Company In	formation	1								
Operating Compa	any Name:				Tax ID #:					
Dba/Fictitious Na	ame:				Type of Business:			Corporation		
Address:								S-Corp	oration	
Address:								Partner	ship	
City, State, Zip:								Sole Pr	oprietors	ship
County:								LLC		
Primary NAICS	Code:			Current #	of employe	es: Full	l-time:		FTE:*	
Primary Cor	ıtact									
Name:										
Title:										
Phone:										
Cell:										
Email:										
Company Ov	Company Ownership  Please list all owners and any key management, regardless of ownership. Attach additional sheet if necessary.									
		SHEET IT HE	% Ownership			Gender	Rac	e Et	hnicity	Veteran
Name	Title		Must total 100%	Social	Security #	Code	Coo	de	Code	Code
Gender Code:	: 1 – Male; 2 – Female 1 – Black/African American; 2 – American Indian/Alaska Native; 3 – Native Hawaiian/Pacific Islander;									
Race Code:	1 – Black/African American; 2 – American Indian/Alaska Native; 3 – Native Hawaiian/Pacific Islander; 4 – Asian; 5 – White/Caucasian; 6 – Other									
Ethnicity Code:	1 – Hispanic/Latino; 2 – Non-Hispanic/Latino									
Veteran Code:	1 – Non-Veteran: 2 – Other Veteran: 3 – Service Disabled Veteran									

<sup>\*</sup> FTE (Full-Time Equivalent) jobs are calculated as the average number of hours per week/40 hours x the number of part-time, temporary, and seasonal employees. **DO NOT INCLUDE FULL-TIME EMPLOYEES** 

Company History  Please provide a history of the business plan.	business or attach a separate	e sheet, company liter	rature, or	•
Company Profile				
What are your major products and/or services?	List you	major customers.	T	
1.	Name	City, State	% of S	ales
2.				
3.				
Is your business a franchise? Yes No				
If yes, name of franchise.  List your major competitors.				
What geographic markets do you serve for your business? Name City, State				
1.				
2.				
3.				
How do you/will you market and promote your business?				
If yes to any questions, please provide details.				
1. Have you or any officer of your company ever filed for bankruptcy?				
2. Are you or your business involved in any pending lawsuits?				
3. Does your business export (including Mexico and Canada)?				
4. Do you have plans to begin exporting as a result of this loan?				
5. Are any of your production facilities located outside the U.S.?				

Real Estate H	Hold	ling (	Company	(if applicable)		11						
Company Name:						Tax ID #:						
Address:					Type of Business:			Cor	Corporation			
Address:									S-C	S-Corporation		
City, State, Zip:									Partnership			
County:									Sole Proprietorship			
									LLC	C		
Real Estate I	Hold	ling C	Company	Ownership	Attach	additional	sheet if ne	cessary				
Name		Title		% Ownership Must total 100%		Security #	Gender Code	Rac	ce	Ethnicit Code	-	eteran Code
Gender Code:			2 – Female									
Race Code:				rican; 2 – America aucasian; 6 - Other		'Alaska Nati	ve; 3 – Na	ative Ha	awaii	an/Pacifi	c Islaı	nder;
Ethnicity Code:	1 – 1	Hispani	ic/Latino; 2 -	- Non-Hispanic/La	tino							
Veteran Code:												
Project Infor	mat	tion										
Address:					Tax/Par	cel #:						
Address:					Will the	business be	moving?		Ye	$_{ m s}$	No	
City, State, Zip:					If yes, h	ow many m	iles from	existing	g loca	tion?		
County:					Jobs cre	ated in 2 ye	ars: Ful	l-time:		FTE	·*	
How will this pro	ject b	enefit 1	the company	?								

\* DO NOT INCLUDE FULL-TIME EMPLOYEES

# SBA Affiliate Questionnaire

Instructions: Please add any entities you have a significant relationship, either through management, ownership, or other form to the below list, and provide percent of voting equity owned, and title, if any. Please attach an additional sheet if more space is required.

space is required.					
Owner	Entity	%		Title	
Please check all of the below stavoting equity, and (2) any other entity(ies) require a positive respositive responses.	entities not listed above that wo	uld require a	a positive respon	nse. Please also indica	te which
Qı	uestions	X		Entity(ies)	
I control the management or boa					
I have stock options, convertible	securities, or agreements to me	erge.			
I can prevent a quorum or otherv directors or shareholders under the shareholder's agreement.					
I, or an entity I control, has a management agreement with this business.					
I have a close relative (a spouse, spouse of any such person) with a management agreement, or a b geographical location and indust	voting equity, a management po oard seat with a business in a si	osition,			
Print Name:	Signature:			Date:	
Print Name:	Signature:			Date:	
Print Name:	Signature:			Date:	
Drint Name	Signatura			Data	

Contact Information					
Accountant					
Name:		Phone:			
Firm:		Email:			
Address:					
Address:					
City, State, Zip:					
Attorney					
Name:		Phone:			
Firm:		Email:			
Address:					
Address:					
City, State, Zip:					
Insurance Agent f	Insurance Agent for Hazard, Liability, Workers Compensation, and Property Insurance				
Name:		Phone:			
Agency:		Email:			
Address:					
Address:					
City, State, Zip:					
Insurance Agent for Life Insurance (if applicable)					
Name:		Phone:			
Agency:		Email:			
Address:					
Address:					
City, State, Zip:					

## **Legal Notices**

#### Notice to Applicants

This is notice as required by the "Right to Financial Privacy Act of 1978," of the access rights to financial records held by financial institutions that are or have been doing business with you or your business, including financial institutions participating in this loan. Access rights continue for the term of any approved loan without further notice or authorization.

This notice authorizes SEDA-COG and/or the SEDA-COG Local Development Corporation ("Lender"), and its successors to use or transfer financial records on an application for an approved loan, as necessary, to process, service, or foreclose a loan or collect on a defaulted loan. No other transfer of your financial records will be permitted.

I/We authorize disclosure of all information submitted in connection with this application to Lender.

I/We give the following assurances:

- 1. That I/We will comply with Sections 112 and 113 of Volume 13 of the Code of Federal Regulations. These code sections prohibit discrimination on the grounds of race, color, sex, religion, marital status, handicap, age, or national origin by recipients of federal financial assistance and require appropriate report and access to books and records. These requirements are applicable to anyone who buys or takes control of the business. I/We realize that if I/we do not comply with these nondiscrimination requirements, Lender can call, terminate, or accelerate repayment on my/our loan.
- 2. That, to the best of my/our knowledge, my/our project has no affect upon historical/archaeological properties and is in compliance with the requirements and objectives of the National Historic Preservation Act of 1966, as amended; Presidential Executive Order 11593, May 13, 1971; and Procedures for the Protection of Historic and Cultural Properties.
- 3. That my/our project does not involve the relocation of an establishment from one area to another and does not result in the transfer of contract or subcontract work causing unemployment at the location where such work was previously performed. For the purposes of this paragraph, "area" means that geographic area which will allow employees of relocated businesses to retain their jobs. That the project, if applicable, will comply with the requirements of Federal laws which apply to prevailing wage rates (Davis-Bacon).
- 4. That if my/our project involves construction for public use, I/we will comply with accessibility to the handicapped standards of 41 CFR, Subpart 101-19.6.
- 5. That my/our project has no substantial environmental impact and that I/we will comply with all applicable federal, state and local environmental protection standards and regulations.
- 6. If your loan request is approved, you will be required to provide some or all of the following items at closing or during the loan term as outlined in the standard loan commitment letter. These criteria are separate from any collateral security for the loan and will assist Lender to properly service the loan.
  - a. Corporate documents to verify the authorization of the loan request and evidence of the firm's good standing.
  - b. Evidence of current insurance policy covering real and personal property, general public liability, and flood hazard with Lender designated as a lender loss payee/mortgagee.
  - c. Key man life insurance, if appropriate, with assignment made to the Lender.
  - d. Subordination agreements related to shareholder debt and/or other private lender debt, if appropriate.
  - e. Notification to Lender requesting its approval for additional corporate borrowing during the term of the loan.
  - f. Annual reporting of the number of persons actively employed.
  - g. Interim and year-end Profit and Loss statement and Balance Sheet submissions including but not limited to tax returns, both business and personal, personal financial statements, and schedule of debts.
  - h. Annual impact reporting information.
- 7. All obligations for closing costs will be the responsibility of the borrower.

Authority to Collect Personal Information – This information is provided pursuant to Public Law 93-579 (Privacy Act of 1974).

Effects of Non-disclosure – Omission of an item means your application may not receive full consideration.

## Legal Notices

Agreement of Non-employment of SEDA-COG Personnel – I/we agree that if Lender approves this loan application, I/we will not, for at least two years, hire as an employee or consultant anyone that was employed by Lender during the one year period prior to the disbursement of the loan. Furthermore, the undersigned hereby certifies that no officer, director, or employee of Lender has any substantial ownership, employment, fiduciary, creditor, contractual, or consultative relationship with the applicant or project.

The purpose of the financing by the SEDA-COG Local Development Corporation is to support small business growth in the State of Pennsylvania for healthy and expanding businesses or start-up businesses through the SBA 504 loan program. All projects must meet specific program requirements and thresholds and the lender reserves the right to recall the loan if these requirements are not met.

#### Notice of Default

If the Applicant/small business defaults on the SBA-guaranteed loan and SBA suffers a loss, the names of the small business and the guaranters of the SBA-guaranteed loan will be referred for listing in the CAIVRS database, which may affect eligibility for further financial assistance.

#### **Release and Indemnification**

The undersigned applicant has applied to Lender for one or more loans for use in a business either now existing or to be formed or acquired. In conjunction with the consideration of such loan(s), and in furtherance of its mission to provide economic assistance to businesses within its constituent counties, Lender may, from time to time, provide advisory services in connection with the formation and operation of the applicant's business and the means of obtaining appropriate financing for such business.

It is expressly acknowledged that Lender makes no representation or warranty as to the probability of success of Borrower's business. It is further acknowledged that Lender is under no obligation, either contractual or otherwise, to provide or locate funds needed by the undersigned in either the start-up or operation of the business. Except as expressly set forth in writing, Lender makes no commitment that any such funding will be made available.

In consideration of consultation services being provided, the undersigned hereby releases and discharges Lender from all liability for any loss or damage resulting from the failure of the business, including, without limitation, the inability of such business to obtain necessary financing or to meet projections established in any business plan prepared or reviewed by Lender. Additionally, the undersigned hereby agrees to indemnify and hold it harmless from all loss or liability which may result from the operation of the said business.

Auth	orization – To be signed	by any 20% or more o	wner or guarantor of the l	oan			
	By checking this box and submitting this application and any updates, extensions, or modifications, the undersigned authorize SEDA - Council of Governments (SEDA-COG) and SEDA-COG Local Development Corporation (LDC) to make all inquiries deems necessary to verify the accuracy of the information provided herein and to determine creditworthiness including, but no limited to, obtaining consumer and/or business credit reports regarding the applicant or its ownership or any entity with whom they may be affiliated.						
	of my loan application and as req and business tax returns, insurance insurance (if required), workers accountant to release financial inf statements, and schedule of debts. entity as required in the processing	uired in the servicing and/or during policy coverage and premium particle compensation, and property taken to compensation, and property taken to compensation regarding the Applicant I further authorize SEDA-COG, to go r servicing of my loan(s). The C form. I hereby consent to the description of t	redit report and other information required the term of my loan including, but nyments including business real and person payments. I also authorize the Alguarantor including, but not limited to the LDC, and its successors to release su SBA requires the verification of tax resisclosure of the tax information to SED.	ot limited to: personal sonal property and life pplicant's/Guarantor's, tax returns, financial ach information to any turns of the Applicant			
	personal loan), a loan in which I w	vas a guarantor, or a loan to a busin	f a prior borrowing relationship (wheth ness in which I had an ownership intereal all mortgages, and business loans, both	st. Loans include, but			
		1.1	formation, including all attachments, tands that false statements may result in				
	insurance information regarding the	he Applicant/Guarantor to SEDA- ng the debt, current payment status	and insurance company(ies) to COG and the LDC including, but not be any pending actions being taken by the d, and any changes in coverage.	imited to, balances of			
	Applicant/Guarantor (Please Print)	Title	Applicant/Guarantor Signature	Date			
	Applicant/Guarantor (Please Print)	Title	Applicant/Guarantor Signature	Date			
	Applicant/Guarantor (Please Print)	Title	Applicant/Guarantor Signature	Date			
	Applicant/Guarantor (Please Print)	Title	Applicant/Guarantor Signature	Date			
	Applicant/Guarantor (Please Print)	Title	Applicant/Guarantor Signature	Date			

Additional Items Please provide the following information as applicable
Items Needed for Initial Loan Underwriting
Completed Applicant Notifications.
Check made payable to SEDA-COG LDC in the amount of \$2,500 or 1% of the net SBA 504 loan amount, whichever is less.
(For start-up businesses) Business Plan.
Federal Tax Returns for the previous three years for Operating Company, Real Estate Holding Company, and affiliates.
Most recent interim balance sheet and income statement for Operating Company and Real Estate Holding Company.
Aging of A/R and A/P matching the most recent interim financial statements for Operating Company.
Schedule of Debts for Operating Company, Real Estate Holding Company, and affiliates.
Schedule of Previous Government Financing for Operating Company, Real Estate Holding Company, and affiliates.
Income statement projections for the next two years with written assumptions describing how the main categories of the income statement were determined.
(For start-up businesses) A pro forma balance sheet with written assumptions.
(For start-up businesses) Monthly cash flow analysis with written assumptions for the first 12 months of operation or for 3 months beyond the breakeven point, whichever is longer.
For each 20% or more owner or guarantor of the loan:
Federal Tax Returns for the previous two years.
Personal Financial Statement. If married, spouse must also sign.
Personal History Statement.
Schedule of Previous Government Financing.
Resume/work history/education.
Copies of driver's license.
For each identified "key employee" of the business:
Resume/work history/education.
Personal History Statement.

Item	s Needed for Loan Application
	4506-C IVES Request for Transcript of Tax Return for the Operating Company and Real Estate Holding Company. If purchasing an existing business, seller must complete one for seller's tax returns.
	Copy of key cost documents such as signed sales agreements, contractor cost estimates, vendor quotes for equipment, itemized listing of estimated "professional fees", etc.
	Franchise Agreement and Franchisor's Disclosure Statement, if applicable.
	Organizational documents for Operating Company, Real Estate Holding Company, and any guarantor Affiliates (Articles or Certificate of Incorporation, Certificate of Organization, By-Laws, Operating Agreement, Partnership Agreement, Fictitious Name Registration, Amendments, etc.).
	Assurance of Compliance of Nondiscrimination.