bank (Schedule 5)	Unsecured	
	Savings, CD			Secured	
	Other		Notes payable to other banks (Schedule 5)	Unsecured	
	In other banks			Secured	
	Checking		Other notes payable (Schedule 6)		
	Savings, CD		Accounts payable (Schedule 6)		
Securities (Schedule 1)	Marketable (NYSE, OTC, ASE)		Mortgages Payable (Schedule 7)	Homestead	
	Non-marketable			Partial interest in R/E	
	Restricted or control stock		Taxes Owning	Real estate owned	
Accounts receivable (Schedule 2)		Income taxes			
Notes receivable (Schedule 2)			Other taxes		
Cash value of life insurance – Net (Schedule 3)			Other liabilities (itemize)		
Real Estate (Schedule 4)	Homestead		Revolving accounts/credit cards		
	Partial interest in R/E		Other		
	Real estate owned				
Automobiles					
Other assets (itemize)					
Art					
Jewelry					
Other					
Other					
Other			Total Liabilities		
Other					
Other					
Total Assets			Net Worth		
ANNUAL INCOME	Last Year	This Year	Projected	CONTINGENT LIABILITIES	
Salary or wages				Do you have any contingent liabilities? (If yes, summarize below and give details on page 4.)	
Bonus and commissions				As endorser or co-maker	
Dividends and interests				As guarantor	
Trust income				On leases or contracts	
Rentals (net of related expenses)				Legal claims or judgments	
Royalties				Letters of credit	
Capital gains or losses				Other obligations or special expenses (alimony, child support, separate maintenance, etc.)	
Equipment leases				Total contingent liabilities	
Spouse's income* (source)					
Other**					
Total Income					
Amount of income tax paid					

*Spouse information need not be revealed

**Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying obligations.

IF INSUFFICIENT SPACE, PLEASE ATTACH A SEPARATE CONTINUING SCHEDULE.

SCHEDULE 1 – STOCKS AND BONDS							
Number of Shares	Name of Issuer	Where Traded	Market Per Share	Total Value	Liens?*** Yes or No	Restricted? Yes or No*	Registered in Name of

*Restricted securities meaning restrictions imposed by letter, legend, or control.

**Liens include any margin deposits, transfers, conditional sales, assignments, charges, encumbrances, pledges, hypothecations, security interests, or other similar dispositions.

SCHEDULE 2 – NOTES AND ACCOUNTS RECEIVABLE (including real estate)*						
Maker	Original Date	Original Amount	Present Balance	Payments	Maturity	Purpose and Collateral, If Any

*Note: If prior liens exist on any real estate notes listed above, please indicate lien holder and amount on page 4.

SCHEDULE 3 – LIFE INSURANCE					
Company	Face Amount	Cash Surrender or Loan Value	Policy Loan (if any)	Is Policy or C/V Assigned?	Beneficiary

SCHEDULE 4 – REAL ESTATE OWNED							
Item No.	Location, Size, and Improvements	Market Value	Type Appraisal	Cost	Year Acquired	Monthly Income	Title in the Name of
HOME STEAD							
UNDIVIDED INTERESTS IN REAL ESTATE (Your % only – indicate % ownership in description)							
OTHER REAL ESTATE OWNED							

SCHEDULE 5 – NOTES PAYABLE TO BANKS							
Due To	Original Date	Original Amount	Present Balance	Payments	Maturity	Purpose	Collateral (if any)

SCHEDULE 6 – OTHER NOTES AND ACCOUNTS PAYABLE							
Due To	Original Date	Original Amount	Present Balance	Payments	Maturity	Purpose	Collateral (if any)

SCHEDULE 7 – RELATED INDEBTEDNESS ON REAL ESTATE

Item No.	Monthly Payment	Lien Holder	Interest Rate	Insurance Carried	Original Amount	Present Balance
HOMESTEAD						
UNDIVIDED INTEREST IN REAL ESTATE						
OTHER REAL ESTATE OWNED						

GENERAL INFORMATION

Are you a partner or officer in any other venture? If yes please describe below: _____	Have you made a composition settlement or taken bankruptcy within the past 10 years? If yes, please describe below: _____
Area you a defendant in any suit or legal action? If yes, please describe below: _____	Are any assets, other than real estate securities, subject to any security interests, liens, or claims of any other persons? If yes, please describe below: _____
Marital status: Married Separated Unmarried (Including single, divorced, widowed)	
A. Were any of the assets listed (A) owned or claimed by your spouse before marriage, or (B) acquired by your spouse during marriage by gift or inheritance? If yes, please describe below: _____	
B. Area any of the assets listed held in trust, or in an estate or in any other name or capacity? If yes, please describe below: _____	
C. Were any of the assets listed purchased in whole or in part, with (A) personal earnings of your spouse, or (B) revenue or liquidation proceeds from your spouse's property of either kind described in Question A? * If yes, please describe below: _____	

The above financial and supporting schedules, which are submitted for the purpose of establishing, obtaining, and maintaining credit, present a true, complete, and correct statement of my financial condition as of the date shown. I agree to notify Red River Regional Council of any material adverse change in my financial condition; and to furnish current financial information upon request by Red River Regional Council from time to time. Red River Regional Council is authorized to contact any appropriate third parties for the purpose of verifying any information at any time furnished by me to Red River Regional Council and/or obtaining additional credit information deemed necessary by Red River Regional Council; conversely, in the absence of written instruction to the contrary, Red River Regional Council is authorized to impart such credit information to responsible third parties at Red River Regional Council's sole discretion in accordance with applicable laws and regulations governing such disclosures. This financial statement and other information furnished shall be the property of Red River Regional Council.

*Spouse information need not be revealed unless you reside in the State of Texas, or other community property state.

Signature
Signature
Prepared By (if other than maker)
Witnessed By
Date

ESTIMATED PROJECTIONS OF INCOME & EXPENSES FOR TWO YEARS

	YEAR 1		YEAR 2	
	\$	%	\$	%
Net Sales		100.00%		100.00%
Cost of Goods Sold				
GROSS PROFIT				
OPERATING EXPENSES:				
Depreciation & Amort.				
Accounting & Legal				
Advertising				
Bad Debt Expense				
Dues & Subscriptions				
Insurance				
Miscellaneous *				
Officers Salaries				
Payroll Taxes				
Rent				
Repairs				
Salaries				
Selling expenses				
Supplies				
Taxes				
Telephone				
Travel/Entertainment				
Utilities				
Other				
TOTAL OPERATING EXPENSES				
OPERATING PROFIT (Before Taxes)				
Interest Expense				
Other Expense				
Other Income				
Est. Income Taxes				
Owners Draw/Dividends				
NET PROFITS				

**If the miscellaneous expense exceeds two percent (2%) of Gross Income please itemize with an attached schedule*

ASSUMPTIONS

A. REVENUE:

B. EXPENSES:

C. NET PROFIT:

I CERTIFY THE FOREGOING ESTIMATE FAIRLY REPRESENTS THE FINANCIAL PROJECTIONS TO THE BEST OF MY KNOWLEDGE.

SIGNATURE: _____
DATE: _____

TITLE: _____

Balance Sheet Suggested Format

	<u>Year 1</u>	<u>Year 2</u>
<u>CURRENT ASSETS:</u>		
Cash	_____	_____
Accounts Receivable	_____	_____
Other	_____	_____
TOTAL CURRENT ASSETS:	=====	=====
<u>PROPERTY AND EQUIPMENT:</u>		
Land and Building	_____	_____
Fixtures and Equipment	_____	_____
Vehicle	_____	_____
Less Accumulated Dep.	(_____)	(_____)
NET FIXED ASSETS:	=====	=====
<u>OTHER ASSETS:</u>		
License	_____	_____
Goodwill	_____	_____
TOTAL ASSETS:	=====	=====
<u>CURRENT LIABILITIES:</u>		
Notes Payable (1 year or less)	_____	_____
Accounts Payable	_____	_____
Accrued Expenses	_____	_____
Taxes Owed	_____	_____
Long Term Debt (current amount)	_____	_____
Other	_____	_____
TOTAL CURRENT LIABILITIES:	=====	=====
<u>LONG TERM DEBT:</u>		
Loans	_____	_____
Other	_____	_____
TOTAL LIABILITIES:	=====	=====
<u>STOCKHOLDERS EQUITY:</u>		
Capital Stock	_____	_____
Paid-In Capital	_____	_____
Retained Earnings	_____	_____
TOTAL NET WORTH:	=====	=====
TOTAL LIABILITIES AND NET WORTH:	=====	=====