



HOOPA ECONOMIC DEVELOPMENT ADMINISTRATION
PO Box 1026, Hoopa CA 95546 PHONE:530-625-5565

BUSINESS LOAN APPLICATION

Dear Applicant,

Thank you for applying for a Business Loan, offered through the Hoopa EDA. A complete loan package is required to process your loan; Incomplete packets will not be accepted. Please submit the following documents:

- Business Loan Application (attached)
- Business Plan (not required for businesses with 3 or more years of operation)
- Financial projections for 3 years (Income statement and Cash Flow statement)
- Copy of Current Business License/Copy of Fictitious Business Name Statement
- Business Structure Documents: Partnership Agreement (Partnership), Articles of Incorporation & Corporation ByLaws (Corporation), Operating Agreement & Articles of Organization (LLC)
- Copy of valid state issued ID (Driver's License or ID)
- Proof of Tribal enrollment
- 3 most recent paystubs (or other documentation to support income)
- 3 months' bank statements (personal and business if applicable)
- Last 3 years' tax returns (individual and business, if applicable)
- Authorization of Release of Information (co-applicant must sign a separate form)
- Credit Report
- List of Collateral Offered

Existing Businesses must also provide the following additional documents:

- Year End financials (Balance sheet and Profit & Loss, existing businesses only)
- Accounts Receivable and Accounts Payable Aging (existing businesses only)
- Profit & Loss Projections (2 years)
- Evidence of business insurance
- Lease agreement (if applicable)

****Please note: There may be additional forms requested after the above documents are processed, depending on individual circumstances. Once your completed loan packet has been accepted, you will receive a written response within two weeks.***



BUSINESS LOAN APPLICATION

If your loan is approved, there will be follow up phone surveys, the first one occurring six months after the loan closing date. Your input will let us know what works and what needs improvement within our organization. Participation in the follow up surveys are a requirement of our loan programs. By initialing below, you are agreeing to follow up surveys throughout the duration of the loan with HDF staff and/or technical assistance partners to determine progress and identify issues that may arise.

Initial here: _____

APPLICANT INFORMATION	
Full Name:	
Social Security #:	Tribal Enrollment #:
Physical Address:	# of years at this address:
City/State/Zip:	County:
Mailing Address (if different):	
Telephone:	Email:
Date of Birth:	
Are you a veteran? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, what branch?	
Highest level of education completed:	
Are you head of household? <input type="checkbox"/> YES <input type="checkbox"/> NO	

EMPLOYMENT AND INCOME		
Present employer:	Position:	# of years there:
Employer Address:	City/State/Zip:	Ph.:
Present Salary: (gross) \$ /month	(net) \$ /month	
Other income:	Source:	
Do you receive public assistance? <input type="checkbox"/> YES <input type="checkbox"/> NO	Food Stamps: Yes No	Other:

CO-APPLICANT EMPLOYMENT AND INCOME		
Present employer:	Position:	# of years there:
Employer Address:	City/State/Zip:	Ph.:

Present Salary: (gross) \$ /month	(net) \$ /month	
Other income:	Source:	
Do you receive public assistance? Yes No	Food Stamps: Yes No	Other:

BUSINESS INFORMATION			
BUSINESS NAME		EMPLOYER IDENTIFICATION NUMBER	
LEGAL STRUCTURE			
<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation			
STAGE OF DEVELOPMENT			
<input type="checkbox"/> Start-up <input type="checkbox"/> Existing Business			
CURRENT NUMBER OF EMPLOYEES			
FULL TIME		PART TIME	
PROJECTED NUMBER OF EMPLOYEES			
FULL TIME		PART TIME	

FUNDING REQUEST			
USE OF FUNDS: Complete the following table to determine the amount of loan you need, what you will use the funds for, and what resources you have available to secure your loan.			
AMOUNT NEEDED:		USE OF FUNDS (use "new purchases" section below to itemize equipment)	
Amount requested from HDF	\$	Working Capital	\$
Owner's equity:	\$	Equipment, machinery, computers	\$
Other investors:	\$	Furniture & Fixtures	\$
Total Sources:	\$	Inventory	\$
		Real Estate	\$
		Other	\$
		Total project cost:	\$
REPAYMENT PERIOD REQUESTED		SOURCE OF REPAYMENT	
(MONTHS)			

NEW PURCHASES

By valuing new purchases, you are able to determine the amount of loan funds you are requesting. Knowing the actual prices of items to be purchased helps you calculate an accurate amount of funds needed. Please attach documentation of new purchases.

Description	Quantity	Retail value
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
Total Value		\$

EQUIPMENT AND INVENTORY LISTS: Use this section to determine the value of your current assets in terms of equipment and inventory. This can be used to determine what can be used as collateral, to secure your loan.

EXISTING EQUIPMENT

Description of Equipment	Quantity	Resale value
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
Total Value		\$

COLLATERAL: List your collateral (include year, make and model)

ITEM	VALUE	APPRAISAL DATE	APPRAISAL ATTACHED?
	\$		
	\$		
	\$		
	\$		
TOTAL VALUE:	\$		

APPLICATION FEE

Business Loans	Fee: \$50.00	Date Paid:
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PERSONAL FINANCIAL STATEMENT

ASSETS		LIABILITIES	
Liquid Assets		Short term	
Cash (checking and savings accounts)	\$	Credit Cards	\$
Short term investments	\$	Car loan	\$
Treasury Bills	\$	Construction Liens/Notes/Due	\$
Savings Certificates	\$	Loan on Life Insurance	\$
Money Market Funds	\$	Installment Loans	\$
Cash Value of Life Insurance	\$	Accrued Income Taxes	\$
Total Liquid Assets	\$	Other Debt	\$
Investment Assets		Total Short Term Liabilities	
Notes Receivable	\$	\$	
Long term Liabilities			
Marketable Securities	\$	Loans to purchase personal assets	\$
Bonds	\$	Loan to acquire business	\$
Real Estate (investment)	\$	Mortgage on personal residence	\$
Tax Incentive Investments	\$	Note to business	\$
Retirement Funds	\$	Total long term liabilities	\$
Total Investment Assets	\$	TOTAL LIABILITIES	\$

Personal Assets			
Residence	\$		
Vacation Property	\$		
Art, Antiques	\$		
Furnishings	\$		
Vehicles	\$		
Other	\$		
Total Personal Assets	\$	NET WORTH	\$
TOTAL ASSETS	\$	Debt/Worth	%

INCOME	AMOUNT	MONTHLY EXPENSES	AMOUNT
Borrower's Salary	\$	Rent/Mortgage	\$
Spouse's Salary	\$	Utilities	\$
Bonus/Commissions	\$	Sewer/Water	\$
Alimony/Child Support	\$	Food/Groceries/take out	\$
Investment income	\$	Child Care	\$
Real Estate	\$	Insurance	\$
TANF/Cash Aid	\$	Internet/phone/cell phone	\$
Per Cap	\$	Cable/satellite	\$
Social Security	\$	Subscriptions (Netflix, Hulu)	\$
Other	\$	Alimony/Child Support	\$
		Gas	\$
		Grooming	\$
		Miscellaneous	\$
TOTAL INCOME:	\$	TOTAL EXPENSES:	\$

PERSONAL FINANCE STATEMENT CONTINUED

Have you ever filed for bankruptcy? YES NO

Are there any outstanding judgments against you? YES NO

Are you currently a party to a lawsuit? YES NO

BORROWER'S ACKNOWLEDGEMENT:

I certify that all responses provided on this application and attachments are true and correct. By signing below, I am giving authorization for HDF staff to check my credit and employment history. I understand that HDF is relying on the information I have provided to make a decision regarding the extension of credit.

Applicant's Signature

Date

FEDERAL REPORTING

DATA INFORMATION:

The following information is requested by the Federal Government in order to maintain compliance with Federal laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, but we encourage you to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race and ethnicity of applicants on the basis of visual observation or surname. If you do not wish to furnish the information below, please check the appropriate box:

I do NOT wish to furnish gender, ethnicity or race information. Initial: _____

I will furnish the information. (Please complete section below)

GENDER: Female Male

ETHNICITY: Hispanic Non-Hispanic

RACE: (Mark all that apply): Native American Caucasian Pacific
Islander
 Asian African American Other

Data information was provided by: Applicant HDF Staff

PROJECT INFORMATION SHEET

Please provide information regarding the planned use of funds, including borrowers cash equity contribution. Please be as accurate as possible when breaking down the anticipated use of funds.

PROJECT ITEMS	PROJECT COST
Acquisition of Land and Building	
Acquisition of land	
Building construction/Improvements	
Debt Refinance (Refinancing potential collateral in order to secure a first lien holder position)	
Acquisition of Machinery/Equipment	
Furniture/Inventory	
Working Capital	
Other	
PROJECT TOTAL COST	
LESS BORROWER'S CASH EQUITY CONTRIBUTION	
SOURCE OF CASH EQUITY CONTRIBUTION	
TOTAL LOAN AMOUNT REQUESTED	
PURPOSE OF LOAN:	
REQUESTED LENGTH OF TERM	

BORROWER'S ACKNOWLEDGEMENT:

I certify that all responses provided on this attachment are true and correct.

Applicant's Signature

Date

Applicant's Signature

Date



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AUTHORIZATION TO RELEASE INFORMATION

I, _____, have applied for or obtained a loan from HOOPA DEVELOPMENT FUND- EDA (HDF-EDA). As part of the process, HDF may verify or seek information necessary to processing my application, and other documents required in connection with my request.

I authorize you to provide to HDF-EDA, for verification purposes, the following applicable information:

- Past and Present employment or income records
- Bank accounts, stock holding, any other asset balances
- Past and present landlord references
- Other consumer credit references

If the request is for a new loan, I further authorize HDF-EDA to order a consumer credit report and verify other credit information.

The information HDF-EDA obtains is only to be used in the process of my request for assistance.

A copy of this authorization may be accepted as an original.

Full Legal Name

Social Security Number

Date of Birth

Signature

Date

BUSINESS PLAN OUTLINE

In addition to your financial information, a narrative business plan is also needed. Note: This outline is intended to assist in developing a business plan. A business should address the key areas in a way which best summarizes the business and/or project.

1. Description of the Business

- Name and location
- Legal Structure (sole proprietorship, partnership, or corporation)
- Principal /owner, name, address, telephone, percent ownership
- Nature of Business
- History of Business

2. Loan Request

- Describe reason for request of loan
- Describe entire project (.i.e. sources and uses of funds)
- How will HDF-EDA loan funds be used

3. Product or Service

- Describe product line(s) or type(s) of service
- Describe materials and supply sources
- Methods of production
- Quality and cost of production or service

4. Market Information

- Market area and trends
- Customers and potential new customers • Competition, names, locations, and size • Advantage of your product/service over others

5. Advertising and Distribution

- Methods of advertising and promotion
- Sales methods/pricing policy
- Customer service

6. Facilities

- Location
- Size, zoning
- Age and condition
- Expansion opportunities

7. Management and Personnel

- Management expertise
- Key personnel (positions, qualifications)
- Professional services
- Present and future manpower requirements
- Personnel breakdown-skill levels, hours, wage rates, unionization, etc.

8. Benefits to the Community

- Jobs created/retained
- Meeting community needs
- Increased tax base

9. Summary of Future Plans

- Short range and long range (next three years)
- Expansion
- Relocation

