

CITY OF HILLSBORO

MONTGOMERY COUNTY, ILLINOIS

447 South Main Street P.O. Box 556 Hillsboro, IL. 62049-0556 (217) 532-5566 (217) 532-6615 FAX (217) 532-5567 County Seat Montgomery County

Established 1823

Hillsboro City Council Regular Meeting, 7 p.m. Second & Fourth Tuesdays

REVOLVING LOAN APPLICATION

The City of Hillsboro has established a Revolving Loan Fund to assist in financing small businesses located in the City. The purpose of the fund is to help create and retain jobs as well as economic growth for those eligible for assistance.

The fund is intended to help fill the gap in conventional financing, not to compete with conventional finance institutions or private lenders. The funds are to be used in combination with outside financing and owner equity. A private lender (bank, SBA, etc.) must provide at least 51 % of the needed loan.*

Projects which may be funded are:

- 1. Purchase of machinery, equipment or inventory.
- 2. Working capital as part of an expansion or modernization that will create or maintain employment
- 3. Funds may be used for construction of new facilities or additions, as well as, renovation of existing facilities.

Features of the Revolving Loan Fund are:

- 1. No application fee
- 2. No legal fees
- 3. No credit report fee
- 4. No recording fees
- 5. No points charge
- 6. Less interest
- 7. Terms up to (10) years
- 8. Personal guarantees required

^{*}See attachments concerning our recapture strategies and managements.



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REVOLVING FUND LOAN PRELIMINARY APPLICATION

PRELIMINARY APPLICATION QUESTIONNAIRE:

- A. Applicant Name:
- B. Business Name:
- C. Type of Business:
- D. New / Existing ?:
- E. Job Creation or Retention:
- F. Site:
- G. Own or Lease ?:
- H. Amount of Assistance Desired:
- I. Collateral:
- J. Brief Description of Project:

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Hillsboro's Revolving Fund Recapture Strategy

The purpose of our lending money through the revolving loan program is to help stimulate economic growth in the City of Hillsboro. The loans will be used to assist with the retention and growth of existing business entities, as well as provide capital needed to start new businesses. The funds would also be used to encourage minority owned businesses and to provide incentive for established businesses to relocate in Hillsboro. One of our objectives will also be to ensure that the applicants benefit a minimum of 51% low to moderate income persons in the area. Another objective is to help increase the property and sales tax base.

Hillsboro's Revolving fund strategy is as follows: uses for funds would include site development and infrastructure extension costs, construction of new facilities or additions, as well as, renovation of existing facilities. Funds could also be used for leasehold improvements, the purchase of new or used equipment and working capital. We feel for every \$15,000 of funds provided one full time job should be created or retained. Full time would be a minimum of 1,950 hours worked per year. The City of Hillsboro's contribution will not exceed 50 percent of the financial obligation or \$15,000.00, whichever is less, subject to availability of funds. We will not fund projects of a speculative nature. The funds will only be used in the corporate boundaries of the City of Hillsboro. If applications exceed the annual funding, those with the greatest potential for job creation, and meeting our purpose criteria, will get first priority.

Applications will be generated by sending information to Hillsboro's existing businesses, provide RLF information to the Chamber of Commerce to include in their marketing package. The information will also be available to all organizations representing minority groups. The City will publicize the granting of RFL application acceptance at City Council meetings, this way the newspapers and radio will be able to help promote the program. Banks and Savings and Loan organizations in the City will also be made aware of the program and fund availability.

To help manage the RFL plan the City of Hillsboro will appoint members to the loan review committee. The committee shall consist of the Mayor, Finance Commissioner, City Attorney, but not limited to these peoples. The committee will review the application and make recommendation to the City Council. The recommendation will include a description of the project, costs, source of funds, security required, special conditions, and reasons for approval or denial. All other information is kept confidential. The loan documents, including commitment agreements, liens, title policies, security recordings, transfer tax declarations, amortization schedules and security releases, shall be obtained and completed by the City Attorney. The City Clerk and Treasurer will monitor repayments of the loan, job creation and/or retention reports required to be provided semi-annually until the commitment is met. Delinquent loans, when an RLF payment becomes 10 days past due, a \$25.00 late fee will be added. At 30 days the City will send a formal letter requesting payment. Should the payment become 45 days past due the matter will be turned over to the City Attorney to pursue. All legal rights will be exercised by the City to reclaim funds. Legal counsel will be consulted during foreclosure and liquidation proceedings if events warrant. Additionally any note 45 days past due will be reported to the City Council at a regular scheduled Council meeting.

The City will not use more than 10% of the RLF revenue for administration fees. In the event the City opts to deduct fees for administration documentation will be kept for auditing purposes. Assistance provided by the RLF fund will result in at least 51% benefit to low or moderate income persons. The City of Hillsboro agrees to report semi-annually on the status of our RLF program to the Department of Commerce and Community Affairs. We will report any changes in our recapture strategy to the Department of Community Affairs for Approval. In the event of a bad loan the City will take all legal steps necessary to recover the funds.

Small Business Revolving Loan Application					
Loan Applicant:					
Applicant's Home Address					
City, State, Zip:					
Home Phone No Office or daytime phone:					
GENERAL BUSINESS INFORMATION					
Type of entity: Corporation Partnership S-Corporation Proprietorship					
Fed. Employee ID. NO. (FEIN) Ill. Unemployment Ins. Acct. No					
Date Business was started: or date to be started:					
Business Name:					
Business Address:					
City, State, Zip:					
Business Phone No.: S.I.C. Code:					
Briefly Describe Your Business Operation :					
SPECIFIC PROJECT JOB INFORMATION					
What is the nature of your project? (Check One) New Business Start-Up Expansion of Existing Business Rehabilitation to meet bldg and / or health codes General Equipment Upgrade to Remain Competitive Will Your Project Result In: (Check One) Job Creation					
Job Retention If, Retention, How Many ?					

SMALL BUSINESS REVOLVING FUND APPLICATION

FINAL CHECK LIST

SUBMIT THIS COMPLETED CHECKLIST WITH YOUR APPLICATION

Applicant	Office Use
A) LETTERS OF COMMITMENT Have you furnished documentation of <u>ALL</u> so of leveraging in commitment letters? Loans from financial institutions must have language indicating the loan amount, specified term and interest, collateral condit attendant to the loan and the fact that the loan is approved. Bank/Financial Institution SBA Other	-
B) HISTORY OF THE COMPANY— Have you furnished a brief history of the busi and past employment growth?	iness
C) MARKET INFORMATION/ PLAN — Have you furnished information on your company's products or services and identified existing potential major customers, competitors and current market trends?	***************************************
D) HISTORIC FINANCIAL STATEMENTS — Have you furnished historical finanstatements for the past three years and interim statements dated no more than nine days prior to application. This information must be signed and dated: 1. Profit and Loss (Income) Statements 2. Balance Sheets 3. Disclosure of Contingent Liabilities 4. Aging of Account Receivable & Accounts Payable (Dated no more than 30 days prior to application)	
E) THREE YEAR PROJECTIONS — Have furnished projected financial statements for the next three years, including footnote page describing how you arrived at projections? 1. Preform a Balance Sheet. (Include all requested funds) 2. Profit and Loss (Income) Statement. 3. Cash Flow Statement. (One year monthly statement of cash operat	
You may use the attached form.) F) LAND AND BUILDING INFORMATION — Have you furnished information of land and/or building that is being acquired and/or offered as collateral? This infor1. An appraisal by a Credentialed Appraiser (e.g., MAI, SRA.) 2. A copy of the Purchase Option Agreement - (If acquiring). Please indicate if the document has a lease back agreement. 3. A Contractor or Architect's Cost Estimate - for building construction or renovation. 4. A Draft Rental/Lease Agreement - If renting space.	mation must include
G) MACHINERY AND EQUIPMENT INFORMATION - Have you furnished inform the major equipment or classes of equipment to be acquired with the funds and/or as collateral? This information must include; 1. Vendor Cost Estimates - For acquisition of new machinery and equipment proving and installation expenses, attach written estimates. Incompare, model and serial numbers. 2. Certified Appraisal - For used machinery and equipment provide a appraisal demonstrating that the fair market value is in line with the chase price and a specified description of the equipment including model and serial numbers if available.	offered ipment. clude n e pur-

	H) INVENTORY INFORMATION - Have you furnished information on the inventory to be
	acquired with the funds and/or offered as collateral?
	1. Vendor cost estimates - For acquisition of new inventory, attach written estimates.
	2. Appraisal - For used inventory, provide an appraisal demonstrating
	the market value.
	I) WORKING CAPITAL INFORMATION — Have you furnished detailed information explaining
	your working capital needs ?
	J) ARTICLES OF INCORPORATION — Have you furnished a copy of the company's articles
	of incorporation and by-laws? If the company is partnership, please submit a copy of the partnership agreement. If the company is Sole Proprietorship, please indicate.
	K) NEED FOR PUBLIC FUNDS — You must furnish a statement for one of the following in justification of public funds.
	I. Financial/Theoretical Gap2. Locational
	L) PERSONAL RESUME (s) — Have you furnished a resume for each owner, officer, director, partner, or management person as identified in Section II of the application?
	M) PERSONAL FINANCIAL STATEMENT — Have you furnished a detailed personal financial
	statement for each principal owning/guaranteeing/controlling 20% or more of the company or
	offering a guarantee? This information must include name, home address and social security number. (CPA firm certification letters not acceptable. Please use attached form.)
	N) BANKRUPTCY - Have you or any officers of your company ever been involved in bankruptcy
	or insolvency proceedings? If so, please provide the details. If none, initial here.
	O) PENDING LAW SUITS — Are you, your business or any officers or principals of the
	business involved in any lawsuits? If yes, please provide the details. If not initial.
	P) SUBSIDIARIES — Does your business have any subsidiaries or affiliates? If yes, please provide their names and the relationship with your company along with a current balance sheet and operating statement for each.
	Q) FRANCHISE — If your business is a franchise, include a copy of the franchise agreement and a copy of the FTC disclosure statement supplied to you by the franchiser.
	R) SITE MAP — Have you furnished a map that outlines the general location of the project and shows the location of any flood plain areas?
	S) COMPLIANCE WITH PUBLIC ACTS — Have you reviewed the summary information on
	each of the following Acts and included the applicable documentation of compliance?1. Prevailing Wage Act
	2. Historic Resources Preservation Act.
	3. Farm Land Preservation Act.
	4. Illinois Human Rights Act.
	 Assumed Name Act (check one) a. General partnership/sole proprietors are required to register at the
	County level.
	 b. Limited partnership/corporation/franchises are required to register at\ the Secretary of State.
	6. Drug Free Workplace Act.
	T) SITE VISIT — (If applicable) Has a site visit been completed by a DCCA Regional Economic
	Development Representative or a Small Business Development Center Representative? The Site Visit Report must accompany your application.
	U) JOBS CREATED OR RETAINED — Have you furnished documented information on the
	number of jobs to be created or retained in the next 24 months?
	V) FLOOD INSURANCE CERTIFICATION — You must provide certification of Flood Insurance If, applicable

W) INVOLVEMENT WITH OTHER BUSINESS — Does your business, it's owners or majority stockholders own or have a controlling interest in other businesses? If yes, please provide their names and the relationship with your company, along with a current balance sheet and operating statement for each. Also, do you buy from, sell to or use the services of any concern in which someone in your company has a significant financial interest? If yes, provide details on a separate sheet of paper labeled Exhibit W.
X) EXPORT LOANS — Does your business presently engage in Export Trade?
Yes No Do you plan to begin exporting as a result of this loan? Yes No
Y) RELATIONSHIP TO LENDER — Do you or your spouse or any member of your household, or anyone who owns, manages or directs your business or their spouses or members of their households work for the Small Business Advisory Council, SCORE, or ACE, and Federal Agency or the participating lender? If so, please provide the name and address of the person and the office employed. Label this exhibit Y. If none, check here: Yes No
Z) CREDIT REPORTS — Please include Credit Reports for each owner, officer, director or partner who owns 20% or more of the company.

City of Hillsboro REVOLVING LOAN FUND LOAN APPLICATION

Applicant / Business Information: A. Legal Name of Borrower: Home Address: _____ Home Phone: _____ Title: Contact Person: Business Phone:_____ Business Address: Type of Business / Products Produced, Services Provided:_____ Number of Years in Business: Number of Years operating at Present Business Address:_____ Business Ownership: ____ Sole Proprietorship ____ Partnership ___ Corporation ___ Other (Specify)____ Principal Owners (Individuals, Address, and Phone of those owning 20% or more) Present Number of Employees: Full Time: _____ Part Time:_____ Anticipated Number of Employees: 1 Year Full Time: _____ Part Time: _____ 2 Year Full Time: _____ Part Time: ____ (Provide Listing of Job Classifications, Salary Ranges, and Number of Positions as a Separate Attachment) *NOTE: At least 51 percent of all jobs created and/or retained must be filled by individuals meeting low to moderate income guidelines as established by the Illinois Department of Commerce and Community Affairs (Please see attached "Employer Job Certification" Form at back of this application). Describe the nature of the project including what is to be financed in part or in whole with Revolving Loan Funds (i.e., acquire businesses, acquire real property, purchase of new or used equipment, working capital)

B. Activity Detail

1. Property Acquisition

	Applicable to project? Yes No If "Yes", complete items below.	
	Address (If Different From Business Address):	
	Phone Number (If Different From Business Address):	
	Applicant: Owns Leases Business Prop	pertv
		,
	If Leased, Owner's Name:	
	Owner's Address:	
	Terms of Lease:	(Attach Copy of Lease)
	Property Size: (Sq. Ft. / Ac	creage)
	Existing Buildings: Total Square Footage Occupied:_	
	Approximate Year Constructed:	
	Proposed Buildings / Expansions:	Sq. Ft.
	Assessed Valuation of Property: \$ Real Estate Taxes Paid: \$ 20	(Most Recent Year)
	Real Estate Taxes Paid: \$ 20	
2	Description of Machines, / Favignment Association for De	
2.	Description of Machinery / Equipment Acquisition for Pr	<u>roject</u>
	Applicable to Project ? Yes No	
	If "Yes", Complete Items Below.	
	ii 100 , complete items below.	
	Item Description	Estimated Cost \$
	Item Description	
	·	
_	D 10 000 0 000	
3.	Description of Working Capital Expenditures (inventory	, payroll, etc.)
	Applicable to Draiget 2 Veg. No.	
	Applicable to Project? Yes No If "yes", Complete items below.	
	if yes, complete items below.	
	Activity Description	Estimated Cost \$
	Activity Description	
	Activity Description	
	Activity Description	Estimated Cost \$
	Activity Description	Estimated Cost \$
	Activity Description	Estimated Cost \$
		-

Total	Estimated Project Costs:				
Site A	Acquisition	\$			
	mprovements	\$			
New	Construction	\$			
	ng Renovations	\$			
	al Equipment	\$			
	tory/Working Capital	\$			
Other	Associated Project Costs	CP CP			
	TOTAL	\$			
Estim	ated Target Date To:				
Begin	Project				
Comp	olete Project				
Occup	pancy/Start Up				
Proje	ct Financing:				
Appro	eached Lending Institution?	Yes	No	-	
If Che	ecked "No", Please Explain				
	ecked "Yes", Please Complete the				
Addre	e of Lending Institutioness				
Conta	act Person				
Title_					
Dioco	a atata tha Amaunt Interact Data	and Tanna of th	alandar alaan	- a ua ua ilian a u i	
	e state the <u>Amount, Interest Rate,</u> e attach lender commitment letter				
Selec	ting one of the following, provide d	etailed justifica	tion on an attach	ed sheet for the need for	CDAP funds:
[]	FINANCING GAP - This argume financing necessary to complete supports this argument.			, ,	
[]	RATE OF RETURN - This assume induce development. Provide the		•		insufficient to
[]	LOCATIONAL - This argument is funds are needed to equalize costite under consideration. This approximately approxi	st factor variation	ons between sites	s. This required disclosu	

Use: City	y of Hillsboro RLF	Amount : \$		-	
	ther Financing, Use and A		•		
	Bank Loan Use:		\$		
SBA Loa	ın Use:	Amount	\$		
	Use:		\$		
	Total Financii	ng \$			
project described he pan. Verification m	undersigned applied for the erein. All statements made ay be obtained from any so rements. The Applicant ag this loan request.	in this application ource named in this	are true and are mades application. The app	e for the purpose of plicant agrees to abi	obtaining the ide by all City of
Signa	ture of Applicant		Da	nte	

D. Requested Use and Loan Amount Through City of Hillsboro Economic RLF:

AUTHORIZATION

The City of Hillsboro is authorized to conduct any inquiries it decides are necessary to verify the accuracy of the information contained in this application and to use any reasonable method including, but not by way of limitation, obtaining a credit report, to determine the creditworthiness of the loan applicant.

Date:	Signature:	SS#
Date:	Signature:	SS#

SMALL BUSINESS REVOLVING LOAN APPLICATION

PERSONAL FINANCIAL STATEMENT as of: This form is to be completed by each proprietor if more than a sole proprietor exists. In the case of a partnership by each limited partner owning more than 20% or more interest in said partnership and by each general partner. In the case of a corporation, each shareholder owning 20% or more of the voting stock as well as each corporate officer and director. This form must also be completed by each person serving in the capacity as guarantor (co-signer) for applicant's loan. Name Business Phone () Residence Address Residence Phone () City, State, Zip Applicant's Business Name

Assets			Liabilities			
Cash on hand in Banks\$			Accounts Payable\$			
Savings and Cert. of Deposit\$			Note	s Payable to Ba	nks & Others	.\$
IRA or other retirement acct\$			Insta	Ilment Account	(Auto)	\$
Accounts and notes Receivable\$			Installment Accounts (other)\$			
Life insurance (cash surrender value)\$ Describe in section #8			Loan	s on life insura	nce	\$
Stocks and bonds\$			Mort Desc	gages on real e	state	\$
Real Estate owned\$		- "	Unpa Desc	id taxesribe in section (5	\$
Automobile present value\$\$			Other Descr	liabilities	7	\$
Other Personal property\$\$			Total	liabilities		.\$
Other assets\$			Net Worth\$ Total\$			
Section 1 Source of Income				(Contingent Liabilitie	S
Salary			An endorser or Co-maker\$ Legal claims and judgments\$ Provisions for federal income tax\$ Other Special debt\$			
Se	ection 2. Notes	Payal	ole to B	ank and Others	3	
	Name and a	ddress	of Not	te holder(s)		
Name and address of note holder(s)	Original Balance	Curr Bala		Payment Amount	Frequency (Monthly etc.)	How secured collateral
			***		· · · · · · · · · · · · · · · · · · ·	

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

Small Business Revolving Loan Application
Loan Applicant:
Applicant's Home Address
City, State, Zip:
Home Phone No Office or daytime phone:
GENERAL BUSINESS INFORMATION
Type of entity: Corporation Partnership S-Corporation Proprietorship
Fed. Employee ID. NO. (FEIN) Ill. Unemployment Ins. Acct. No
Date Business was started: or date to be started:
Business Name:
Business Address:
City, State, Zip:
Business Phone No.: S.I.C. Code:
Briefly Describe Your Business Operation:
CDECTELC DDO TECT TOD TALEODAY ATTION
SPECIFIC PROJECT JOB INFORMATION What is the nature of your project? (Check One.)
What is the nature of your project? (Check One) New Business Start-Up Expansion of Existing Business Rehabilitation to meet bldg and / or health codes General Equipment Upgrade to Remain Competitive Will Your Project Result In: (Check One) Job Creation

SMALL BUSINESS REVOLVING FUND APPLICATION

FINAL CHECK LIST

SUBMIT THIS COMPLETED CHECKLIST WITH YOUR APPLICATION

Applicant	Office Use
A) LETTERS OF COMMITMENT Have you furnished documentation of A of leveraging in commitment letters? Loans from financial institutions must language indicating the loan amount, specified term and interest, collateral attendant to the loan and the fact that the loan is approved. Bank/Financial Institution SBA Other	have
B) HISTORY OF THE COMPANY— Have you furnished a brief history of the and past employment growth?	e business
C) MARKET INFORMATION/ PLAN — Have you furnished information on company's products or services and identified existing potential major custo competitors and current market trends?	
D) HISTORIC FINANCIAL STATEMENTS — Have you furnished historical statements for the past three years and interim statements dated no more than days prior to application. This information must be signed and dated: 1. Profit and Loss (Income) Statements 2. Balance Sheets 3. Disclosure of Contingent Liabilities 4. Aging of Account Receivable & Accounts Payable (Dated no more than 30 days prior to application)	
E) THREE YEAR PROJECTIONS — Have furnished projected financial states for the next three years, including footnote page describing how you arrived projections?	
 1. Preform a Balance Sheet. (Include all requested funds) 2. Profit and Loss (Income) Statement. 3. Cash Flow Statement. (One year monthly statement of cash of You may use the attached form.) 	operations.
F) LAND AND BUILDING INFORMATION — Have you furnished informal land and/or building that is being acquired and/or offered as collateral? This1. An appraisal by a Credentialed Appraiser (e.g., MAI, SRA.)2. A copy of the Purchase Option Agreement - (If acquiring). Please indicate if the document has a lease back agreement3. A Contractor or Architect's Cost Estimate - for building contractor or renovation4. A Draft Rental/Lease Agreement - If renting space.	s information must include
G) MACHINERY AND EQUIPMENT INFORMATION - Have you furnished the major equipment or classes of equipment to be acquired with the funds a as collateral? This information must include;	nd/or offered nd equipment. es. Include vide an vith the pur-

H) INVENTORY INFORMATION - Have you turnished information on the inventory to be	_
acquired with the funds and/or offered as collateral?1. Vendor cost estimates - For acquisition of new inventory, attach	
written estimates.	
2. Appraisal - For used inventory, provide an appraisal demonstrating the market value.	
I) WORKING CAPITAL INFORMATION — Have you furnished detailed information explaining your working capital needs?	_
J) ARTICLES OF INCORPORATION — Have you furnished a copy of the company's articles of incorporation and by-laws? If the company is partnership, please submit a copy of the partnership agreement. If the company is Sole Proprietorship, please indicate.	_
K) NEED FOR PUBLIC FUNDS — You must furnish a statement for one of the following in justification of public funds1. Financial/Theoretical Gap2. Locational	-
L) PERSONAL RESUME (s) — Have you furnished a resume for each owner, officer, director, partner, or management person as identified in Section II of the application?	
M) PERSONAL FINANCIAL STATEMENT — Have you furnished a detailed personal financial statement for each principal owning/guaranteeing/controlling 20% or more of the company or offering a guarantee? This information must include name, home address and social security number. (CPA firm certification letters not acceptable. Please use attached form.)	-
N) BANKRUPTCY - Have you or any officers of your company ever been involved in bankruptcy or insolvency proceedings? If so, please provide the details. If none, initial here	
O) PENDING LAW SUITS — Are you, your business or any officers or principals of the business involved in any lawsuits? If yes, please provide the details. If not initial	-
P) SUBSIDIARIES — Does your business have any subsidiaries or affiliates? If yes, please provide their names and the relationship with your company along with a current balance sheet and operating statement for each.	-
Q) FRANCHISE — If your business is a franchise, include a copy of the franchise agreement and a copy of the FTC disclosure statement supplied to you by the franchiser.	_
R) SITE MAP — Have you furnished a map that outlines the general location of the project and shows the location of any flood plain areas?	<u></u>
S) COMPLIANCE WITH PUBLIC ACTS — Have you reviewed the summary information on each of the following Acts and included the applicable documentation of compliance? 1. Prevailing Wage Act 2. Historic Resources Preservation Act. 3. Farm Land Preservation Act.	
4. Illinois Human Rights Act. 5. Assumed Name Act (check one)a. General partnership/sole proprietors are required to register at the	
County levelb. Limited partnership/corporation/franchises are required to register at\ the Secretary of State6. Drug Free Workplace Act.	
T) SITE VISIT — (If applicable) Has a site visit been completed by a DCCA Regional Economic Development Representative or a Small Business Development Center Representative? The Site Visit Report must accompany your application.	_
U) JOBS CREATED OR RETAINED — Have you furnished documented information on the number of jobs to be created or retained in the next 24 months?	_
V) FLOOD INSURANCE CERTIFICATION — You must provide certification of Flood Insurance If, applicable	

W) INVOLVEMENT WITH OTHER BUSINESS — Does your business, it's owners or majority stockholders own or have a controlling interest in other businesses? If yes, please provide their names and the relationship with your company, along with a current balance sheet and operating statement for each. Also, do you buy from, sell to or use the services of any concern in which someone in your company has a significant financial interest? If yes, provide details on a separate sheet of paper labeled Exhibit W.
X) EXPORT LOANS — Does your business presently engage in Export Trade? Yes No
Do you plan to begin exporting as a result of this loan? Yes No
Y) RELATIONSHIP TO LENDER — Do you or your spouse or any member of your household, or anyone who owns, manages or directs your business or their spouses or members of their households work for the Small Business Advisory Council, SCORE, or ACE, and Federal Agency or the participating lender? If so, please provide the name and address of the person and the office employed. Label this exhibit Y. If none, check here: Yes No
Z) CREDIT REPORTS — Please include Credit Reports for each owner, officer, director or partner who owns 20% or more of the company.

City of Hillsboro REVOLVING LOAN FUND LOAN APPLICATION

Contact Person:	Title:
Business Address:	Business Phone:
Type of Business / Product	ts Produced, Services Provided:
AL LONG LD	
Number of Years in Busine	ess: g at Present Business Address:
	Sole Proprietorship Partnership
	Other (Specify)
Principal Owners (Individu	als, Address, and Phone of those owning 20% or more)
Present Number of Employ	was:
r resementation of Employ	Full Time: Part Time:
Anticipated Number of Em	
	1 Year Full Time: Part Time:
	2 Year Full Time: Part Time:
(Provide Listing of Job C Attachment)	Classifications, Salary Ranges, and Number of Positions as a Separate
to moderate income guidelin	t of all jobs created and/or retained must be filled by individuals meeting les as established by the Illinois Department of Commerce and Community shed "Employer Job Certification" Form at back of this application).
	cluding what is to be financed in part or in whole with Revolving Loan Funds al property, purchase of new or used equipment, working capital)
11.4.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	

B. Activity Detail

1. Property Acquisition

	Applicable to project? Yes No				
	If "Yes", complete items below.				
	Address (If Different From Business Address):				
	Phone Number (If Different From Business Address):				
	Applicant: Owns Leases Business Pro	perty			
	If Leased, Owner's Name:				
	Owner's Address:				
	Terms of Lease:	(Attach Copy of Lease)			
	Property Size:(Sq. Ft. / A	creage)			
	Existing Buildings: Total Square Footage Occupied:	3-7			
	Approximate Year Constructed:				
	Proposed Buildings / Expansions:	Sq. Ft.			
	Assessed Valuation of Property: \$	(Most Recent Year)			
	Assessed Valuation of Property: \$ Real Estate Taxes Paid: \$ 20	,			
2. <u>D</u>	Description of Machinery / Equipment Acquisition for F	<u>Project</u>			
	Applicable to Project? Yes No	•			
	If "Yes", Complete Items Below.				
	Item Description	Estimated Cost \$			
	Item Description				
	Item Description				
	Item Description				
	Item Description				
	Item Description	Estimated Cost \$			
3. П	Description of Working Capital Expenditures (inventory	/ navroll_etc.)			
ν. <u>=</u>	seemphon of the many capital Experiance (internet	, payron, oto.			
	Applicable to Project? Yes No				
	If "yes", Complete items below.				
	, , , , , , , , , , , , , , , , , , , ,				
	Activity Description	Estimated Cost \$			
	Activity Description	Estimated Cost \$			
	Activity Description	Estimated Cost \$			
	Activity Description				
	Activity Description	Estimated Cost \$			
	Activity Description	Estimated Cost \$			

Tota	I Estimated Project Costs:
Site	Acquisition \$
	Improvements \$
	Construction \$
Build	ling Renovations \$
Cap	tal Equipment \$
Inve	ntory/Working Capital \$
Othe	r Associated Project Costs \$
	TOTAL \$
Estir	nated Target Date To:
Begi Com	n Project plete Project
Occi	ipancy/Start Up
Proje	ect Financing:
Аррі	oached Lending Institution? Yes No
If Ch	ecked "No", Please Explain
Nam	ecked "Yes", Please Complete the Following: e of Lending Institutioness
Cont	act Person
	se state the <u>Amount, Interest Rate</u> , and <u>Term</u> of the lender=s loan commitment. se attach lender commitment letter (must indicate that RLF Funds are needed.)
Sele	cting one of the following, provide detailed justification on an attached sheet for the need for CDAP funds:
[]	FINANCING GAP - This argument will demonstrate that a business can raise only a portion of the financing necessary to complete the project. Reference the documentation within the application which supports this argument.
[]	RATE OF RETURN - This assumes that full financing is available, but the rate of return is insufficient to induce development. Provide the rationale and cite supporting documentation.
[]	LOCATIONAL - This argument is used when firm is considering multi-state location options. CDAP funds are needed to equalize cost factor variations between sites. This required disclosures for each site under consideration. This application must contain the supporting documentation.

Use: City of	Hillsboro RLF	Amount : \$			
Bank Loan	<i>r Financing, Use and A</i> Use: Jse:	_ Ámount	or Project: \$ \$		
Other L	Jse:	Amount	\$		
	Total Financi	ng \$			
oroject described herei oan. Verification may	dersigned applied for the n. All statements made be obtained from any seents. The Applicant ages loan request.	in this application ource named in this	are true and are mass application. The a	ade for the purpos applicant agrees to	se of obtaining the o abide by all City of
Signatur	e of Applicant		-	Date	

D. Requested Use and Loan Amount Through City of Hillsboro Economic RLF:

AUTHORIZATION

The City of Hillsboro is authorized to conduct any inquiries it decides are necessary to verify the accuracy of the information contained in this application and to use any reasonable method including, but not by way of limitation, obtaining a credit report, to determine the creditworthiness of the loan applicant.

Date:	Signature:	SS#
Date:	Signature:	SS#