

**BAY COUNTY GROWTH ALLIANCE, INC.
LOAN APPLICATION**

General Information

Name of business: _____
Address of business: _____
Company Representative and Title: _____
Telephone: _____ FAX: _____
Project address: _____

Business Entity

Public Corporation _____ Partnership _____
Private Corporation _____ Sole Proprietorship _____
S-Corporation _____ Date Established _____
LLC _____

Is this business a subsidiary directly affiliated with any other organization? Y _____ N _____
If so, indicate relationship and name of related organization.

Professional Assistance

Bank & Contact _____
Address and Telephone _____
Accountant Contact _____
Address and Telephone _____
Legal Counsel & Contact _____
Address and Telephone _____

Ownership

If privately held, identify all holders of outstanding stock. Attach sheet if necessary.

Name	SSN	Address	% Ownership
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Indebtedness

Furnish the following information on all installment debts, contracts, capital leases, notes and mortgages payable. Please use extra sheet if necessary.

To Whom Payable	Original Date	Original Amount	Present Balance	Maturity Date	Rate of Interest	Monthly Payment	Current or Delinquent
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

Employment

A condition of the loan, should it be approved, will be job creation -- 51% of jobs must be made available to low- and moderate-income people.

Existing employees in Bay County: Full time: _____ Part time _____
 New employees in Bay County*: Full time: _____ Part time _____
 *expected in 2 years following loan.

	Number of new employees	Starting hourly wage
Managerial	_____	_____
Professional	_____	_____
Skilled labor	_____	_____
Unskilled labor	_____	_____
Clerical	_____	_____

Project Costs

Real Property Acquisition	\$ _____
Building Construction/Renovation	\$ _____
Leasehold Improvements	\$ _____
Machinery & Equipment	\$ _____
Public Infrastructure Improvements	\$ _____
Furniture & Fixtures	\$ _____
Inventory	\$ _____
Working capital	\$ _____
Other _____	\$ _____
Total Project Costs	\$ _____
Less: Equity/Company Participation	\$ _____
Total Financing Needed:	\$ _____

Certification

I certify that all information in this application and all information furnished in support of this application is true and complete to the best of my knowledge and belief. I understand that you will rely on this information in deciding whether to grant credit to me or my firm. I understand that any false statement in this application, or in information furnished in support of this application, may disqualify me and my firm from consideration for a loan from the BCGA. You are authorized to check the credit and employment history of the owners of my firm to assure the credit qualification of the owners and the the firm. I understand that you will retain this information whether or not this application is approved. I and my firm also understand that the BCGA does not guarantee in any way that this financing will be approved.

My firm is currently seeking funding through the BCGA. Pending approval of said loan, my firm agrees to reimburse BCGA for direct costs incurred in administering the loan approval process, including attorney fees. These charges will be paid at the time of loan closing.

Signature

Name of Business

Name & Title

Date