

**Housing Authority of Champaign
County (HACC)**

**BRIDGE ENHANCING CAPACITY
(BEC) PROGRAM LOAN
APPLICATION**

Date: _____

BUSINESS INFORMATION

Business Name _____

Address _____

Telephone () _____ Tax I.D. _____

Individual Name(s) _____

Address _____

Telephone () _____ Social Security # _____ Date of Birth: _____

Proprietorship _____ Sub-Chapter S _____ Corporation _____ Gen. Partnership _____

Limited Partnership _____ LLP _____ LLC _____

Non-Profit _____ Individual _____

State of Organization (Incorporation): _____

Ownership Distribution: (List stockholders, partners, owner names)

Note: Attach separate sheet if additional space needed.

Name	Title	# of Years	%	SS#
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Nature of Business _____ Year Established _____ Number of Employees _____

Years at Present Location _____ [] Own [] Lease _____

Accountant _____ Telephone () _____

Insurance Agent _____ Telephone () _____

Attorney _____ Telephone () _____

FINANCIAL INFORMATION

Bank of Account _____ **Account Number** _____

Credit Relationships: Please provide details of your business credit relationships below:

Name of Creditor	Purpose of Loan	Original Loan Amount	Amount Presently Owing	Repayment Terms	Maturity Date
_____	_____	\$ _____	\$ _____	_____	_____
_____	_____	\$ _____	\$ _____	_____	_____
_____	_____	\$ _____	\$ _____	_____	_____

LOAN REQUEST

Amount of Loan Requested**Type of loan**[] Line of Credit

BUSINESS BACKGROUND INFORMATION

Please provide a brief history of your business, future plans and projections, and describe your products and/or services and competition.

PERSONAL BUSINESS EXPERIENCE

If you have been in your present business for under five years, please describe your previous business experience. (Include business background, management experience, and training, or include a resume.)

MISCELLANEOUS INFORMATION

Are tax liabilities current? [] Yes [] No

Settled through _____

Has the business or principal owner (s) ever declared bankruptcy? [] Yes [] No

If yes, provide details on a separate sheet.

Is the business a defendant in any lawsuit? [] Yes [] No

If yes, provide details on a separate sheet.

Are any of the business assets encumbered by liens or attachments of any type? [] Yes [] No

What _____	By whom _____	Amount \$ _____
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What _____	By whom _____	Amount \$ _____
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What _____	By whom _____	Amount \$ _____
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Does the plan have any unfunded pension liabilities? [] Yes [] No Amount \$ _____

CERTIFICATION

The undersigned certifies that, to the best of his or her knowledge and belief, all information contained in this loan application and in the accompanying statements and documents is true, complete, and correct. The undersigned agrees to notify HACC immediately of any material changes in this information. The undersigned authorizes HACC to contact any bank and trade creditors it deems necessary without further notice, including, but not limited to, Dunn & Bradstreet reports.

Business Name (print): _____

Applicant Signature: _____ Date: _____

Applicant Title: _____

BUSINESS LOAN APPLICATION CHECKLIST

Please be sure all of the following documentation has been included in order for your business loan application to be processed. As needed, additional items may be requested following receipt of this application.

General Information...

- Business Loan Application
- Business Financial Statements (Balance Sheet, Profit/Loss) for the last two years
Internally prepared _____ Compiled _____ Review-Quality _____ Audited _____
- or**
- Business Federal Income Tax Returns for past two years

- Current year year-to-date Financial Statements
- MBE/DBE or Section 3 Certification
- Business license in the State of Illinois and/or business license from the city/village in which the project is located
- Other applicable trade license(s)
- Copy of proposed sub-contract agreement or letter from General Contractor confirming the selection of the firm; identification of the HACC project; the total amount of the sub-contract; and the estimated timeline for the work to be performed under the sub-contract.
- Certificate of Insurance (per General Contractor's requirements)
- W-9 form