

APPLICATION FOR FINANCING



The purpose of the MEDCO RLF is to support business activities for which commercial credit is not otherwise available on terms and conditions which would permit completion and/or the successful operation or accomplishment of the project in the City of Marion. Not all applications are approved.

Your MEDCO staff contact is Nick Glew at (319) 743-4724 or nick@medcoiowa.org.

INSTRUCTIONS:

1. **Applications are due no later than the last business day of the month.** Only fully completed applications received before the last business day of the month will be considered at the following month's Loan Review Committee meeting.
2. **Please limit your responses to the application questions and your Business Plan Summary (Exhibit A) narratives to a combined total of no more than 20 pages.** Applications must be typed and emailed to nick@medcoiowa.org.
3. **Complete all sections of the application form.** Show "N/A" where not applicable. Please contact the MEDCO if you need assistance. MEDCO staff will review the application at initial submission and determine if it is fully complete. Staff will provide immediate feedback if more information is required.
4. **Please complete the attached Ethnicity/Race/Gender Survey.** This information is not required at the time of application but is requested to ensure MEDCO's compliance with equal credit opportunity laws. Upon loan approval, ethnic, race, and gender information-reporting will be required of all loan recipients on an annual basis.

NOTICE OF REPORTING REQUIREMENTS:

Subsequent to loan approval, the following reporting information will be required:

- To verify employment data, copies of payroll reports shall be submitted semi-annually.
- Financial statements (Balance Sheets and P&Ls) shall be submitted semi-annually.
- Project progress reports shall be submitted semi-annually.
- Proof of liability insurance shall be submitted annually.
- A MEDCO representative will conduct site visits over the duration of the loan terms.

- Race, ethnic and gender information reporting may be required of all loan recipients on an annual basis.

All reporting requirements will be outlined in detail in the RLF Loan Agreement.

MEDCO requires all loan recipients to utilize automatic bank withdrawal for loan repayments.

APPLICATION FOR RLF ASSISTANCE

1. APPLICANT INFORMATION

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____ Title: _____

Phone: _____ Fax: _____ Email: _____

Tax ID Number (FEIN or SSN): _____

Business Structure:

- Cooperative
 C-Corporation
 S-Corporation
 LLC
 Partnership
 Sole Proprietorship
 Not for Profit

New Business? Yes No Date Established: _____

Name of Individual Completing this Form: _____

Project Location (if different from above): _____

2. OWNERSHIP INFORMATION:

Provide the following information on any person or company with over 5% ownership interest:

Name/Title	Address	% Ownership	Annual Compensation

Add an additional sheet, if necessary.

- 3. BRIEFLY DESCRIBE THE BUSINESS OR PROJECT TO BE FUNDED:**
Please limit your response to ~300 words.

- 4. BRIEFLY STATE THE OVERALL FUNDING NEED AND RLF NEED:**
Please limit your response to ~300 words.

6. PROJECT BUDGET:

The budget should identify all sources of funding being considered including owner equity/investments, the primary lender for the project and the sources of any public funds (local loan funds, federal programs, city assistance, etc.)

Use of Funds	Cost	MEDCO RLF	Source B	Source C	Source D	Source E
Land Acquisition	\$	\$	\$	\$	\$	\$
Site Preparation	\$	\$	\$	\$	\$	\$
Building Acquisition	\$	\$	\$	\$	\$	\$
Building Construction	\$	\$	\$	\$	\$	\$
Building Remodeling	\$	\$	\$	\$	\$	\$
Machinery	\$	\$	\$	\$	\$	\$
Furniture, Fixtures & Equip	\$	\$	\$	\$	\$	\$
Computers	\$	\$	\$	\$	\$	\$
Working Capital	\$	\$	\$	\$	\$	\$
Other (describe)	\$	\$	\$	\$	\$	\$
TOTAL	\$	\$	\$	\$	\$	\$

TERMS OF PROPOSED FINANCING					
Source of Funds	Amount	Type	Rate	Term	Conditions
Source A: MEDCO	\$				
Source B:	\$				
Source C:	\$				
Source D:	\$				
Source E:	\$				
TOTAL	\$				

7. EXHIBITS:

All exhibits must be signed by the responsible party and dated.

Exhibit A: Business Plan Summary, including:

- Description of the Business.
- Description of the Target Markets
- Your Unique Proprietary Advantage
- Sales & Marketing Plan (including a brief analysis of competitors.
- Description of Operations (facilities, seasonal employment fluctuations, local sources of materials, etc.)
- Management (including brief profiles of key management personnel.)
- A minimum of three references (banking, professional or trade).

Exhibit B: A letter from the participating lender(s) stating the terms and conditions of their participation and the reason why they will not finance the entire project.

Exhibit C: EOY balance sheets and income statements for the previous three years.

Exhibit D: A current balance sheet (not over 90 days old).

Exhibit E: Three- year projected P&Ls with notes of explanation for any variances.

Exhibit F: The names of affiliates and/or subsidiary firms with the most current fiscal year-end financial statements for each.

Exhibit G: Personal financial statement of the owner(s) of the business with more than 20% ownership in the business.

Exhibit H: Preliminary plans and specifications covering new construction, and an itemized list of machinery and equipment to be purchased.

Exhibit I: A list of collateral to be offered as security for the MEDCO loan (Note: An independent appraisal may be required.)

8. GENERAL CERTIFICATION:

Applicant: The undersigned certifies that he/she is the _____ (Title) of the applicant business applying for financing from MEDCO, that he/she is familiar with the records of the borrower and contents of this application, and that he/she is authorized to submit and sign the application. The information contained in this application, including all exhibits, is to the best knowledge of the undersigned, complete and accurate and presents fairly the condition of the applicant and project accurately its intended operations for the period set forth in this application.

The undersigned hereby gives permission to MEDCO and its subsidiaries to research the company's history, make credit checks, contact the company's financial institution, and perform other related activities for the reasonable evaluation of this application.

The purpose of the RLF is to support business activities for which credit is not otherwise available on terms and conditions which would permit completion and/or the successful operation or accomplishment of the project in the following eligible areas: City of Marion. The lender reserves the right to recall the loan if these requirements are not met. Please consult with MEDCO.

Applications are due no later than the last business day of the month. Only fully completed applications received before the last business day of the month will be considered at the following month's Loan Review Committee meeting.

If the application is approved the undersigned agrees to pay a loan closing fee of 2.0% of the total loan amount.

Applicant (typed): _____

Signature of Responsible Party: _____

Signing Date: _____

East Central Iowa Council of Governments:

In accordance with federal law and U.S. Department of Agriculture policy, MEDCO is prohibited from discriminating on the basis of race, color, national origin, sex, religion, age, disability, or marital or family status. (Not all prohibited bases apply to all programs.)

To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-w, Whitten Building, 1400 Independence Ave., SW, Washington, DC 20250-9410 or call (202) 720-5964 (voice and TDD). USDA is an equal opportunity provider and employer.

MEDCO is an Equal Opportunity Provider.

9. ETHNICITY/RACE/GENDER SURVEY

The following information is requested by the Federal Government for certain types of loans in order to monitor the lender's compliance with equal credit opportunity. You are not required to furnish this information, but are encouraged to do so.

The law requires that a lender may neither discriminate on the basis of this information nor on whether you choose to furnish it. However, if you choose not to furnish it, under Federal regulations, this lender is required to note race/ethnicity on the basis of visual observation or surname.

If you do not wish to furnish the above information, please check the box below.

I do not wish to furnish this information.

Ethnicity:

Hispanic

Latino

Other (describe) _____

Race: (Mark one or more)

White

Black or African American

American Indian/Alaska Native

Asian/Asian Continent

Native Hawaiian or Other Pacific Islander

Gender:

Male

Female