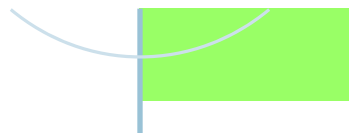


City of Columbus



Columbus Small Business Loan Program (CSBLP)



Application



ColumbusIndiana
Unexpected. Unforgettable.

...The Columbus Small Business Loan Program has funding available from the United States Department of Agriculture - Rural Development for small and emerging private business enterprises located, or locating within the corporate limits of the City of Columbus.

Mary K. Fardon
Mayor

Application Guidelines

Purpose of the Program

The purpose of the Columbus Small Business Loan Program (CSBLP) is to provide loans and technical assistance to small and emerging businesses in Columbus. Loans will be available for, but not limited to, those businesses impacted by the flood so they may get back in business while creating or retaining employment for persons within the community.

Loan Criteria

The decision to approve a loan will be based, in large part, on the ability of the business to: 1) demonstrate that a loan is necessary; 2) that it will have a positive impact on employment; 3) that the business can repay the loan; and 4) that it has proof of sufficient collateral.

Who can borrow?

A loan can be made to a new or existing business located within the corporate boundaries of Columbus. Loans will be available to applicants meeting the definition of "small and emerging private business enterprises" defined as "any private business that will employ 50 or fewer employees and has less than \$1 million in projected gross revenues." At least 51 percent of the business applying for a loan must be owned by those who are either citizens of the United States or reside in the United States after being legally admitted for permanent residence.

How much can be borrowed?

The minimum loan amount is \$5,000. The maximum loan amount is \$20,000. Exceptions to these caps will be considered on a case by case basis by the loan committee.

For how long can funds be borrowed?

Loan term will be based on the planned use of funds and the useful life of assets to be acquired, primarily the lesser of seven years or the life of the security.

How may funds be used?

Funds may be borrowed to finance working capital (inventory, receivables, operating capital), and equipment.

What is the interest rate?

Interest rates will be between 1-4%, typically not to exceed prime rate. Repayments will be made monthly. Payment deferrals may be available for up to six months.

Number of jobs to be created/saved with each project?

The applicant must create, or retain at least one full time job to be eligible for up to \$10,000 in loan funds from the CSBLP. To be eligible to receive the maximum \$20,000, applicant must create or retain two full time jobs (\$10,000 per job retained or created).

Is technical assistance available?

Yes, Columbus has made arrangements for several levels of technical assistance geared to the needs of potential borrowers. New businesses will be expected to participate in a business plan development program, and to utilize available resources through the Columbus Area Chamber of Commerce including SCORE and the Indiana Small Business Development Corporation to help them develop their business plan. This program includes helpful information on practical business issues, including tax issues, bookkeeping, and marketing. One-on-one technical assistance will be available to help borrowers with specific challenges they will face in operating their businesses.

The funding for this program is provided in collaboration with the United States Department of Agriculture, Rural Development, Rural Business Enterprise Grant program.

This institution is an equal opportunity provider and employer.

Call 376-2520

Application Steps

1. Complete the CSBLP program application form. Mail or deliver the application and all supporting materials to the Community Development Department, 123 Washington Street, Columbus, IN 47201.
2. City staff will determine your basic eligibility for the program; i.e. that your proposed use of funds is consistent with federal regulations.
3. You will receive a written or phone response after the City has received your application and supporting materials.
4. **If you have an existing business (in business for at least one year), your application will be evaluated based upon past management of your business and your historical financial performance.**
5. **If you have a new business (in business for less than one year), your application must include a business plan, prepared by you, reflecting how your business will operate.**
6. If you do not have a business plan, an adequate business plan will be required prior to being considered for financing under the CSBLP. The business plan should document the market for your product or service, the management of the business, and provide a financial projection. Entrepreneurs seeking assistance in developing their business plan will be referred to one of Indiana's Small Business Development Centers.
7. Upon receiving all requested information, your application will be evaluated. A personal interview will be held, credit and lien searches will be completed, and a recommendation will be prepared for the CSBLP Review Committee.
8. The CSBLP Review Committee/Board of Public Works and Safety will consider the request and approve or deny your loan request. If a loan is denied, you will be provided with information on the factors leading to that decision and how you might be able to improve the application.
9. Once the Loan Review Committee has approved your request, an environmental assessment will be required. Upon completion of a positive assessment, the loan process will continue. Your loan repayments will begin 30 days after closing.

Before You Begin

Before you begin filling out this Loan Application, please review the questions below. This will help you move forward as quickly as possible.

1. **Have you read the Program Guidelines on Page 2?** This information will answer some of the basic questions about the operation of the program and help you decide if you want to apply.
2. **Are you a new business** (less than one year in business)? If so, the CSBLP will **require** that you prepare an adequate Business Plan. If you have completed your business plan, be sure to enclose a copy with your Loan Application. **If you have not completed a business plan**, complete only Sections I and IV of the Loan Application and return the application as soon as possible. We will provide you with information concerning resources available to you to assist in the preparation of a Business Plan.
3. **Have you been in business for more than a year?** If so, enclose at least one year of tax returns or financial statements with this application (three years if available). Also, please include business financial information such as balance sheets, profit and loss statements, cash flow projections, etc. The more information we are able to review, the more quickly we will be able to process your application.

CSBLP Program Application

Section I, Business Information:

Business Owner(s):

Name

Home Address

Home Phone

E-mail Address

Business Name: _____

Business Address _____ City: _____ State: _____ Zip: _____

Business Phone: (____) _____ Fax #: (____) _____ E-mail Address: _____

Describe Type of Business (product or service): _____

Business Status: (Check One) New (under 12 months *See Section III*) Existing (over 12 months)

Type of Business Organization:

Partnership

Sole Proprietorship

Not yet established

"S" Corporation

"C" Corporation

Other: _____

Date Business Established: _____ Federal ID#: _____

Is this a female owned business? Yes No

Have you met all the legal requirements necessary to establish your business? Yes No

Section II, Employment Information:

Current Total Number of Employees (**existing businesses only**):

Part time _____ @ Hourly Rate of \$ _____ Hours worked per week _____

Full time _____ @ Hourly Rate of \$ _____ Hours worked per week _____

Family _____ @ Hourly Rate of \$ _____ Hours worked per week _____

Self _____ @ Hourly Rate of \$ _____ Hours worked per week _____

Planned Total Number of Employees **if CSBLP approved**:

Part time _____ @ Hourly Rate of \$ _____ Hours worked per week _____

Full time _____ @ Hourly Rate of \$ _____ Hours worked per week _____

Family _____ @ Hourly Rate of \$ _____ Hours worked per week _____

Self _____ @ Hourly Rate of \$ _____ Hours worked per week _____

Section III, Cash Flow Projection (form is available in digital format upon request)

From _____ to _____, 201_. Business Name: _____

Month of:													Total
Cash Sales													
Rental Income													
Total Income:													
Direct Expenses:													
Inventory Purchases													
Supplies													
Packaging/Shipping													
Wages/Payroll													
Fringe Benefits													
Payroll Taxes													
Overhead Expenses:													
CSBLP Payment													
Other Loan Payment													
Licenses & Fees													
Rent/Mortgage Payment													
Telephone													
Utilities (gas, water, electricity)													
Office Supplies/Postage													
Advertising													
Travel/Gas/Parking													
Entertainment/Food Insurance													
Legal & Accounting Fees													
Owner's Salary													
Owner's Tax Deposits													
Owner's Retirement Funds													
Start-Up Expenses:													
Start-up Inventory													
Rent/Utility Deposits													
Start-up Equipment													
Total Expenses													
Change (Income - Expenses)													
plus CSBLP Principal													
plus Owner's Contribution													
plus Previous Ending Position													
= Ending Position													

Section IV, For New Businesses Only (in business less than 1 year):

Individuals applying for loans to establish a new business will be required to prepare a business plan which adequately describes the operation of their proposed business.

Have you completed a business plan? Yes No If so, attach a copy of the business plan to this application.

When was the business plan prepared? _____ Was it prepared by a consultant/advisor? Yes No

If so, please provide his/her name and telephone number: _____

If you have not completed a business plan, would you like information on assistance available to help you prepare a business plan? Yes No

Section V, Financing Information:

Amount of Loan Requested: \$_____ Repayment Term Requested: _____ Months.

Purpose of Loan: _____

Describe how you will use CSBLP and other funds. (Use additional sheets if needed.)

<u>Item</u>	<u>Description</u>	<u>CSBLP Funds</u>	<u>Other Funds*</u>
Receivables:	_____	\$ _____	\$ _____
Inventory:	_____	\$ _____	\$ _____
Equipment:	_____	\$ _____	\$ _____
Furniture/Fixtures:	_____	\$ _____	\$ _____
Operating Expenses:	_____	\$ _____	\$ _____
Construction Costs:	_____	\$ _____	\$ _____
Remodel Costs:	_____	\$ _____	\$ _____
Other:	_____	\$ _____	\$ _____
Total	\$ _____	\$ _____

*Source(s) of Other (non-loan) funds: _____

Source of Repayment: Operating Profit Personal Income Other (Explain): _____

Proposed Collateral: Personal Guaranty Business Guaranty

Lien on Equipment (list): _____

Mortgage (describe property): _____

Other, explain: _____

Have you contacted a bank for financing? Yes No Was financing approved? Yes No

Name of Bank _____ Contact Person: _____ Phone: _____

Section VI, Personal Financial Information:

Full Name: _____ Date of Birth ___/___/___

Present Address: _____ City: _____ State: _____ Zip: _____

Home Phone: () _____ Marital Status: _____ Head of Household Yes No

Social Security Number _____ - _____ - _____ Are you a veteran? Yes No

Do you have Health Insurance? Yes No If Yes, provided by Self Employer Spouse's Employer

Do you have: Life Insurance (amount \$ _____)
 Disability Insurance? If so, provided by Self Employer

Name and Age of Dependents: _____

Total in Household, including applicant and spouse: _____

Present Employer: _____ How Long? ___ yrs. Phone: (____) _____

Employer Address: _____ Supervisor: _____

Personal References:

<u>Name</u>	<u>Address</u>	<u>Phone #</u>
_____	_____	(____) _____
_____	_____	(____) _____
_____	_____	(____) _____

Income:

Sources of Income	Amount
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total Monthly Income	\$ _____

Assets:

Current Assets	\$ _____
Account/Trade Receivables Assets	\$ _____
Inventory – Gross	\$ _____
Fixed Assets	\$ _____
Total Assets	\$ _____

Expenses:

Household <u>Monthly Expenses</u>		Household <u>Monthly Payments</u>		
<u>Source</u>	<u>Amount</u>	<u>Creditor</u>	<u>Acct #</u>	<u>Payment</u>
_____	\$ _____	_____	# _____	\$ _____
_____	\$ _____	_____	# _____	\$ _____
_____	\$ _____	_____	# _____	\$ _____
_____	\$ _____	_____	# _____	\$ _____
_____	\$ _____	_____	# _____	\$ _____
_____	\$ _____	_____	# _____	\$ _____
_____	\$ _____	_____	# _____	\$ _____
_____	\$ _____	_____	# _____	\$ _____
_____	\$ _____	_____	# _____	\$ _____
_____	\$ _____	_____	# _____	\$ _____
_____	\$ _____	_____	# _____	\$ _____
_____	\$ _____	_____	# _____	\$ _____
_____	\$ _____	_____	# _____	\$ _____
_____	\$ _____	_____	# _____	\$ _____
_____	\$ _____	_____	# _____	\$ _____
Total Monthly Expenses	\$ _____	Total Monthly Payments		\$ _____

Total Monthly Expenses & Payments \$ _____

- Are you a co-maker, endorser, or guarantor on any loan or contract? Yes No
- Do you currently have any bills which are more than 30 days past due? Yes No
- Are any of your obligations not listed? Yes No
- Are there any personal or business unsettled lawsuits or judgments
currently pending against you? Yes No
- Are there any personal or business or insolvency proceeding or
unresolved major disputes? Yes No
- Are you currently on probation? Yes No
- Have you ever filed for personal or business bankruptcy? Yes No

A "Yes" answer must be explained: _____

Section VII, Additional Information Required:

Please include the following information so that we can more quickly process your application.

- Business Plan dated _____ (required for start-up businesses, and existing business less than 1 yr. old)
- Financial statements for the last three years that the business has operated (if existing business)
- Personal tax returns for two years (required for start-up and existing businesses)
- Company tax returns for two years (required for existing businesses)
- Other (describe): _____

Section VIII, Additional Information Requested:

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 the 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 and ethnicity of applicants on the basis of visual observation or surname.

Ethnicity: (Mark One) Hispanic or Latino Not Hispanic or Latino

Race: (Mark One or More) White Black or African-American American Indiana/Alaska Native
 Asian Native Hawaiian or Other Pacific Islander

Gender: Male Female

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

- I do not wish to furnish this information.
- Information provided by Management

Section IX, Questions:

Before we begin evaluating your application, if you have any specific questions which you would like answered, please note them below.

Section X, Certifications:

Please read the following and sign the Application Form below.

The information in this loan application is provided for the purpose of applying for funds under the CSBLP Program. The information is accurate to the best of my knowledge. I understand that personal and/or business and credit information may be requested pursuant to this Loan Application and I hereby give my consent for such information to be provided to the city and/or the CSBLP Center of Administrative Resources association. I also understand that the CSBLP Program retains the sole discretion as to whether this Loan Application is approved, disapproved, or modified. It is my right to accept or decline the loan amount, rate, and terms approved by the Program.

Name (Printed): _____ Name (Printed): _____

Signature: _____ Signature: _____

Date: _____ Date: _____

City of Columbus Use Only

Date Received: _____ **Date(s) Reviewed:** _____ **Tracking Status:**



City of Columbus

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“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 <https://www.ascr.usda.gov/ad-3027-usda-program-discrimination-complaint-form>, 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."