



## TECHNOLOGY ENTERPRISE FUND APPLICATION

### Borrower's Name and Contact Information

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

Type of Company/Organization:     LLC     S Corporation     C Corporation     LLP  
     Sole Proprietorship     Partnership     Non-Profit Organization

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

Project Address (If Different): \_\_\_\_\_

IRS ID Number: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Contact's Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Website: \_\_\_\_\_

### Management Information (owner(s), officer(s), director(s), & shareholder(s) who own 20% or more shares of the company)\*

Name & Address	Title	% Ownership

\***Personal financial statements** and **tax returns** are required for those with 20% or greater ownership interest. The Regional Business Fund, Inc. and/or its agents reserve the right to obtain **credit bureaus** on any business or individual in connection with this application.

### Bank Information

Name of Participating Bank: \_\_\_\_\_

Name of Loan Officer/Account Representative: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

### Amount of Revolving Loan Fund and Terms Requested

Amount of Loan: \_\_\_\_\_ Use of Funds: \_\_\_\_\_

Payback Terms: \_\_\_\_\_

**Anticipated Uses and Sources of All Project Funds**

Source(s)	Amount (\$)		Use(s)	Amount (\$)
Total:			Total:	

**Projected Full-Time Employment**

Existing Full-Time Positions		Position / Title	Full-Time Positions Created			
Avg. Hourly Wage	Number of Existing Positions		Year One		Year Two	Total Number Created
			Avg. Starting Hourly Wage	Number Created	Number Created	

**Collateral**

Type of Collateral	Present Market Value (\$)	Present Loan Balance (\$)
Land & Building		
Machinery & Equipment		
Accounts Receivable		
Other: _____		
Other: _____		

**Please Answer the Following Questions:** (Check box that applies)

	Yes	No
Has the company, any officer, subsidiary or affiliate of your company been involved in any bankruptcy or insolvency proceedings in the last 36 months? <i>If yes, please provide the details as a separate exhibit.</i>	<input type="checkbox"/>	<input type="checkbox"/>
Has the company, any officer, subsidiary or affiliate of your company been involved in any lawsuits in the last 36 months? <i>If yes, please provide the details as a separate exhibit.</i>	<input type="checkbox"/>	<input type="checkbox"/>
Does the company, any officer, subsidiary or affiliate have any outstanding tax liens?	<input type="checkbox"/>	<input type="checkbox"/>
Does the company, owner(s), or member of Management Team have a controlling interest in other businesses? <i>If yes, please provide their names and relationship with your company along with a current balance sheet and income statement for each as a separate exhibit.</i>	<input type="checkbox"/>	<input type="checkbox"/>
Name of business:		
Relationship to applicant:		
Does your company buy from, sell to, or use the services of any concern in which owner(s), shareholder(s) or member(s) of the management team have a significant financial interest? <i>If yes, please provide the details as a separate exhibit.</i>	<input type="checkbox"/>	<input type="checkbox"/>
Are any of the individuals listed under "Management" on parole or probation? <i>If yes, please provide the details as a separate exhibit.</i>	<input type="checkbox"/>	<input type="checkbox"/>
Have any of the individuals listed under "Management" been convicted of a crime? <i>If yes, please provide the details as a separate exhibit.</i>	<input type="checkbox"/>	<input type="checkbox"/>

**THE FOLLOWING EXHIBITS MUST BE COMPLETED WHERE APPLICABLE AND INCLUDED AS PART OF YOUR APPLICATION.**

**Attachments:**

1. Balance sheet and profit and loss statements for last three (3) fiscal years.
2. Balance sheet and profit and loss statement for an interim period not more than ninety (90) days preceding the date of application.
3. Schedule of business debt.
4. Aging of accounts receivable and accounts payable.
5. Balance sheet, profit and loss statement and cash flow projections for two (2) years from date of application. Assumptions must be included.
6. Business description and financing proposal. This should include a brief company history; a discussion of your industry, sales and markets; discussion of competition; and other matters relevant to your application. All applicants on behalf of entities in business less than two years will submit a business plan.
7. Resumes of all individuals listed under "Management", with home addresses and phone numbers.
8. If you are buying equipment with loan proceeds, attach a list of the equipment to be purchased, with cost estimates.
9. If you are using loan proceeds for new construction, please attach plans and specifications along with a proposed construction contract.
10. Commitments for all private financing.
11. Participating lending institution's credit analysis, if available.
12. Personal financial statement and most recent personal tax return of principal owners (owners with 20% or more ownership).

**THE APPLICANT:**

- 1 Certifies that to the best of its knowledge and belief, the information being submitted to the Regional Business Fund, Inc. and its agent is true and correct.
- 2 Certifies that the applicant is in compliance with all laws, regulations, ordinances, and orders of public authorities applicable to it.
- 3 Certifies that the applicant is not in default under the terms and conditions of any grant or loan agreements, leases, or financing arrangements with its other creditors.
- 4 Certifies that the Regional Business Fund, Inc. and its agent is authorized to obtain a credit check on any principal or business associated with this application for the purposes of determining credit worthiness.
- 5 Agrees to reimburse the Regional Business Fund, Inc. and its agent for any reasonable expenses made in connection with this loan request, including, but not limited to, title work, legal fees, appraisals, recording/filing fees, etc.
- 6 Certifies that the applicant has disclosed and will continue to disclose any occurrence or event that could have an adverse material impact on the project. Adverse material impact includes but is not limited to lawsuits, criminal or civil actions, bankruptcy proceedings, regulatory intervention or inadequate capital to complete the project.

**In the event credit is extended, the applicant agrees to complete a direct payment authorization form allowing loan payments to be electronically debited via automatic clearing house (ACH).**

Signature	Title
Print Name	Social Security #
Signature	Title
Print Name	Social Security #

Date Submitted: \_\_\_\_\_

Please submit application to: Your Local Economic Development Corporation  
-or-  
Char Gurney or Beth Waldhart  
West Central Wisconsin Regional Planning Commission  
800 Wisconsin Street  
Mail Box 9  
Eau Claire, WI 54703  
Phone: 715-836-2918  
Fax: 715-836-2886  
Email: cgurney@wcrpc.org or bwaldhart@wcrpc.org  
Website: www.rbfinc.org