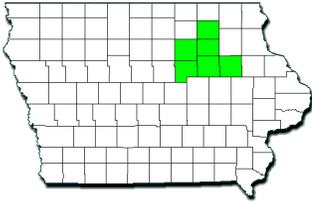
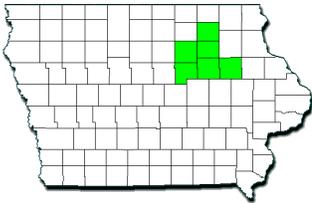


FINANCIAL ASSISTANCE APPLICATION FORM



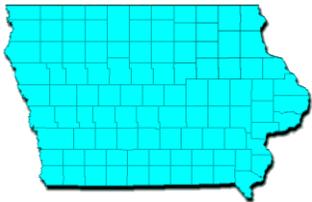
Revolving Loan Fund (RLF) Loan Program

The Revolving Loan Fund (RLF) Loan Program is available in the following Iowa Counties: Black Hawk, Bremer, Buchanan, Butler, Chickasaw, and Grundy.



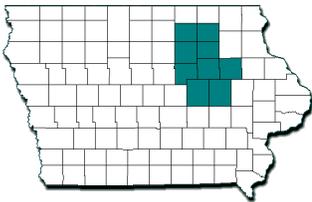
CARES Act Revolving Loan Fund (RLF) Loan Program

The Revolving Loan Fund (RLF) Loan Program is available in the following Iowa Counties: Black Hawk, Bremer, Buchanan, Butler, Chickasaw, and Grundy.



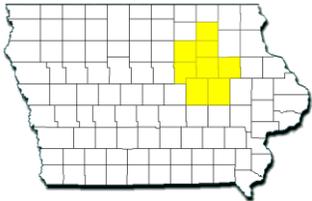
SBA 504 Loan Program

The SBA 504 loan program service territory includes all of the State of Iowa.



Black Hawk IRP Loan Fund Program

The service territory for the Black Hawk IRP Loan Program includes Benton, Black Hawk, Buchanan, Grundy, and Tama Counties, and the unserved portions of Bremer, Butler, Chickasaw, and Floyd Counties, all in the State of Iowa.



General (GEN) Loan Program

The General (GEN) Loan Program service territory includes the State of Iowa with emphasis in the following Counties: Benton, Black Hawk, Bremer, Buchanan, Butler, Chickasaw, Grundy, and Tama.

Black Hawk Economic Development, Inc.

1001 Peoples Square

Waterloo, IA 50702

Phone (319) 235-2960

Fax (319) 235-9171

Email BHED@bhed.org

I.	APPLICATION MADE TO WHICH PROGRAM (check all that apply) <input type="checkbox"/> RLF <input type="checkbox"/> SBA 504 <input type="checkbox"/> IRP <input type="checkbox"/> GEN <input type="checkbox"/> CARES Act <input type="checkbox"/> 1 st time applicant/borrower <input type="checkbox"/> Previous applicant/borrower					DATE OF APPLICATION												
II.	CONTACT PERSON					TELEPHONE NUMBER												
	FAX NUMBER					EMAIL ADDRESS												
	WEBSITE ADDRESS					EMPLOYER ID NUMBER (Federal Tax Identification or Social Security Number)												
	BORROWER'S NAME					BUSINESS NAME IF DIFFERENT THAN BORROWER (includes d/b/as and a/k/as)												
	BORROWER'S ADDRESS (mailing address)					STREET ADDRESS OF PROJECT (if different)												
	CITY	COUNTY	STATE/ZIP CODE	CITY	COUNTY	STATE/ZIP CODE	CITY	COUNTY	STATE/ZIP CODE	CITY	COUNTY	STATE/ZIP CODE						
III.	OWNERSHIP TYPE <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership, Number of Partners _____ <input type="checkbox"/> Limited Liability Company/Partnership <input type="checkbox"/> S-Corporation, Years Chartered _____ <input type="checkbox"/> C-Corporation, Years Chartered _____ <input type="checkbox"/> Other, describe: _____					TYPE OF BUSINESS <input type="checkbox"/> Distribution <input type="checkbox"/> Manufacturing <input type="checkbox"/> Retail <input type="checkbox"/> Service <input type="checkbox"/> Warehousing <input type="checkbox"/> Other, describe: _____												
	PURPOSE OF APPLICATION <input type="checkbox"/> Loan <input type="checkbox"/> Loan Guaranty <input type="checkbox"/> Loan and Guaranty			PROPOSED USE OF FUNDS <input type="checkbox"/> Expansion <input type="checkbox"/> Retention <input type="checkbox"/> Start-up			LOCATION <input type="checkbox"/> Urban <input type="checkbox"/> Rural <input type="checkbox"/> Metro		RELOCATION <input type="checkbox"/> Yes <input type="checkbox"/> No									
	SIC (NAICS) CODE			DATE ESTABLISHED (Incorporated, Organized, etc.)			FISCAL YEAR ENDING:											
	DUNS #						ACCOUNTANT NAME:											
IV.	NAME OF BANK					CONTACT PERSON												
	PHYSICAL ADDRESS					PHONE NUMBER												
	MAILING ADDRESS					FAX NUMBER												
	CITY	STATE/ZIP CODE				EMAIL ADDRESS												
V.	EXPLAIN THE NATURE OF THE PROJECT; THE PURPOSE AND ECONOMIC IMPACT; BE SPECIFIC																	
VI.	CURRENT NUMBER OF EMPLOYEES (PRE-PROJECT) _____					NUMBER OF JOBS TO BE <u>CREATED</u> IN THE NEXT 2 YEARS _____												
						NUMBER OF JOBS TO BE <u>RETAINED</u> BECAUSE OF PROJECT _____												
VII.	SOURCE(S) OF FUNDS			AMOUNT (\$)			%			USE(S) OF FUNDS			AMOUNT (\$)			%		
	Conventional/Bank Financing			_____			_____			Land (with existing building, if applicable)			_____			_____		
	Private Investors			_____			_____			Building (new construction, remodel, etc.)			_____			_____		
	Equity			_____			_____			Machinery & Equipment			_____			_____		
	RLF Request			_____			_____			Acquisition Cost (purchase assets)			_____			_____		
	SBA 504 Request			_____			_____			Working Capital			_____			_____		
	IRP Request			_____			_____			Professional Fees (appraisal, legal)			_____			_____		
	Other Public (list)			_____			_____			Other Expenses (list)			_____			_____		
	_____			_____			_____			_____			_____			_____		
	_____			_____			_____			_____			_____			_____		
	Total Financing			_____			100%			Total Project Cost			_____			100%		
* Public Financing generally cannot exceed 50% of total financing																		
SOURCE OF EQUITY INJECTION																		

VIII.	COLLATERAL DESCRIPTION	LIEN POSITION	LIEN POSITION
	Mortgage	_____	Accounts Receivable
	Fixtures	_____	Inventory
	Equipment	_____	General Intangibles

IX.	NAME OF PRINCIPALS/OWNERS	TITLE/RELATIONSHIP	PERCENT OF OWNERSHIP	AMOUNT OF GUARANTEE
	_____	_____	_____	Unlimited
	_____	_____	_____	Unlimited
	_____	_____	_____	Unlimited
	_____	_____	_____	Unlimited

X.	NAME OF AFFILIATE, IF ANY		AFFILIATE FEDERAL TAX IDENTIFICATION NUMBER	
	PHYSICAL ADDRESS		PHONE NUMBER	
	MAILING ADDRESS		FAX NUMBER	
	CITY	STATE/ZIP CODE	EMAIL ADDRESS	

XI. ADD ANY ADDITIONAL INFORMATION OR COMMENTS PERTINENT TO THE SUCCESS OF THIS PROJECT

XII. AFFIRMATION AND AUTHORIZATION

I understand that Black Hawk Economic Development, Inc. (BHED) may request other relevant information at any time. If BHED has any reason to believe that any applicant, person or firm has willfully and knowingly provided incorrect information or made false statements in conjunction with this application, that information may be considered a material misrepresentation and may be grounds for terminating this application.

I certify that the information contained in this application for financial assistance is correct. I understand that misrepresentation may be cause to suspend review of this application, loan approval, or the loan.

I certify that pursuant to this application, credit is not otherwise available on terms and conditions, which would permit completion and/or the successful operation or accomplishment of the project to be financed without program assistance. Black Hawk Economic Development, Inc. reserves the right to recall the loan if these requirements are not met.

I affirm that the employment practices of the applicant company do not discriminate on the basis of age, race, creed, color, sex, sexual orientation, national origin, or disability.

I certify that no conflict of interest exists, family relationships or financial interest, between myself and/or officers of the company and any member of BHED, its Board of Directors, or its staff except as disclosed as an addendum to this application.

I authorize anyone who possesses personal, company or affiliate, educational, financial, or other information required by BHED or its affiliated governmental agencies to evaluate this application to furnish this information to BHED or its affiliated governmental agencies. The information required includes but is not limited to personal credit bureau reports and current and past bank history.

I hereby release anyone from any damages, which may result from their furnishing or obtaining information for this application.

Signed by the undersigned this _____ day of _____, _____.

_____ BORROWER NAME _____ BORROWER NAME

By: _____ By: _____

_____ AUTHORIZED SIGNER PRINTED NAME TITLE _____ AUTHORIZED SIGNER PRINTED NAME (IF REQUIRED) TITLE

XIII. **Non-Substitution of Funds Disclosure**

The undersigned lending institution hereby certifies it has reviewed the foregoing application and that credit (commercial loan(s)) is not available for the project (in part or whole) or on such terms and conditions that will allow the project to proceed forward without economic development financial assistance in the amount of \$_____.

Reason(s) _____
(Please Specify) _____

The undersigned also certifies it has reviewed the applicant's documents in terms of compliance with the Patriot Act and has found the documentation sufficient.

Lending Institution: _____

Name and Title: _____

Signature: _____

Date: _____

APPLICATION CHECKLIST

- Personal History Statement(s) for each officer/director (regardless of ownership) and each proprietor, partner and stockholder with 20% or more ownership
- Personal Financial Statement(s) copy of drivers license and social security card for each proprietor, partner or stockholder with 20% or more ownership
- Personal Tax Returns for the previous 3 years
- Balance Sheet and Income Statement for the previous 3 years. If a new business provide a proforma balance sheet/income statement with assumptions
- Balance Sheet and Income Statement dated within 90 days of the application with an aging of the accounts receivable and accounts payable
- Business Tax Returns for the previous 3 years
- Summary of history of the company
- Summary or outline of project including copies of project bids, quotes, real estate purchase agreements, etc.
- Articles of Incorporation [Organization] and By-Laws [Operating Agreement] including any amendments
- Borrower Resolution by the Board of Directors authorizing the applicant to borrow, if applicable
- Letter from participating lender disclosing why it cannot fund the entire project
- Proof of hazard and worker's compensation insurance including name of agent/insurance company
- Application Fee, if applicable

“This institution is an equal opportunity provider and employer.”

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at and USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form.

Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or by fax (202) 690-7442 or email at proram.intake@usda.gov

OFFICE USE ONLY

	RLF	GEN	SBA	IRP
Loan Number	_____	_____	_____	_____
Date Approved	_____	_____	_____	_____
Amount Approved	_____	_____	_____	_____
Terms	_____	_____	_____	_____
Interest Rate	_____	_____	_____	_____
Date Disbursed	_____	_____	_____	_____
Date Denied	_____	_____	_____	_____
Reason Denied	_____	_____	_____	_____
Application Fee Paid	_____	_____	_____	_____

**Black Hawk Economic Development, Inc.
1001 People Square
Waterloo, IA 50702**

The Application