

Clearwater Sales Tax Loan Application Information Checklist

This list is a helpful tool to help you make sure you have all the pertinent information when you turn in your application. The loan committee request that you provide the following information. There may, however, be additional information the committee will request.

Business Financial Information:

- _____ Village of Clearwater Sales Tax Loan Application
- _____ Business Plan, including projected two-year income and expenses – *template available*
- _____ Current year-to-date Profit and Loss Statement (signed) – *template available*
- _____ Recent balance sheet (signed) and previous 2 years, if available (form provided)
- _____ Letter of Approval from bank/lender (can be a conditional commitment)
- _____ *If Corporation:* 2 years complete corporate full tax returns (signed), Articles of Incorporation, By-Laws, Minutes of last Meeting and Corporate Resolution authorizing loan application and execution of required documents.
- _____ *If Partnership:* Copy of Partnership Agreement and 2 years partnership full tax returns (signed)
- _____ *If LLC or LLP:* Two years complete entity full tax returns (signed)
- _____ If purchasing an existing business, then supply the business's previous 3 years financial statements and full tax returns.

Personal Financial Information:

- _____ *If Sole Proprietor:* Two years completed individual federal full tax returns (signed)
- _____ *If "S" or "C" Corp, LLC or LLP:* Two years complete individual federal full tax returns, if over 25% ownership (signed)
- _____ *If Partnership:* Two years complete individual federal full tax returns for general partners and for limited partners, if over 25% ownership (signed)
- _____ Credit Report w/ Score
From either your bank or (www.annualcreditreport.com) for individual sole proprietors.
If Corporation: all shareholders with over 25% ownership
If Partnership: all general partners
If LLC or LLP: managers

Other Information:

- _____ Copy of Valid Driver's License
- _____ Certification and Authorization Form (completed and signed)
- _____ \$35 non-refundable application fee payable to the Village of Clearwater
- _____ Authorization Forms for Child Registry
- _____ Criminal History Checks, Nebraska State Patrol

**CLEARWATER APPLICATION
FOR BUSINESS LOANS AND GUARANTEES**

PLEASE COMPLETE ENTIRE FORM - DO NOT LEAVE ANY QUESTIONS BLANK

A. Business (Borrower) Information:

Name of Business to Receive Assistance: _____

Federal ID# _____

Business Entity: ___ Sole Proprietorship ___ General Partnership
 ___ "S" Corporation ___ "C" Corporation ___ Limited Partnership
 ___ Limited Liability Company ___ Limited Liability Partnership

(Depending on entity type, certain supporting documentation is needed – see checklist)

Address: _____ City: _____ State: _____ ZIP: _____

Contact Person: _____ Telephone Number (____) _____

Fax Number (____) _____ E-Mail: (if applicable) _____

Web Address (if applicable): _____

Business Classification: ___ Manufacturing ___ Warehousing & Distribution ___ Service
 ___ Retail ___ Research & Development ___ Tourism
 ___ Administrative Mgmt. Headquarters ___ Telecommunications
 ___ Other, please explain: _____

Does the business have a parent or subsidiaries? ___ Yes ___ No

If Yes, Identify name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Business Type: ___ Start-up (0-5 years old) ___ Acquisition ___ *Existing

*If Existing, list years in business _____

Ownership Identification: List all officers, directors, partners, owners, co-owners and all stockholders. Enter under Minority Code, a "1" if the person is a woman, a "2" if a member of a minority group, and a "3" if the person is disabled. (Minority code is only needed if you are also applying for CDBG funds).

Name	Title	Ownership Percent	Minority Code
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Personnel: (Full-Time Equivalent, FTE is based upon 2,080 hours per year).

Existing Number of FTE Positions: _____

FTE Positions to be created within 18 months of Application Approval: _____

Total Number of Seasonal FTE Jobs Created (i.e. Jobs which will be available for at least 3 continuous months and recur annually): _____

Starting wage per hour for your personnel: \$ _____

B. Project Information

USES OF FUNDS	Total Project Cost	Clearwater Funds Requested
Land Acquisition	_____	_____
Building Acquisition/Renovation	_____	_____
New Facility Construction	_____	_____
Acquisition of Machinery/Equip.	_____	_____
Acquisition of Furniture/Fixtures	_____	_____
Working Capital (includes Inventory)	_____	_____
Other (specify) _____	_____	_____
TOTAL:	_____	_____

SOURCES OF FUNDS

Note: Public financing requires the participation of a private financier and equity funds.

Participating Lender Information:

Name of Lending Institution: _____
Address: _____ City: _____ State: _____ ZIP: _____
Contact Person: _____ Phone: (____) _____
Loan Amount: \$ _____ Loan Term in years: _____
Interest Rate: _____ Percent _____ Variable _____ Fixed
Collateral Required: _____ Equity Required: _____

Equity Information:

Amount available by business or owners for Investment: \$ _____
Project Location:
____ Within the City Limits of Clearwater
____ Outside the City Limits, but within the Zoning Jurisdiction Of Clearwater

C. Other Information Needed

Business Documentation: See Information Checklist for detailed outline depending on business entity type. Info to include Credit Bureau Report, tax returns, profit and loss statement, balance sheet, articles of incorporation, by-laws and minutes of last meeting, corporate resolution and business plan.

List of Board of Directors:

The above information is accurate to the best of my knowledge and belief. The above information is provided to help you evaluate the feasibility of obtaining public financial assistance. I further authorize release of personal information and business credit information and realize that if a loan recommendation is made, the terms of the loan will be public information.

Dated: _____ Signature: _____

Dated: _____ Signature: _____



**PERSONAL FINANCIAL STATEMENT
 7(a) / 504 LOANS AND SURETY BONDS**

U.S. SMALL BUSINESS ADMINISTRATION

As of _____, _____

SBA uses the information required by this Form 413 as one of a number of data sources in analyzing the repayment ability and creditworthiness of an application for an SBA guaranteed 7(a) or 504 loan or, with respect to a surety bond, to assist in recovery in the event that the contractor defaults on the contract. Submission of this information is required as part of your application for assistance. Failure to provide the information would impact the agency's decision on your application.

Complete this form for: (1) each proprietor; (2) general partner; (3) managing member of a limited liability company (LLC); (4) each owner of 20% or more of the equity of the Applicant (including the assets of the owner's spouse and any minor children); and (5) any person providing a guaranty on the loan

Return completed form to:

For 7(a) loans: the Lender processing the application for SBA guaranty

For 504 loans: the Certified Development Company (CDC) processing the application for SBA guaranty

For Surety Bonds: the Surety Company or Agent processing the application for surety bond guaratee

Name		Business Phone	
Home Address		Home Phone	
City, State, & Zip Code			
Business Name of Applicant			
ASSETS		LIABILITIES	
(Omit Cents)		(Omit Cents)	
Cash on Hand & in banks.....	\$ _____	Accounts Payable.....	\$ _____
Savings Accounts.....	\$ _____	Notes Payable to Banks and Others.....	\$ _____
IRA or Other Retirement Account.....	\$ _____	(Describe in Section 2)	
(Describe in Section 5)		Installment Account (Auto).....	\$ _____
Accounts & Notes Receivable.....	\$ _____	Mo. Payments \$ _____	
(Describe in Section 5)		Installment Account (Other).....	\$ _____
Life Insurance – Cash Surrender Value Only.....	\$ _____	Mo. Payments \$ _____	
(Describe in Section 8)		Loan(s) Against Life Insurance.....	\$ _____
Stocks and Bonds.....	\$ _____	Mortgages on Real Estate.....	\$ _____
(Describe in Section 3)		(Describe in Section 4)	
Real Estate.....	\$ _____	Unpaid Taxes.....	\$ _____
(Describe in Section 4)		(Describe in Section 6)	
Automobiles.....	\$ _____	Other Liabilities.....	\$ _____
(Describe in Section 5, and include		(Describe in Section 7)	
Year/Make/Model)		Total Liabilities.....	\$ _____
Other Personal Property.....	\$ _____	Net Worth.....	\$ _____
(Describe in Section 5)			
Other Assets.....	\$ _____		
(Describe in Section 5)		Total	\$ _____
Total	\$ _____	*Must equal total in assets column.	
Section 1. Source of Income.		Contingent Liabilities	
Salary.....	\$ _____	As Endorser or Co-Maker.....	\$ _____
Net Investment Income.....	\$ _____	Legal Claims & Judgments.....	\$ _____
Real Estate Income.....	\$ _____	Provision for Federal Income Tax.....	\$ _____
Other Income (Describe below)*.....	\$ _____	Other Special Debt.....	\$ _____
Description of Other Income in Section 1.			

*Alimony or child support payments should not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

Section 2. Notes Payable to Banks and Others. (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)

Names and Addresses of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

Section 3. Stocks and Bonds. (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)

Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value

Section 4. Real Estate Owned. (List each parcel separately. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed.)

	Property A	Property B	Property C
Type of Real Estate (e.g. Primary Residence, Other Residence, Rental Property, Land, etc.)			
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Month/Year			
Status of Mortgage			

Section 5. Other Personal Property and Other Assets. (Describe, and, if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and, if delinquent, describe delinquency.)

Section 6. Unpaid Taxes. (Describe in detail as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

Section 7. Other Liabilities. (Describe in detail.)

Section 8. Life Insurance Held. (Give face amount and cash surrender value of policies – name of insurance company and Beneficiaries.)

I authorize the SBA/Lender/Surety Company to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness.

CERTIFICATION: (to be completed by each person submitting the information requested on this form and the spouse of any 20% or more owner when spousal assets are included)

By signing this form, I certify under penalty of criminal prosecution that all information on this form and any additional supporting information submitted with this form is true and complete to the best of my knowledge. I understand that SBA or its participating Lenders or Certified Development Companies or Surety Companies will rely on this information when making decisions regarding an application for a loan or a surety bond. I further certify that I have read the attached statements required by law and executive order.

Signature _____

Date _____

Print Name _____

Social Security No. _____

Signature _____

Date _____

Print Name _____

Social Security No. _____

NOTICE TO LOAN AND SURETY BOND APPLICANTS: CRIMINAL PENALTIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:

Knowingly making a false statement on this form is a violation of Federal law and could result in criminal prosecution, significant civil penalties, and a denial of your loan or surety bond application. A false statement is punishable under 18 U.S.C. §§ 1001 and 3571 by imprisonment of not more than five years and/or a fine of up to \$250,000; under 15 U.S.C. § 645 by imprisonment of not more than two years and/or a fine of not more than \$5,000; and, if submitted to a Federally-insured institution, a false statement is punishable under 18 U.S.C. § 1014 by imprisonment of not more than thirty years and/or a fine of not more than \$1,000,000. Additionally, false statements can lead to treble damages and civil penalties under the False Claims Act, 31 U.S.C. § 3729, and other administrative remedies including suspension and debarment.

PLEASE NOTE: According to the Paperwork Reduction Act, you are not required to respond to this request for information unless it displays a valid OMB Control Number. The estimated average burden hours for the completion of this form is 1.5 hours per response. If you have questions or comments concerning this estimate or any other aspect of this information collection, please contact: Director, Records Management Division, Small Business Administration, 409 Third Street SW, Washington, D.C. 20416, and SBA Desk Officer, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, D.C. 20503. PLEASE DO NOT SEND COMPLETED FORMS TO OMB.

Clearwater Sales Tax Loan – Elements of a Basic Business Plan

In order for the Village of Clearwater to understand your business and the project you wish us to help finance we ask that you provide us a basic business plan. The business plan will help us to assess not only your business and the project for which you are asking funding but help us establish a likelihood of repayment. A business plan does not have to be an extravagant twenty-page document but please cover the basic elements below:

- Introduction and Business Description
- Project Description that funding is requested for
- Products and services
- Competition and Customers
- Marketing, Advertising and Promotions Plan
- Personal and Business Goals
- Finance Projections and Financial Statement

Upon request, the Clearwater Economic Development Office will provide a basic Business Plan Template.

Clearwater Village Sales Tax Loan Continuing Education Enticement

It is in the best interest of the Village of Clearwater that loan recipients undergo continuing businesses related education. The Village of Clearwater is investing in your company by offering a low interest loan. As a small business owner you play a major role in the success of your business, yet many small business owners will not invest in themselves. For this reason we are adding an enticement that you re-invest in yourself through education.

Acceptable Education:

- Seminar focused on small business (this must be cleared with the Economic Development Director before credit will be awarded)
- Attend two Northeast Community College Center for Enterprise small business classes (held in Neligh)
 - * note: some classes will require more than one day commitment

Investing in continuing education by indicating interest at time of application and embarking on one of the two options listed above during the life of the loan will result in ½ percent interest credit to your loan. The rate will be adjusted after notice of completion is given to the Director.

CERTIFICATION AND AUTHORIZATION

Applicant: _____

Lender:

Village of Clearwater
PO Box 116
Clearwater, NE 68726

Certification

To Village of Clearwater ("Lender")

1. Applicant (and co-applicant if applicable), _____ has applied for a loan from Lender. In applying for the loan, Applicant provided to the Loan Committee of the Lender various information about Applicant and the requested loan, such as the amount and source of equity, income information, and assets and liabilities. Applicant certifies that all of the information is true and complete. Applicant made no misrepresentations to Lender, nor did applicant omit any important information.
2. Applicant understand and agrees that Lender may verify any information provided concerning Applicant's application, including, but without limitation, verifications from financial institutions of the information provided.

Authorization to Release Information

1. Applicant has applied for a loan from the Village of Clearwater ("Lender"). As part of the application process, Lender, any issuer of the loan and any collateral title insurer may verify information Applicant provided to Lender either before or after the loan is closed.
2. Applicant authorizes you to provide to Lender any and all information and documentation they may request and any information pertaining to a borrower's default in payment. Such information may include, but not limited to, income, bank, money market, and similar account balances; credit history; and copies of income tax returns.
3. Lender may address and send this authorization to any person or company named below:
 - a. Financial Institution/Loan Officer _____
 - b. CPA Firm/Accountant _____
 - c. Law Firm/Attorney _____
 - d. Other _____
4. A copy of this authorization may be accepted as an original.

Authorization to File Financing Statement

Applicant hereby authorizes Lender to file the appropriate Financing Statements for the agreed upon collateral prior to executing a security agreement.

Applicant is also aware that the terms of the loan recommendation will be furnished to the Village of Clearwater Board and will be public information and includes the following: business entity, project description, loan amount, length of loan, interest rate, security, repayment, loan closing date and any other pertinent information.

Signature:

Applicant

Date

Applicant

Date



This form is to be used to request a Central Registry Check. Individuals must enter information into each field. If a field is not applicable write NOT APPLICABLE. Individuals must sign and date on page 2; select which Central Registry check(s) are authorized to be checked; and have their signature notarized. If the individual is under the age of 19, the parent or guardian must sign and have their signature notarized. Please indicate below if the results are to be sent to a business or organization by checking the box and providing the Name and Portal ID of the business or organization.

Central Registry checks can also be requested online at <https://ecmp.nebraska.gov/DHHS-CR/>
More information can be found at: <http://dhhs.ne.gov/CentralRegistry>

Business/Organization Check:

ORGANIZATION/BUSINESS INFORMATION

Name:	Portal ID:
<input type="text"/>	<input type="text"/>

Organization/Business must provide Portal ID to access results.
Visit <https://ecmp.nebraska.gov/DHHS-CR/> to create a Portal ID.

INDIVIDUAL INFORMATION

First	Middle	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of Birth	Age	Social Security Number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Address

City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>

Phone Number:

Other names, such as a maiden name, former married name, or nickname.

Names and birthdates of your children and children who lived with you:

All previous addresses at which you have resided (minimum City & State):

Please release the following information to myself or the business or organization listed above (Check all that apply). This Authorization is valid for a period of 6 months from the date of the signature:.

Nebraska Child Abuse and Neglect Central Registry (CAN Registry)

1. Whether or not I am listed on the CAN Registry, and the following information regarding that listing:
- a. Date of the alleged child abuse or neglect; and
 - b. The classification of the case pursuant to Neb. Rev. Stat. 28-720. (i.e., Agency Substantiated or Court Substantiated).

Nebraska Adult Protective Services Registry (APS Registry)

1. Whether or not I am listed on the APS Registry, and the following information regarding that listing:
- a. Date of the alleged adult abuse or neglect; and
 - b. The classification of the case pursuant to Neb. Rev. Stat. 28-376. (i.e., Agency Substantiated or Court Substantiated).

Signature of Individual/Guardian

Date

STATE OF _____)
COUNTY OF _____) ss.

The foregoing instrument was acknowledged before me this _____ day of _____, 20____ by:

Printed Name of Individual/Guardian

Affix Official Notary seal here

Notary Public

Instructions: Mail completed form to :

DHHS Accounting
P.O. Box 94906
Lincoln, NE 68509

Amount: \$2.50 Per Release Form whether both Central Registries are marked or only one

Payment: Only Check or Money Order accepted. No cash. Make checks payable to "Department of Health and Human Services"

Note: If your Release Form is sent back as Incomplete, another payment of \$2.50 is required



NEBRASKA STATE PATROL

Criminal History Record Request

1. Purpose of form

This form is used to request a Record of Arrest and Prosecution (RAP) sheet for person of interest listed below. The RAP sheet includes only Nebraska fingerprint based arrests and resulting dispositions. There is a \$12.50 fee for this service. This fee is accepted as cash, check or money order. Make checks payable to Nebraska State Patrol. Certification/Notarization of record by the Nebraska State Patrol must be specifically requested. For questions, call the Criminal identification Division at 402-479-4971.

Requests can also be made online at ne.gov/go/cbg for an additional fee of \$3. Online requests can be paid with a credit or debit card.

2. Request Information

Date of Request:			
This request is on (Check one):	<input type="checkbox"/> Yourself	<input type="checkbox"/> Someone else	Reason for request:

3. Person of Interest (Person on whom the background check will be complete)

Please provide as much information as possible. **First & Last Names and Date of Birth (DOB)** are required fields.

First Name:	Middle Name:	Last Name:	
DOB:	Place of birth:	Race:	Gender:
Current Street Address:		City, State, Zip code:	
Phone #:	Fax #:	ALIAS/AKA: List any other names used: maiden/married/adopted/nicknames/short names, etc...	
Social Security Number: - -		<i>This request will not be denied for refusal to provide a social security number, but the criminal history check <u>may take longer without the number</u>, which will be used only for the purpose of confirming identity during the criminal history check.</i>	

4. Individual or agency requesting the background check (Only if different than section 2)

Agency/Company Name:			
Individual Name:			
Mailing Address:	City, State, Zip code:		
Phone #:	Fax #:	Email:	
Results will be faxed to the number provided unless a self-addressed stamped envelope is enclosed. For security reasons we are unable to send results by email.			

Mail completed form with payment to: Nebraska State Patrol, Criminal Identification Division
PO Box 94907
Lincoln, NE 68509-4907

Signature of Requester (individual or agency)

5. Notarized Release (Optional)

Portions of the criminal history record may be redacted in accordance with Nebraska Revised Statute §29-3523. If you would like a full release of the criminal history record, the person of interest (from section 3) must sign this form before a notary public. If this form is NOT notarized, a public record will be released to you. See §29-3523 for the difference between a *public* and *full release* criminal history record.

I consent to the disclosure and copying of any Record of Arrest and Prosecution to the person or entity listed above in Section 4.

State of _____)

County of _____)

)ss

Signature of Person of Interest from Section 3

Subscribed and sworn to before me this _____ day of _____, _____.

Notary Public

LOAN CLOSING PROCEDURE

The following is the procedure that will be followed upon approval of a loan by the Village of Clearwater Board:

1. Loan committee will make a 2-part recommendation to the City Council.
First part will be the loan terms and the second part will be the performance standards that must be met before the loan is closed and loan check is issued (building size, type, timeline, jobs created, etc.)
2. If a loan recommendation is approved by the village board, the village attorney will provide the primary lender with a take out commitment letter so the lender will be assured that the funds from sales tax are committed for the project.
3. **Primary lender will finance project until completion.**
4. Primary lender will request disbursement.
5. Loan Committee and primary lender will make a joint decision on project completion according to predetermined specs (building size, type, renovations, etc.).
6. Loan closing between village and applicant will occur when the project is deemed complete according to specs. Village attorney will prepare all necessary loan closing documents.
7. Village will issue a joint party check made payable to both primary lender and the borrower. Borrower will sign off on check and allow the bank to apply it to the loan.
8. Collateral – bank has the 1st on all, when village make loan payment the collateral will be reassigned so the village is covered.
9. Loan repayment will begin one month after closing.