

CITY OF RED BUD
Revolving Loan Fund
Loan Application

I. Applicant / Business Information:

Legal Name of Borrower: _____
Home Address: _____ Phone No.: _____
Contact Person: _____ Title: _____
Business Address: _____ Bus. Phone No.: _____
Type of Business / Products Produced, Services Provided: _____

No. of Years in Business: _____ No. of Years Operating at Present Business Address: _____
Business Ownership: _____ Sole Proprietorship _____ Partnership
_____ Corporation _____ Other (Specify)
Principal Owners (Individuals, Address, and Phone of Those Owning 20% or more):

Present No. of Employees: Full Time: _____ Part Time: _____
Anticipated No. of Employees : 1 Year Full Time: _____ Part Time: _____
2 Years Full Time: _____ Part Time: _____

(Provide Listing of Job Classifications, Salary Ranges, and Number of Positions as a Separate Attachment)

**NOTE: At least 51% of all jobs created and/or retained must be filled by individuals meeting low/moderate income guidelines as established by the Illinois Department of Commerce and Community Affairs (Please see attached "Employer Job Certification" Form at the back of this application).*

Describe the nature of the project including what is to be financed in part or in whole with Revolving Loan Funds (ie: Acquire Businesses, Acquire Real Property, Purchase of New or Used Equipment, Working Capital): _____

II. Activity Detail

1. Property Acquisition

Applicable to project? Yes _____ No _____ If "yes", complete items listed below.
Address (If different from Business Address): _____
Phone Number (If different from Business Phone): _____
Applicant: Owns Business Property _____ Leases Business Property _____
If Leased, Owner's Name: _____

Owner's Address: _____
 Terms of Lease: _____ (Please attach a copy of Lease)
 Size of Property in Square Footage/Acreage: _____
 Existing Buildings: Total Square Footage Occupied: _____
 Approx. Year Constructed: _____ Proposed Buildings/Expansions: _____ Sq. Ft.
 Assessed Valuation of Property: \$ _____ (Most recent Year)
 Real Estate Taxes Paid: \$ _____ Year: _____

2. Description of Machinery / Equipment acquisition for Project

Applicable to Project: Yes: _____ No: _____ If Yes, Complete Items Below:

Item Description: _____	Estimated Cost: _____
Item Description: _____	Estimated Cost: _____
Item Description: _____	Estimated Cost: _____
Item Description: _____	Estimated Cost: _____

3. Description of Working Capital Expenditures (inventory, payroll, etc.)

Applicable to Project? Yes _____ No _____ If "Yes", Complete items below.

Activity Description: _____	Estimated Cost: _____
Activity Description: _____	Estimated Cost: _____
Activity Description: _____	Estimated Cost: _____
Activity Description: _____	Estimated Cost: _____
Activity Description: _____	Estimated Cost: _____

III. Total Estimated Project Costs:

Site Acquisition:	\$ _____
Site Improvements:	\$ _____
New Construction:	\$ _____
Building Renovations:	\$ _____
Capital Equipment:	\$ _____
Inventory/Working Capital:	\$ _____
Other Associated Project Costs:	\$ _____
Grand Total	\$ _____

Estimated Target Dates To:

Begin Project: _____ Complete Project: _____
 Occupancy/Start Up: _____

Project Financing:

Approach Lending Institution? Yes _____ No _____
 If Checked "No", Please Explain: _____

If Checked "Yes", Please Complete the Following:

Name of Lending Institution: _____
 Address: _____

Contact Person: _____
Title: _____ Phone No.: _____

Please State the Amount, Interest Rate, and Term of the Lender's Loan Commitment.

Please attach Lender Commitment Letter (Must indicate that RLF Funds are needed.)

Selecting one of the following, provide detailed justification on an attached sheet for the need for Community Development Assistance Program (CDAP) funds:

- FINANCING GAP – This argument will demonstrate that a business can raise only a portion of the financing necessary to complete the project. Reference the documentation within the application which supports this argument.

- RATE OF RETURN – This assumes that full financing is available, but the rate of return is insufficient to induce development. Provide the rationale and cite supporting documentation.

- LOCATIONAL – This argument is used when the firm is considering multi-state location options. CDAP funds are needed to equalize cost factor variations between sites. This requires disclosures for each site under consideration. This application must contain this supporting documentation.

IV. Request Use & Loan Amount Through City's Economic Revolving Loan Fund:

Use: _____ Amount: \$ _____

List Other Financing, Use & Amount, Required for Project:

Bank Loan:	Use: _____	Amount: \$ _____
SBA Loan:	Use: _____	Amount: \$ _____
Other:	Use: _____	Amount: \$ _____
Total Financing:		\$ _____

Certification:

AGREEMENT: The undersigned applied for the loan indicated in this application to be used in connection with the project described herein. All statements made in this application are true and are made for the purpose of obtaining the loan. Verification may be obtained from any source named in this application. The applicant agrees to abide by all Red Bud RLF requirements. The Applicant agrees to furnish any additional information to the City as needed to review and consider this loan request.

Signature of Applicant

Date

EMPLOYEE INCOME CERTIFICATION FORM INSTRUCTIONS

Employee Income Certification (EIC) form instructions to verify job creation/retention for Revolving Fund (RF) financial assistance projects.

NOTE: The Revolving Loan Fund (RLF) has undergone a name change. Any reference to the RLF will now be Revolving Fund (RF).

Job Creation/Retention

At least 51% of the jobs created/retained must be awarded to low-to-moderate income residents. Low-to-moderate (LMI) income status is based upon family size and family income using the median family income for the county in which the project is located. These income figures can be obtained from the internet or the Department. Use your HUD Income Limit Retrieval Instruction sheet to retrieve the current year HUD Income Limit's off of the Internet. The Income Limits will need to be inserted in Step 1 (example below) of the Employee Income Certification form. **Income is determined using the total family income of an applicant prior to hiring the employee to the newly created position.**

The purpose of the EIC form is to document the number of full time jobs (full-time equivalent (FTE) job = 1,950 hours of employment in a 12 month period) that have been created/retained as a result of the RF financial assistance project and the benefit to low-to-moderate income (LMI) persons. This form should be completed by each new hire until the project employment goals and LMI benefit agreed upon in the financial assistance agreement have been reached.

RFs also have the option of providing documentation that jobs created as a result of the project are held by WIA certified employment referrals. This documentation could be a letter from the WIA office confirming the number of candidates hired or separate referral forms provided for each hire. This documentation can be used in place of EIC forms.

Applicants whose projects involve job retention will submit completed, original income certifications as part of the application or prior to award of project. Verification of the jobs retained must be completed after 24 months. If the goal has been maintained then no further monitoring of the job retention is necessary. Once the job creation goal is met it is no longer necessary to monitor the borrower for job creation. Copies of the job creation/retention income certifications should be kept in the applicant's/borrower's file.

After all jobs have been created/retained the EIC forms (or WIA referral forms) should be backed up with additional documentation such as company payrolls or rosters showing the increase in or retainage of full-time employees over the required 24 month term.

Documentation of the job creation/retention and LMI benefit is to be reported on the Revolving Fund Semi-Annual Report.

The above information is required for both infrastructure and financial assistance projects under the Revolving Fund component.

A sample of Step 1 and Step 2 has been completed below with the RF documentation in red and the employee documentation in blue.

EXAMPLE

STEP 1: CIRCLE THE SIZE OF YOUR FAMILY. COUNT YOURSELF AND ALL FAMILY MEMBERS LIVING AT HOME.

FAMILY SIZE:	1	2	3	4	5	6	7	8
	\$34,400	\$39,300	\$44,200	\$49,100	\$53,050	\$57,000	\$60,900	\$64,850

HUD **2014** Income Limit's for **Randolph County (Updated APRIL, 2014)**

STEP 2: PLEASE CIRCLE ABOVE OR BELOW IN THE FOLLOWING QUESTION:

IS YOUR FAMILY'S TOTAL ANNUAL INCOME ABOVE OR BELOW THE AMOUNT FOR YOUR FAMILY SIZE AS STATED ABOVE?

EMPLOYEE INCOME CERTIFICATION
JOB RETENTION

DATE: _____

DEAR _____ EMPLOYEE:

Please provide the information requested on this form so that we can verify to the Department of Commerce and Economic Opportunity that your employment here is achieving the goals of the Illinois Community Development Assistance Program. The information will be placed in your **confidential** personnel file and is available to only a limited number of company officials. This information is also subject to verification by the _____ (unit of local government) and representatives of the Illinois Department of Commerce and Economic Opportunity. For assistance, please see _____. Thank you.

STEP 1: CIRCLE THE SIZE OF YOUR FAMILY. COUNT YOURSELF AND ALL FAMILY MEMBERS LIVING AT HOME.

FAMILY SIZE: 1 2 3 4 5 6 7 8

HUD 20 _____ Income Limit's for _____ County _____

STEP 2: PLEASE CIRCLE ABOVE OR BELOW IN THE FOLLOWING QUESTION:

IS YOUR FAMILY'S TOTAL ANNUAL INCOME **ABOVE** OR **BELOW** THE AMOUNT FOR YOUR FAMILY SIZE AS STATED ABOVE?

STEP 3: A. PLEASE INDICATE YOUR ETHNIC GROUP

Ethnic Category	Total Persons	# Also Hispanic
White		
Black/African American		
Asian		
American Indian/Alaskan Native		
Native Hawaiian/Other Pacific Islander		
American Indian/Alaskan Native and White		
Asian and White		
Black/African American and White		
American Indian/Alaskan Native and Black/African American		
Other Individuals Reporting more than One Race		

B. SEX: _____ MALE _____ FEMALE

C. ARE YOU A FEMALE HEAD OF HOUSEHOLD? _____ YES _____ NO

D. ARE YOU A PERSON WITH A DISABILITY? _____ YES _____ NO

STEP 4: PLEASE COMPLETE.

NAME: _____

SIGNATURE: _____ DATE OF HIRE: _____

WHEN COMPLETED, PLEASE RETURN TO _____, THANKS FOR YOUR HELP!

**EMPLOYEE INCOME CERTIFICATION
JOB CREATION**

DATE: _____

DEAR _____ EMPLOYEE:

Please provide the information requested on this form so that we can verify to the Department of Commerce and Economic Opportunity that your employment here is achieving the goals of the Illinois Community Development Assistance Program. The information will be placed in your **confidential** personnel file and is available to only a limited number of company officials. This information is also subject to verification by the _____ (unit of local government) and representatives of the Illinois Department of Commerce and Economic Opportunity.

For assistance, please see _____. Thank you.

STEP 1: CIRCLE THE SIZE OF YOUR FAMILY. COUNT YOURSELF AND ALL FAMILY MEMBERS LIVING AT HOME.

FAMILY SIZE: 1 2 3 4 5 6 7 8

HUD 20 _____ Income Limit's for _____ County _____

STEP 2: PLEASE CIRCLE ABOVE OR BELOW IN THE FOLLOWING QUESTION:

PRIOR TO YOUR EMPLOYMENT, WAS YOUR FAMILY'S TOTAL ANNUAL INCOME
ABOVE OR BELOW THE AMOUNT FOR YOUR FAMILY SIZE AS STATED ABOVE?

STEP 3: A. PLEASE INDICATE YOUR RACIAL GROUP

Ethnic Category	Total Persons	# Also Hispanic
White		
Black/African American		
Asian		
American Indian/Alaskan Native		
Native Hawaiian/Other Pacific Islander		
American Indian/Alaskan Native and White		
Asian and White		
Black/African American and White		
American Indian/Alaskan Native and Black/African American		
Other Individuals Reporting more than One Race		

B. SEX: _____ MALE _____ FEMALE

C. ARE YOU A FEMALE HEAD OF HOUSEHOLD? _____ YES _____ NO

D. ARE YOU A PERSON WITH A DISABILITY? _____ YES _____ NO

STEP 4: PLEASE COMPLETE.

NAME: _____

SIGNATURE: _____ DATE OF HIRE: _____

WHEN COMPLETED, PLEASE RETURN TO _____, THANKS FOR YOUR HELP!