

**APPLICATION FOR
CITY OF LACON REVOLVING LOAN
PROGRAM**

APPLICANT PRE-SCREENING CHECK LIST

1. PROJECT DESCRIPTION:

2. TOTAL PROJECT COST: \$ _____.

3. NUMBER OF JOBS CREATED/RETAINED: _____.

4. PROJECT START DATE: _____ / _____ / _____.
- ORDER MATERIALS
- ENTER INTO BINDING CONTRACTS
- INCUR COSTS

CITY OF LACON

REVOLVING LOAN FUND PROGRAM APPLICATION**

DATE: _____

1. NAME OF BUSINESS: _____

ADDRESS: _____

CHIEF EXECUTIVE OFFICER: _____

CONTACT PERSON: _____

PHONE NUMBER: _____

2. IS THE COMPANY PRIVATELY HELD? _____ YES _____ NO _____ NOT APPLICABLE

BUSINESS IS _____ PROPRIETORSHIP _____ PARTNERSHIP _____ CORPORATION

COMMENTS: _____

3. PLEASE LIST ALL OWNERS OF THE BUSINESS, INDICATING THOSE OWNERS ACTIVELY INVOLVED IN THE COMPANY'S MANAGEMENT.

4. IS THE BUSINESS A DIVISION OR SUBSIDIARY OF ANOTHER COMPANY?

_____ YES _____ NO

IF YES CHECKED, PLEASE PROVIDE THE FOLLOWING INFORMATION:

NAME OF PARENT COMPANY: _____

ADDRESS: _____

PHONE NUMBER: _____

APPLICATION **MUST BE COMPLETED BEFORE A PROJECT IS CONSIDERED FOR FUNDING APPROVAL.

5. WHAT PRODUCTS DOES YOUR COMPANY SELL/MANUFACTURE AND/OR WHAT SERVICES DOES YOUR COMPANY PROVIDE?

6. WHEN WAS THE COMPANY ESTABLISHED IN ITS PRESENT LOCATION? PLEASE PROVIDE A BRIEF HISTORY OF THE COMPANY.

7. HOW MANY PERSONS ARE PRESENTLY EMPLOYED AT THE FIRM?

8. WHAT ARE THE MAJOR CRAFTS/JOB CLASSIFICATIONS UTILIZED BY THE COMPANY?

9. OF THE POSITIONS IDENTIFIED ABOVE, WHICH ARE OCCUPIED BY THE MAJORITY OF COMPANY EMPLOYEES (PLEASE INDICATE THE NUMBER OF EMPLOYEES IN THESE POSITIONS).

10. PLEASE PROVIDE A DESCRIPTION OF THE PROJECT AND THE REASONS FOR ITS UNDERTAKING. IF APPLICABLE, INDICATE WHETHER THE PROJECT WILL "START-UP" OR "REVIVE" A BUSINESS (THROUGH NEW MANAGEMENT).

11. WHAT IS THE TOTAL COST OF THE PROJECT? \$ _____ TOTAL PROJECT COST

12. WHAT BANK DOES YOUR FIRM DO BUSINESS WITH?

NAME: _____

ADDRESS: _____

CONTACT PERSON: _____

PHONE NUMBER: _____

13. HOW LONG HAS THE COMPANY DONE BUSINESS WITH THE BANK MENTIONED IN # 12?

14. WOULD YOUR COMPANY BE WILLING TO MAKE AVAILABLE PROJECTIONS, PAST BALANCE SHEETS, PAST PROFIT AND LOSS STATEMENT, PERSONAL FINANCIALS, AND OTHER PERTINENT FINANCIAL INFORMATION TO REVOLVING LOAN FUND PARTICIPATING LENDER?
(SUCH MATERIAL WILL BE KEPT STRICTLY CONFIDENTIAL). *

_____ YES _____ NO

COMMENTS: _____

15. HOW MANY JOBS WILL BE CREATED AS A RESULT OF THIS PROJECT? (PLEASE FURNISH TYPE, NUMBER, AND WAGE SCALES). PLEASE INDICATE WHETHER JOB SERVICES AND/OR JOB TRAINING APPLICANTS WOULD BE HIRED AND WHETHER PUBLIC TRAINING DOLLARS ARE NEEDED FOR EXISTING AND POTENTIAL EMPLOYEES.

16. IF APPLICABLE, HOW MANY JOBS WOULD BE RETAINED BY THE PROJECT?
(APPLICANT PLEASE NOTE: IT MUST BE CLEARLY SHOWN THAT JOBS WILL BE LOST TO THE CITY THROUGH RELOCATIONS TO ANOTHER CITY. THIS **MUST** BE DOCUMENTED BY WRITTEN INCENTIVE OFFERS FROM OTHER CITIES **AND/OR** DETAILED INFORMATION SHOWING THE COST OF REMAINING IN THE CITY VERSUS THE COSTS OF RELOCATING AND DOING BUSINESS IN OTHER CITIES).

* IN THE CASE OF SUBSIDIARY COMPANIES, THE SAME FINANCIAL INFORMATION MAY BE REQUIRED FROM THE PARENT COMPANY AS WELL.

I, THE UNDERSIGNED, HAVE READ AND UNDERSTAND THE DOCUMENTS ENTITLED LACON REVOLVING LOAN FUND PROGRAM GUIDELINES FOR THE CITY OF LACON, AND ACCEPT THE TERMS AND CONDITIONS THEREIN.

I FURTHER UNDERSTAND THAT ANY INSPECTION MADE BY THE RLF STAFF UNDER THIS PROGRAM IS FOR THE PURPOSE OF DETERMINING THE APPLICANT'S ELIGIBILITY UNDER THIS PROGRAM AND IT IS NOT INTENDED TO REPRESENT OR WARRANT THE CONDITION OF THE PREMISES.

I FURTHER UNDERSTAND THAT MAKING APPLICATION IN NO WAY INSURES APPROVAL OF MY LOAN OR GUARANTEES FUNDING.

I UNDERSTAND THAT "APPROVAL" MEANS SPECIFIC, **WRITTEN** APPROVAL FROM **BOTH**

THE CITY AND FIRST NATIONAL BANK OF LACON.

I UNDERSTAND ANY WORK PERFORMED PRIOR TO **SPECIFIC WRITTEN** APPROVAL FROM BOTH THE BANK AND CITY WILL BE CONSIDERED INELIGIBLE UNLESS OTHERWISE WAIVED IN WRITING BY THE CITY AND BANK ACCORDING TO THE GUIDELINES.

I CERTIFY THAT THE WRITTEN ANSWERS TO THE ABOVE QUESTIONS ARE COMPLETE, TRUE, AND CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE

TITLE

DATE