TIOGA COUNTY INDUSTRIAL DEVELOPMENT AGENCY

LOAN APPLICATION

Loan information and application forms may be obtained by writing or calling:

Tioga County IDA 56 Main Street Owego, NY 13827

(607) 687-8259 TDD (800) 662-1220

There is a *\$150.00 non-refundable application fee* collected with this completed application. Please make payable to TCIDA.

APPLICATION

Applicant			Full Address	
Name of Business			Tax Identification Numbe	er
Full Street Address			Telephone Number	
City Cour	ity Sta	ate	Zip Code	
Type of Business			Date Business Established	 I
Bank of Business Account	and Address			
DUN's Number			NAICS Code	
Use of Proceeds: (Enter gross \$ amounts rounded to nearest hundred)	Project Cost	TCIDA USE ONLY	Source of Proceeds	
Land Acquisition	\$		TCIDA loan request \$	
New Construction/ Expansion/Renovation	\$		Term of Loan	
Acquisition and/or moderni- zation of machinery and equipment	\$		Other Financing Sources A. Bank \$	
Inventory Purchase	\$		B. Equity \$	
Working Capital	\$		C. Other \$ (Please List	
Acquisition of Existing Business	\$			
All Other	\$			
TOTAL PROJECT COST	\$		TOTAL SOURCES \$	
Employment Plan: # Existing Jobs # Projected New Jobs # Retained Jobs			Average Hourly Wage Average Annual Wage	\$ \$

A full time employee is defined as working 37.5 hours per week on a year-round basis. Adjust part-time employees accordingly.

COLLATERAL -- BUSINESS AND/OR PERSONAL

If your collateral consists of

- (A) Land & Building
- (B) Accounts Receivable and/or
- (C) Inventory

Fill in the appropriate blanks.

If you are pledging

- (D) Machinery and Equipment
- (E) Furniture and Fixtures, and/or
- (F) Other

Please provide an itemized list (labeled Attachment A) that contains serial and identification numbers, if available. Include a legal description of Real Estate offered as collateral.

	Present Market Value	Present Loan Balance	IDA only Collateral Valuation	Collateral in name of:
A. Land & Building				
B. Accounts Receivable				
C. Inventory				
D. Machinery/Equip				
E. Furniture/Fixtures				
F. Other				
TOTALS				

With respect to any assets set forth, which are jointly owned with another, does applicant propose to furnish an unlimited personal guarantee to lender of the loan obligation executed by the co-owner(s) of the scheduled assets?

Yes _____ No _____

<u>Previous Government Financing</u>: If you or any principals have received any other Federal direct loan or guarantee assistance, complete the following:

Name of Agency	Original Amt. of Loan	Date of Loan	Balance	Current or Past Due

<u>Outstanding Debt:</u> Furnish the following information on all installment loans, contracts, officer and shareholder loans, notes and mortgages payable, term loans and/or revolving credit arrangements and capitalized leases. Present balance should agree with latest balance sheet submitted. (Attach additional sheets if needed.)

To Whom Payable	Original Amount & Date	Interest Rate	Present Bal./ MonthlyPymt	Maturity Date	Security	Current/ Past Due

<u>Management:</u> Proprietor, partners, officers, directors and stockholders. 100% ownership must be shown. (Personal guarantees of all individuals with 20% or more ownership will be required. Guarantees of spouses will normally be required also).

Name & Social Security No.	Complete Address	% Ownership

The following attachments must be completed where applicable. All questions answered are made a part of the application. All attachments must be signed and dated by person signing this form.

ATTACHMENT (1)	Submit Personal History Statement for each person (i.e. owners, partners, officers, directors, major stockholders, etc.)
ATTACHMENT (2)	Provide a current personal financial statement for each stockholder (with 20% or more ownership), partner, officer, and owner; including Social Security Number.
ATTACHMENT (3)	 Submit business Financial Statement which should include: a) Balance Sheet, Profit and Loss Statement, and Reconciliation of Net Worth for the past three years. If most recent statement is more than six months old, provide an interim statement.* b) Aging of Accounts Receivable and Payable. c) Projected Cash Flow Statement for first year (include assumptions the projections are based on). d) If new business, provide projected balance sheet, profit and loss statement, and cash flow for three years.
	* If Profit and Loss Statement is unavailable, provide explanation and substitute Federal Income Tax Returns.
ATTACHMENT (4)	Provide a brief history of your company and a paragraph describing the expected benefits of the project.
ATTACHMENT (5)	Provide a brief description of the educational, technical and business background for all people listed under management.
ATTACHMENT (6)	Based on the use of TCIDA funds, please provide the following:a) For land and building including renovations: purchase offer, current appraisal, quotes for construction/renovation work, plans, and specifications.b) For the purchase of machinery/equipment include a list of the equipment and quotes.c) For working capital, describe the uses.
ATTACHMENT (7)	If your business, owners or majority stockholders has a controlling interest in other businesses, please provide their names, amount of ownership and relationship with your company.
ATTACHMENT (8)	 Based on the form of organization, please provide the following: a) Corporation Articles of Incorporation of Filing Receipt from New York State Secretary of State; and Board Resolution authorizing loan applications for the project. b) Partnership Partnership Agreement and Filing Receipt. c) Sole Proprietorship Filing Receipt. d) Franchise Copy of Franchise Agreement and FTC Disclosure Statement.

ATTACHMENT (9)	TCIDA funds will be used or collateralized by land, buildings, construction or major renovation, an environment review must be provided. Other applicants may be required to provide an environmental review by TCIDA on a case-by-case basis.
	All FmHA IRP loan applications must include a environmental review. (Form FmHA 1940-20 "Request for Environmental Information).
ATTACHMENT (10)	Provide documentation of other sources of funding committed to the project (i.e. bank commitment letter, verification of equity, etc.)
ATTACHMENT (11)	 Provide documentation that TCIDA funds are necessary to complete the project and are not being used as a substitute for private capital. Documentation may consist of the following: a) A commitment letter from a participating bank stating the loan terms, the maximum amount to be extended by the bank, and the need for TCIDA's participation; and/or b) Bank rejection letter(s) listing the proposed loan terms, if available.
ATTACHMENT (12)	Banker's Information Release
ATTACHMENT (13)	Low Income Employment Certification (FmHA applicants only)
ATTACHMENT (14)	A \$150 application fee must accompany each loan application. This fee is non-refundable.

AGREEMENTS AND CERTIFICATIONS

AGREEMENTS:

- 1. I/We agree that the project will adhere to all local, state and federal air and water pollution standards.
- 2. I/We agree that if I/We do not comply with the Agreements and Certifications herein, or the program regulations listed herein and in the TCIDA Program Description and Environmental Compliance System Bulletin, or in the event of a default, or in the event of the violation of any federal, state or local law, statute, order, rule or regulation regarding the use of loan proceeds or operating practices, the total unpaid principal, together with unpaid interest thereon, will become immediately due and payable, at the option of TCIDA.
- 3. I/We agree that the project will adhere to all local, state and federal historic preservation laws and regulations.
- 4. I/We agree that I/We will obtain and maintain flood hazard insurance if required, pursuant to National Flood Plain Policy.
- 5. I/We agree that if construction is financed by this loan, accessibility to the handicapped will be assured by compliance with the standards of 41 CFR, Sub-Part 101-19.6.
- 6. I/We agree to provide an annual operating statement to the TCIDA within a reasonable time of the close of the fiscal year of the applicant organization.
- 7. I/We agree to use best efforts to utilize minority and/or women-owned businesses as vendors or subcontractors and minority and/or women individuals in any employment opportunities generated as a result of this project. Further, I/We agree to make good faith efforts to comply with the Affirmative Action Program of New York State and policies that include Governor Pataki's Executive Order No. 21, and rules and regulations issued thereunder.
- 8. I/We authorize disclosure of all information submitted in connection with this application to any funding source, private or public, as part of negotiations for their participation in the financial package.
- 9. I/We authorize TCIDA to collect confidential personal and business information relevant to the processing and evaluation of this loan.
- 10. I/We waive all claims against TCIDC and their staff and consultants.

- 11. I/We agree to post Civil Rights Guidelines in a conspicuous place accessible to employees, and to not violate any applicable Civil Rights guidelines.
- 12. I/We certify that we will comply with Federal Fair Labor Standards Act (i.e. Davis-Bacon) when required.

CERTIFICATIONS:

- 1. I/We certify that all information in this application and the Attachments are true and complete to the best of my/our knowledge and is submitted so the Loan Review Committee and the TCIDA Board of Directors can decide whether to grant a loan or participate with the lending institution in a loan to me/us.
- 2. I/We give the assurance that I/We will comply with Section 112 and 113 of Vol. 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 reports 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 non-discrimination requirements my/our loan can be called, terminated, or prepayment accelerated.
- 3. I/We certify that facilities under its ownership, lease, or supervision, which will be utilized in the accomplishment of the project or services financed by the TCIDA loan, are not listed on the Environmental Protection Agency's (EPA) list of violating facilities pursuant to Section 15.20 or 50 CFR, Part 15. Further, I/We certify that I/We will conform to all applicable environmental regulations including floodplains, wetlands, historic or archaeological properties, air and water quality, solid waste discharge, hazardous and/or toxic waste disposal, drinking water resources, sewage and non-renewable national resources.
- 4. I/We certify that I/We am/are not relocating operations or employment from another labor market with the proceeds of the proposed TCIDA loan.

I/We agree to all the preceding Agreements and Certifications.

I/We understand the contents and purpose of this application, and the regulations of the TCIDA loan fund.

I/We do solemnly affirm that to the best of my/our knowledge, information provided and statements herein are true and accurate.

I/We am/are aware that the filing of a false instrument in connection with the application for funding by a New York State public benefit corporation constitute an attempt to defraud the State and may be a felony under the laws of the State of New York.

If applicant is a proprietor or general partner, sign below:

By:		_ Date	
If applicant is a Corporation, sig	gn below:		
Corporate Name and Seal			_ Date
By:	Signature of President		
Attested By:	Signature of Corporate Secretary		

Bankers Information Release Private Loan Verification

Borrower hereby authorizes its lending institution to release financial information pertaining to the undersigned to the Tioga County Industrial Development Agency (TCIDA). Such information may be released exclusively to the personnel of TCIDA.

Date	Borrower Name:	
	Address:	
	Telephone :	
Lender Name:		
Address:		
Telephone:		
Account Representative:		
	e above mentioned account <i>has / h</i> ırrent and in good standing.	as not been paid on time for the past

If the above mentioned account is a secured loan, please provide the outstanding balance (______) and attach a separate list of collateral.

Account Representative / Date

Borrower Signature / Date

TCIDA Authorizing Signature / Date

TCIDA 56 Main Street Owego, NY 13827

PERSONAL FINANCIAL STATEMENT

Date	19	Social Security No
Name(s)		Position/Occupation
Business Name		Business Address
		Phone
Residence Address		Phone

PLEASE DO NOT LEAVE ANY QUESTIONS UNANSWERED. USE "NO" OR "NONE" WHERE NECESSARY.

ASSETS	IN EVEN	LIABILITIES	IN EVEN
	DOLLARS		DOLLARS
Cash on hand and in banks		Notes payable to banks - secured	
Marketable Securities-see Schedule A		Notes payable to banks - unsecured	
Non-Marketable Securities-See Schedule B		Due to brokers	
Securities held by broker in margin accounts		Amounts payable to others - secured	
Partial Interest in Real Estate Equities - see Schedule C		Amounts payable to others - unsecured	
Real Estate Owned - see Schedule D		Accounts and bills due	
Loans or Accounts Receivable		Unpaid Income Tax	
Automobiles and other personal property		Other unpaid taxes and interest	
Cash value - life insurance - see Schedule E		Real estate mortgage payable - see Schedule D	
Other assets - itemize:		Other debts - itemize:	
		TOTAL LIABILITIES	
		NET WORTH	
TOTAL ASSETS		TOTAL LIAB. AND NET WORTH	

ANNUAL SOURCES OF INCOME	PERSONAL AND GENERAL INFORMATION
Salary, bonus and commissions \$	Attorney
Dividends\$	Phone
Real Estate Income\$	Accountant
Other income* (*alimony, child support, or separate maintenance income need not be revealed if you do not	Phone
wish to have it considered as a basis for repayment.)\$	Are you a partner or officer in any other venture?
	Are you obligated to pay alimony, child support, or maintenance payments? If so, describe.
<u>TOTAL\$</u>	Income taxes settled through:
CONTINGENT LIABILITIES	Are any assets pledged?
Do you have any contingent liabilities? O YES O NO	
If yes, give details:	Are you defendant in any suits, or legal actions?
As endorser, co-maker or guarantor \$	Personal bank accounts carried at:
On leases or contracts\$	Checking:
	Savings:
Legal claims \$	Have you ever taken bankruptcy? Explain:
Other special debt\$	
Amount of contested income tax liens\$	

CONFIDENTIAL

SCHEDULE A - U.S. GOVERNMENTS AND MARKETABLE SECURITIES

No. of Shares or Face Value (Bonds)	Description	In Name of	Market Value	Are These Pledged?

SCHEDULE B - NON MARKETABLE SECURITIES

Description of Securities	No. of Shares Owned	Book Value Per Financial Statement Dated:	No. of Shares Outstanding	Total Value

SCHEDULE C - PARTIAL INTERESTS IN REAL ESTATE EQUITIES

Location of Property	% of Owner- ship	Туре	Yr. of Purchase	Cost (C) or Market (M)	Present Mortgage	Value of Equity	Mortgage Holder

SCHEDULE D - REAL ESTATE OWNED

Description of Property and Mortgagee Name	Date Acquired	Title in Name of	Cost	Market Value	Mort	gages
					Amount	Maturity

SCHEDULE E - LIFE INSURANCE CARRIED, INCLUDE., S.B.L.I. AND GROUP INSURANCE

Face Amount	Name of Company	Beneficiary	Cash Surrender Value	Loans

SCHEDULE F - BANKS OR FINANCE COMPANIES WHERE CREDIT HAS BEEN OBTAINED (INCLUDING CREDIT LINES)

Name and Address of Lender	Purpose	Secured or Unsecured	Original Date	High Credit	Current Balance

The information contained in this statement is provided for the purpose of obtaining, or maintaining credit with you on behalf of the undersigned, or persons, firms or corporations in whose behalf the undersigned may either severally or jointly with others, execute a guaranty in your favor. Each undersigned understands that you are relying on the information provided herein (including the designation made as to ownership of property) in deciding to grant or continue credit. Each undersigned represents and warrants that <u>the information provided is</u> <u>true and complete</u> and that you may consider this statement as continuing to be true and correct until a written notice of a change is given to you by the undersigned. The Association is authorized to exchange credit information covering this application and any credit granted. As part of the credit investigation process, the Association may request a consumer report in connection with this application for credit or any update or renewal. Upon request, the Association will tell me whether or not a consumer report was obtained, and if such a report was obtained, the Association will furnish me with the name and address of the consumer-reporting agency. I agree that the Association may retain this application whether or not credit is approved.

DATE	SIGNATURE
	ADDRESS

The following information is requested by the Federal Government in order to monitor compliance with Federal Laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, but are encouraged 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/gender/national origin of individual applicants on the basis of visual observation or surname.

Ethnicity:

Hispanic or Latino_____

Not Hispanic or Latino_____

Race: (Mark one or more)

White_____Black or African American_____American Indian/Alaska Native_____

Asian_____ Native Hawaiian or Other Pacific Islander _____

Gender:

Male _____ Female _____

This institution is an equal opportunity provider and employer. If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov."

TIOGA COUNTY INDUSTRIAL DEVELOPMENT AGENCY <u>STATEMENT OF PERSONAL HISTORY</u>

Please read carefully - PRINT OR TYPE

Each member of the business concern requesting assistance must submit this form. This form must be filled out and submitted by:

- 1. The proprietor, if a sole proprietorship.
- 2. Each partner, if a partnership.
- 3. Each officer, director and principals with 20% or more ownership, if a corporation.
- 4. Any other person, authorized to obligate the applicant to the loan being sought.

Name and address of applicant (Firm Name) (Street, City, State and Zip Code)	Amount Applied For

name, state NM	ment: (State name in full, MN, or if initial only, indica ies used, and dates each na , if necessary.	te initial). List	Date of birth: (Month, Day and Year) Place of birth: (City and State)
First	Middle	Last	U.S. Citizen Yes No
• •	percentage of ownership or the business concern?	stock owned or	If no, give alien registration number: #
			Social Security Number

Present Residence A	Address To	Address	City
FIOI	10	Auuress	City
		State	Zip Code
Home Telephone No. (()		Business Telephone No. ()
Immediate past res	idence address		
From	То	Address	City
		State	Zip Code

BE SURE TO ANSWER THE NEXT 2 QUESTIONS BECAUSE THEY ARE IMPORTANT.

THE FACT THAT YOU HAVE A CONVICTION RECORD WILL NOT NECESSARILY DISQUALIFY YOU. BUT AN INCORRECT ANSWER WILL PROBABLY CAUSE YOUR APPLICATION TO BE TURNED DOWN.

1. Have you ever been convicted of any criminal offense other than a minor vehicle violation? Yes No If yes, furnish details on a separate sheet. List name(s) under which convicted, if applicable.					
2. I			le, probation or conditional release supervision? ame and telephone number of supervisor.		
Name and address	s of participating bank				
Signature		Title	Date		
STATE	OF NEW YORK)	Sworn to before me t	this day of		
COUNT	TY)	in the year			

NOTARY PUBLIC

ATTACHMENT 5

TCIDA MANAGEMENT PROFILE

This form is designed to assess the management experience and should be completed by people listed under Management on Page 3 of the loan application. Please attach additional sheets as necessary.

Individual's Name: _____

Individual's Position/Relationship to Firm:

Educational Background (i.e. College or Technical School, Major area of concentration, year graduated):

Military Service: Branch Enlistment Dates Rank at Discharge

Emp	loymer	nt Hi	istor	y:

Dates Employed From	_ То
Name of Company	
Address	
Position and Responsibilities:	

Dates Employed From	То	
Name of Company		
Address		
Position and Responsibilities:		

Describe your strengths and weaknesses, as they apply to the management skills necessary for your business:

Dun & Bradstreet

Data Universal Numbering System (DUNS) Number

What is a	A Data Universal Numbering System (DUNS) number is a unique nine-		
DUNS Number?	digit identifier that is the most recognized and widely used business identification number worldwide. The number is provided and		
	maintained by commercial company Dun & Bradstreet (D&B).		
Why does my small business need a DUNS number?	 As a small business owner, there are a number of reasons why it is important for your business to obtain a DUNS number. 1. Getting a DUNS Number enables businesses to start the process of building their business credit. 2. A DUNS number is required for any business interested in submitting a grant application or entering into a contract with the United States Federal Government, state and local governments, as well as major retailers. 3. A DUNS number is required for any business applying for the Small Business Administration's (SBA) America's Recovery Capital loans. 4. A DUNS number is required for any small business wishing to establish a business credit report. Other businesses, lenders, vendors and investors looking to partner with you will want to know more about your business, including your assets, relationships with other companies and history of bill payment. To find this information, it is very likely that they will try to look you up by your DUNS Number. 5. The Tioga County Industrial Development Agency (TCIDA) requires all businesses submitting a loan application to obtain 		
	and maintain a DUNS number.		
How can I obtain a DUNS number?	Getting a DUNS Number for your company is a fairly simple process. Just contact Dun and Bradstreet by phone (800-700-2733) or online at <u>www.DandB.com</u> and apply for one. It takes at least 30 days to get a new DUNS Number, but if you need one right away, there is a procedure for expediting your application. When you are applying for your DUNS Number, you will need the name and address of the business, the telephone number, the number of employees at your physical location, and a contact name. Once you have a DUNS Number, you will be able to update your financial information as you need to when changes occur within your company, and you will be able to do business credit checks on your company as needed to make sure the information that is on file about your business is correct.		
Is there a fee for obtaining a DUNS number?	There is no fee associated with obtaining a DUNS number.		