



## UVEC Application For Financing INSTRUCTIONS

Please complete this application and provide the information requested on the business plan checklist. Financing needs are reviewed by the UVEC loan committee.

*All materials submitted to UVEC in connection with your loan application shall become the property of UVEC, unless otherwise requested and shall be retained or destroyed in accordance with UVEC's file retention policy.*

### I. INFORMATION ABOUT YOU

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

County: \_\_\_\_\_

Soc. Sec. #: \_\_\_\_\_ Year of Birth: \_\_\_\_\_

How did you hear about UVEC's loan program? \_\_\_\_\_

### II. INFORMATION ABOUT YOUR BUSINESS

Name of Business: \_\_\_\_\_

Business Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

County: \_\_\_\_\_ Telephone: \_\_\_\_\_

Business Structure: Sole Proprietorship \_\_\_ Partnership \_\_\_ S Corp \_\_\_ C Corp \_\_\_ Nonprofit \_\_\_

Date Established: \_\_\_\_\_ IRS Employer I.D. #: \_\_\_\_\_

Duns# \_\_\_\_\_ Projected Gross Revenues: \_\_\_\_\_

### III. INFORMATION ABOUT MANAGEMENT

List the names of all owners (having 20% or greater interest), officers, and/or partners.

Provide the percent of ownership and annual compensation. (Attach additional pages if necessary)

Name and Title: \_\_\_\_\_ % of Ownership: \_\_\_\_\_

Address: \_\_\_\_\_ Annual Compensation: \_\_\_\_\_

Name and Title: \_\_\_\_\_ % of Ownership: \_\_\_\_\_

Address: \_\_\_\_\_ Annual Compensation: \_\_\_\_\_

08/17/11

1

### IV. PROPOSED SOURCES AND USES OF FINANCING (Please be specific)

Sources	Uses
Bank _____	Land _____
UVEC _____	Buildings _____
Equity _____	Equipment _____
Owner Cash Contribution _____	Working Capital _____
Other _____	Other _____
Total Project \$ _____	Total Project \$ _____

**V. SUMMARY OF COLLATERAL**

Present Market Value	Outstanding Debt or Leases
Land & Bldgs _____	
Inventory _____	
Accts. Receivable _____	
Machinery/Equipment _____	
Furniture & Fixtures _____	
Other _____	
Total Collateral \$ _____	

**VI. BUSINESS EMPLOYMENT AND BENEFITS**

Current Employment: # Full-Time \_\_\_\_\_ # Part-Time \_\_\_\_\_

Minimum Starting Wage: Full-Time \$ \_\_\_\_\_ Part-Time \$ \_\_\_\_\_

Projected Employment Increases: # Full-Time \_\_\_\_\_ # Part-Time \_\_\_\_\_

Monthly Company Contribution % of Employee % of Dependent  
to Health Insurance: Benefits \_\_\_\_\_ % Benefits \_\_\_\_\_ %

F/T Worker Benefits:

(check if applicable)

Paid Holidays \_\_\_\_ Paid Vacation \_\_\_\_ Paid Sick Days \_\_\_\_  
S/T Disability \_\_\_\_ L/T Disability \_\_\_\_ Pension/Profit-Sharing \_\_\_\_  
Health Insur. \_\_\_\_ Dental Insur. \_\_\_\_  
Child Care \_\_\_\_ Education \_\_\_\_ Life Insurance

08/17/11

2

The processing of your loan may require that an investigative consumer report be made. You may request and receive from us any name, address, and telephone number of each consumer reporting agency issuing an investigative consumer report about you. If we receive such a request from you, we will provide this information to you within five (5) business days. You may then request and promptly receive from all such consumer reporting agencies copies of any such investigative consumer reports.

I/We understand that by signing this application I/we authorize UVEC or its Agent to make inquiries as needed to verify the accuracy of the information and to determine creditworthiness. I/We certify the information is true and accurate and is provided for the purpose of obtaining a loan. UVEC or its agent will maintain the confidentiality of this information and it will not be released without authorization.

We also give permission to UVEC to share information contained in this loan application with its Agent, Machias Savings Bank, to obtain underwriting assistance.

If Applicant is proprietor or general partner, sign here.

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Date

If Applicant is a corporation, sign below.

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Corporate Name

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Signature of President or duly authorized officer

Date

08/17/11

3

Certifications:

The undersigned certifies that the business applying for funds from the UVEC RLF Loan is at least 51% owned by those who are Citizens of the United States or reside in the United States after being legally admitted for permanent residence. If a sole proprietorship, the undersigned is a Citizen of the United States or resides in the United States after being legally admitted for permanent residence.

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Signed

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Print Name

Date

The undersigned (Borrower and Upper Valley Economic Corporation) agree that there is no conflict of interest between the two parties.

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Borrower		Lender	
Signed	Date	Signed	Date

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The undersigned agrees that there is no other credit available at reasonable rates and terms or from applicant's own resources.

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Signed	Date
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Pursuant to the Debt Collection Improvement Act of 1996, the undersigned applicant agrees to the following:  
Neither the applicant nor any stockholder or partner owning 20% or more in the applicant are delinquent on any federal indebtedness.

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Signed
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<b>Print Name</b>
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08/17/11