



## **Business Builders**

A Program for Women & Minority Entrepreneurs  
in the City of Hammond

### **MBE/WBE REVOLVING LOAN FUND APPLICATION PACKET**

Dear Loan Applicant,

Enclosed is the Loan Application Packet to apply for a loan from the Hammond Development Corporation's Revolving Loan Fund. Please complete all areas of the form that apply to you. If you need additional space to fully answer any of the questions, you may attach a separate sheet.

Any information that you submit will be kept confidential and will be viewed only by the Small Business Specialist and the members of the Loan Review Committee of the Hammond Development Corporation. Hammond Development Corporation may hold and use for internal purposes all such material without any obligation to compensate the person(s) who created, owns, or transmits it to the Hammond Development Corporation. Any material or correspondence that you submit to Hammond Development Corporation in consideration of this application becomes the sole property of Hammond Development Corporation, free and clear of any interests of the person(s) who created or transmitted the material and will therefore not be returned to you. The Loan Review Committee will meet every other Friday to review loan requests. After review, you will be promptly contacted with the decision.

Thank you for your interest in the Hammond Development Corporation's Revolving Loan Fund. If you have any questions, please contact me at 219-853-6399.

**I HAVE READ AND ACCEPT THE TERMS WRITTEN ABOVE.**

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# MBE/WBE REVOLVING LOAN FUND APPLICATION

## APPLICATION IDENTIFICATION

APPLICATION PACKAGE WAS PROVIDED TO: \_\_\_\_\_

APPLICATION WAS GIVEN TO THE ABOVE INDIVIDUAL ON THIS DATE: \_\_\_\_\_

APPLICATION PACKAGE WAS PROVIDED BY: \_\_\_\_\_

Title: \_\_\_\_\_

### LOAN REVIEW COMMITTEE RESULTS:

Meeting Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Results: \_\_\_\_\_

Meeting Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Results: \_\_\_\_\_

Meeting Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Results: \_\_\_\_\_

# MBE/WBE REVOLVING LOAN FUND APPLICATION

Date: \_\_\_\_\_

<b>APPLICANT NAME:</b>	_____
<b>BUSINESS NAME:</b>	_____
<b>HOME ADDRESS:</b>	_____
<b>BUSINESS ADDRESS:</b>	_____
<b>E-mail Address:</b>	_____
<b>Home Telephone:</b>	_____
<b>Business Telephone:</b>	_____
<b>Fax:</b>	_____
<b>PRESENT EMPLOYER:</b>	_____
<b>Telephone:</b>	_____
<b>How did you learn about this program?</b>	_____

<b>TELL US ABOUT YOUR BUSINESS</b>				
Type of Business:	Corporation _____	Type _____		
	Partnership _____	Type _____		
	Sole Proprietorship _____	Explain: _____		
	Other _____			
How long has the business been established?	_____ Months	_____ Years	_____ Start-Up	
Type of product/service provided:	_____			
Description of business:	_____			
Principals of the business: (those with 20% or more ownership)				
Name	Home Address	Telephone	SS#	Title
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____

**BUSINESS INFORMATION:**

(If the answer to questions 1, 2 or 3 is “yes”, please provide an explanation)

- 1. Does the business have any outstanding or pending judgements or tax liens? \_\_\_ No \_\_\_ Yes
- 2. Has the business or its principals declared bankruptcy in the last 7 years? \_\_\_ No \_\_\_ Yes
- 3. Is the business or its principals currently involved in any pending litigation? \_\_\_ No \_\_\_ Yes

Explanation if necessary:

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4. How many employees does (will) the business have? \_\_\_\_\_

5. Is the business seasonal? \_\_\_ No \_\_\_ Yes

If Yes, please explain: \_\_\_\_\_

6. What are the goals of the business for the next year? \_\_\_\_\_

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7. Are you a franchise operation? \_\_\_ No \_\_\_ Yes

If Yes, please explain, and attach a copy of the franchise agreement: \_\_\_\_\_

8. Does the company or do the principals of the business have any affiliated or joint ownership interests in other companies? \_\_\_ No \_\_\_ Yes (If Yes, please list below):

Name of Company	Address	Contact	Telephone	Relationship
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**HAVE YOU COMPLETED THE TRAINING PROGRAM PROVIDED BY THE HAMMOND DEVELOPMENT CORPORATION? \_\_\_ No \_\_\_ Yes**

**IF NOT, WHY?** \_\_\_\_\_

Please list any business related training you have had: \_\_\_\_\_

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**ADDITIONAL BUSINESS INFORMATION**

Who is the attorney for the business?      Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_

Who is the accountant for the business?      Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_

Major Business Suppliers: (if applicable)

	Name	Address	Contact	Telephone
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____

Major Business Customers: (if applicable)

	Name	Address	Contact	Telephone
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____

**Current Banking Relationships:**

Account: \_\_\_\_\_ Checking \_\_\_\_\_ Savings \_\_\_\_\_ Other \_\_\_\_\_ Deposits: \$ \_\_\_\_\_

Bank Name & Address \_\_\_\_\_

Account Number \_\_\_\_\_

Banker / Contact \_\_\_\_\_ Telephone \_\_\_\_\_

Account: \_\_\_\_\_ Checking \_\_\_\_\_ Savings \_\_\_\_\_ Other \_\_\_\_\_ Deposits: \$ \_\_\_\_\_

Bank Name & Address \_\_\_\_\_

Account Number \_\_\_\_\_

Banker / Contact \_\_\_\_\_ Telephone \_\_\_\_\_

**Bank Loan Information:**

Loan Amount: \$ \_\_\_\_\_

Bank Name & Address \_\_\_\_\_

Account Number \_\_\_\_\_

Banker / Contact \_\_\_\_\_ Telephone \_\_\_\_\_

Loan Amount: \$ \_\_\_\_\_

Bank Name & Address \_\_\_\_\_

Account Number \_\_\_\_\_

Banker / Contact \_\_\_\_\_ Telephone \_\_\_\_\_

MAY WE CONTACT THESE INDIVIDUALS? \_\_\_\_\_ No \_\_\_\_\_ Yes

**LOAN INFORMATION**

Proposed Loan Amount: \$ \_\_\_\_\_

Purpose of the Loan: Choose from one or more of the following and provide amounts:

Purchase Equipment \$ \_\_\_\_\_

Purchase Real Estate \$ \_\_\_\_\_

Working Capital \$ \_\_\_\_\_

Inventory \$ \_\_\_\_\_

Start-Up \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

Repayment Source: \_\_\_\_\_

Term of the Loan Requested: \_\_\_\_\_

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

Owner's Equity / Down Payment: (List amount and tell the source of the funds)

\$ \_\_\_\_\_ Source: \_\_\_\_\_

\$ \_\_\_\_\_ Source: \_\_\_\_\_

\$ \_\_\_\_\_ Source: \_\_\_\_\_

Additional Comments, if any: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## PERSONAL FINANCIAL STATEMENT

\*All individuals with ownership interest of 20% or greater must complete one of these forms.

Note: Alimony, child support or separate maintenance income does not have to be reported unless you want us to consider it as a basis for repaying this obligation.

**NAME:** \_\_\_\_\_

**Annual Income:** \_\_\_\_\_ **Housing Expense:** \_\_\_\_\_

**Landlord:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

### ASSETS

Cash in Banks \$ \_\_\_\_\_  
Real Estate Owned \$ \_\_\_\_\_  
Securities Owned \$ \_\_\_\_\_  
401 (k)s & IRA \$ \_\_\_\_\_  
Automobiles \$ \_\_\_\_\_  
Other \$ \_\_\_\_\_  
**TOTAL ASSETS** \$ \_\_\_\_\_

### LIABILITIES

Loans Owed \$ \_\_\_\_\_  
Real Estate Mortgages \$ \_\_\_\_\_  
Credit Card Balances \$ \_\_\_\_\_  
Income Taxes Payable \$ \_\_\_\_\_  
Other \$ \_\_\_\_\_  
Other \$ \_\_\_\_\_  
**TOTAL LIABILITIES** \$ \_\_\_\_\_

### Description of Real Estate Owned

1. Type of Property and Address: \_\_\_\_\_  
Title in Name of: \_\_\_\_\_ Year Acquired: \_\_\_\_\_  
Mortgage Holder: \_\_\_\_\_ Mortgage Balance: \$ \_\_\_\_\_  
Monthly Payment: \$ \_\_\_\_\_ Present Market Value: \$ \_\_\_\_\_
  
2. Type of Property and Address: \_\_\_\_\_  
Title in Name of: \_\_\_\_\_ Year Acquired: \_\_\_\_\_  
Mortgage Holder: \_\_\_\_\_ Mortgage Balance: \$ \_\_\_\_\_  
Monthly Payment: \$ \_\_\_\_\_ Present Market Value: \$ \_\_\_\_\_

### Additional Information:

1. Are you a defendant in any legal actions, have judgements, tax levies or garnishments against you?  
\_\_\_ No \_\_\_ Yes If Yes, Explain on a separate sheet of paper.
2. Have you or any firm in which you were a major owner ever filed bankruptcy or settled for less than the amounts owed? \_\_\_ No \_\_\_ Yes If Yes, Explain on a separate sheet of paper.

### AGREEMENT AND SIGNATURE:

This information on this financial statement(s) submitted by the undersigned is true and correct, and each financial statement is a true and correct statement of the financial condition of the undersigned. The undersigned acknowledges that the Hammond Development Corporation is relyin on the information contained herein in deciding whether to give or continue the requested financial accomodation or extension of credit. The undersigned authorizes the Hammond Development Corporation to check references, verify employment and obtain consumer and business credit reports.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_ Title: \_\_\_\_\_  
Printed Name: \_\_\_\_\_

# CHECKLIST

Please be sure to provide the following:

- \_\_\_\_\_ Proof of payment for past 6 months utilities, telephone and rent expenses
- \_\_\_\_\_ Signed copies of last three years individual tax returns of principals
- \_\_\_\_\_ Signed copies of last three years of business tax returns, if applicable
- \_\_\_\_\_ Signed copy of most recent interim business financial statement (less than 90 days old)
- \_\_\_\_\_ Signed current personal financial statement (one for each individual with 20% or more ownership)
- \_\_\_\_\_ Current accounts receivable aging (within 90 days), if applicable
- \_\_\_\_\_ Current accounts payable aging (within 90 days), if applicable
- \_\_\_\_\_ Copy of your business plan
- \_\_\_\_\_ Copy of your partnership agreement, if applicable
- \_\_\_\_\_ Resume for each individual with 20% or more ownership