

GREATER EGYPT REGIONAL PLANNING AND DEVELOPMENT COMMISSION  
CARBONDALE, ILLINOIS

APPLICATION # \_\_\_\_\_

**A. COMPANY**

**1. Legal Name and Address of Applicant:**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address City Zip Code County

\_\_\_\_\_  
Contact Person Title Telephone Number

**2. Name and Address of Principal Occupant or User (if different from #1):**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address City Zip Code County

**3. Type of Business (manufacturing, retailing, distribution, etc.):** \_\_\_\_\_

\_\_\_\_\_  
SIC # Organizational DUNS

**4. Federal Tax ID Number  or Borrower's Social Security Number**  \_\_\_\_\_

(Please check the appropriate category)

**5. Form of Organization of Borrower(s):**

- a. \_\_\_\_\_ Individual Proprietorship
- b. \_\_\_\_\_ Partnership: \_\_\_\_\_ General \_\_\_\_\_ Limited  
\_\_\_\_\_ Illinois \_\_\_\_\_ Other State \_\_\_\_\_
- c. \_\_\_\_\_ Corporation: \_\_\_\_\_ Private \_\_\_\_\_ Public

State of Incorporation: \_\_\_\_\_ Date: \_\_\_\_\_

d. \_\_\_\_\_ Other: \_\_\_\_\_

**6. Is the Company Wholly or Partly Owned by any Other Business?**

\_\_\_\_\_ No \_\_\_\_\_ Yes (Explain)

\_\_\_\_\_

**7. Names and addresses of principal shareholders (10% or more) and/or all general partners:**

**Name and Address**

**Percent of Ownership**

**8. Management:**

Please list those people who will be responsible for the management of the company.  
(Attach personal resumes)

<b>Name</b>	<b>Position</b>	<b>Percent Ownership</b>	<b>Date Started With Company</b>
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**9. History of Business:**

Show date established, employee growth, sales growth, profit growth and the roles of company officials, if established Business, etc.

## B. PROJECT

### 10. Project Description:

Briefly describe all elements of the proposed project.

### 11. Describe the products to be produced at the proposed facility:

12. Number of Current Employees \_\_\_\_\_

Number of New Employees \_\_\_\_\_

13. Amount of Loan Request: \$ \_\_\_\_\_

Total Project Cost: \$ \_\_\_\_\_

Source and Use of Funds

Please complete Source and Use of Funds. Cash Equity means amount of cash you're contributing to the loan. List bank(s) that will participate in the loan and their amount(s). Identify other lenders and the amounts they may be lending to the project. Be sure to identify for each participant how their funds will be used.

<u>Source</u>	<u>Amount</u>	<u>Use(s) (Land, Machinery, Inventory, Working Capital)</u>
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Equity: Cash Injection

Bank(s):

GERPDC:

Other:

Totals:

**C. CERTIFICATION**

The purpose of the Revolving Loan Fund is to support business activities for which credit is not otherwise available on terms and conditions which would permit completion and/or the successful operation or accomplishment of the project in the following eligible areas: Franklin, Jackson, Jefferson, Perry, and Williamson Counties, Illinois. The lender reserves the right to recall the loan if these requirements are not met. The applicant shall pay all legal fees related to the proposed loan incurred by the Commission.

The undersigned, duly authorized officers of Applicant, do hereby certify that the filing of this application was duly authorized by its Board of Directors (or governing body), that the statements made in the foregoing application and in all exhibits and documents submitted in connection therewith are true and correct to the best information and belief of the undersigned and are submitted as a basis for the loan.

NAME OF APPLICANT \_\_\_\_\_

Corporate President or Owner \_\_\_\_\_ Date \_\_\_\_\_

ATTEST: \_\_\_\_\_ Date \_\_\_\_\_

Company's Current Indebtedness								Instructions
To Whom Payable	Original Amount	Original Date	Present Balance	Rate Int.	Maturity Date	Monthly Payment	Security	
								Provide information on all installment debts, contracts, notes, and mortgages payable. (Present balance should agree with latest balance sheet submitted.)

Description of Collateral		
	Present Market Value	<p>Please list what will be offered to secure this requested loan. If collateral consists of: (A) Land and Building, (B) Inventory, and/or (C) Accounts Receivable fill in the appropriate blanks. If pledging (D) Machinery and Equipment, (E) Furniture and Fixtures and/or (F) Other, please provide an itemized list that contains serial and identification numbers for all articles that had an original value greater than \$500. A legal description of Real Estate offered as collateral will be required.</p>
A. Land and Building		
B. Inventory		
C. Accounts Receivable		
D. Machinery and Equipment		
E. Furniture and Fixture		
F. Other		
Total Collateral		

**ATTACHMENT A**

Please describe fully the collateral to be offered to the Greater Egypt Regional Planning and Development Commission as security for the loan (i.e. first or second mortgage, first or second lien on equipment, personal guarantees, corporate guarantee, co-signer, etc.)

GREATER EGYPT REGIONAL PLANNING AND DEVELOPMENT COMMISSION  
 PERSONAL FINANCIAL STATEMENT  
 AS OF \_\_\_\_\_

Name	Residence Phone
Residence Address	
City, State, & Zip	
Business Name of Applicant/Borrower	

ASSETS	(Omit Cents)	LIABILITIES	(Omit Cents)
Cash on hand & in Banks.....	\$ _____	Accounts Payable.....	\$ _____
Savings Accounts.....	_____	Notes Payable (to Bank/Other)	_____
IRA.....	_____	(Describe in Section 2).....	_____
Accounts & Notes Receivable	_____	Installment Account (Auto)	_____
(Describe in Section 6).....	_____	Mo. Payments \$ _____	_____
Life Insurance - Cash	_____	Installment Account (Other)	_____
Surrender Value Only.....	_____	Mo. Payments \$ _____	_____
Stocks and Bonds	_____	Loans on Life Insurance.....	_____
(Describe in Section 3).....	_____	Mortgages on Real Estate.....	_____
Real Estate	_____	(Describe in Section 4).....	_____
(Describe in Section 4).....	_____	Unpaid Taxes	_____
Automobile-Present Value.....	_____	(Describe in Section 7).....	_____
Other Personal Property	_____	Other Liabilities	_____
(Describe in Section 5).....	_____	(Describe in Section 8).....	_____
Other Assets	_____	Total Liabilities.....	_____
(Describe in Section 6).....	_____	Net Worth.....	_____
Total.....	\$ _____	Total.....	\$ _____

Section 1. Source of Income	Contingent Liabilities
Salary.....	\$ _____
Net Investment Income.....	_____
Real Estate Income.....	_____
Other Income (Describe)*.....	_____
	As Endorser or Co-Maker.....
	Legal Claims & Judgements.....
	Provision for Fed Income Tax.....
	Other Special Debt.....

Description of Items Listed in Section 1 \_\_\_\_\_

(\*Alimony or child support payments need 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					
Name & Address of Noteholder	Original Balance	Current Balance	Payment Amount	Terms (Monthly, etc.)	How Secured or Endorsed- Type of Collateral

No. of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Amount

Section 4. Real Estate Owned. (List each parcel separately. Use supplemental sheets if necessary. Each sheet must be identified as a supplement to this statement and signed).

Address-Type of property	Title is in name of	Date Purchased	Original Cost	Present Value	Mortgage Balance	Amount of Payment	Status of Mortgage

Section 5. Other Personal Property. (Describe, and if any is mortgaged, state name and address of mortgage holder and amount of mortgage, terms of payment, and if delinquent, describe delinquency).

Section 6. Other Assets, Notes & Accounts Receivable (Describe)

Section 7. Unpaid Taxes. (Describe in detail, as to type, to whom payable, when due, amount and what, if any, property the tax lien attaches)

Section 8. Other Liabilities. (Describe in detail)

Section 9. Life Insurance Held (Give face amount of policies, name of company and beneficiaries)

I/we authorize the Greater Egypt Regional Planning and Development Commission to make all inquiries deemed necessary to verify the accuracy of the statements made herein and to determine my/our creditworthiness.

(I) or (We) certify the above and the statements contained in the schedules herein are a true and accurate statement of (my) or (our) financial condition as of the date stated herein.

Signature \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Social Security No. \_\_\_\_\_

Social Security No. \_\_\_\_\_



GREATER EGYPT REGIONAL PLANNING  
AND DEVELOPMENT COMMISSION

STATEMENT OF PERSONAL HISTORY

**INSTRUCTIONS:** This form must be completed by the proprietor (owner) if the applicant is a sole proprietorship, or by each general and each limited partner if the applicant is a partnership, or by each officer, each director, and each stockholder holding 20% or more of applicant's voting stock, if the applicant is a corporation.

1. Name and address (Street, City, State and Zip Code)

Phone: (            )

3. a. Place of birth (City and State or foreign country)

b. Date of birth (Month, day, year)

4. Citizen of United States?

Yes  No

5. Are you presently under indictment, on parole or probation?  
 Yes  No If Yes, furnish details on a separate sheet.

a. Spouse's name in full (maiden name)

6. Have you ever been charged with or arrested or convicted of any criminal offense other than a minor motor vehicle violation?  
 Yes  No If Yes, furnish details on a separate sheet.

2. Marital status:  Married  Single  Other

7. Have you ever been in receivership or adjudicated bankrupt?  Yes  No If yes, furnish details on separate attachment.

8. Starting with present address, list residence addresses for past 15 years:

Date	Street and number	City	State
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9. Starting with present employer list all employers during last 15 years:

From - To	Employer	Address	Position	Phone
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10. Educational Background

School Attended and Address	Dates	Graduated	Degree
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GREATER EGYPT REGIONAL PLANNING AND DEVELOPMENT COMMISSION

Applicant: \_\_\_\_\_

**Comparative Balance Sheet For the Previous Three Years**

	Year Ending / ,	Year Ending / ,	Year Ending / ,	Interim / ,
<b>Assets:</b>				
<b>Current Assets:</b>				
Cash & Marketable Securities	_____	_____	_____	_____
Accounts Receivable	_____	_____	_____	_____
Inventory	_____	_____	_____	_____
Prepaid Expenses	_____	_____	_____	_____
Other Current Assets	_____	_____	_____	_____
<b>TOTAL Current Assets:</b>	<b>\$</b> _____	<b>\$</b> _____	<b>\$</b> _____	<b>\$</b> _____
<b>Fixed Assets:</b>				
<b>TOTAL Net Fixed Assets:</b>	_____	_____	_____	_____
Notes Receivable	_____	_____	_____	_____
Inv. in Subsidiaries	_____	_____	_____	_____
Intangibles	_____	_____	_____	_____
Other Assets	_____	_____	_____	_____
<b>TOTAL ASSETS:</b>	<b>\$</b> _____	<b>\$</b> _____	<b>\$</b> _____	<b>\$</b> _____
<b>Liabilities and Net Worth:</b>				
<b>Current Liabilities:</b>				
Short-Term N/P - Bank	_____	_____	_____	_____
Short-Term N/P - Other	_____	_____	_____	_____
Accounts Payable	_____	_____	_____	_____
Accrued Salaries	_____	_____	_____	_____
Accrued Payroll Tax & Deduction	_____	_____	_____	_____
Current Portion-Long-Term Debt	_____	_____	_____	_____
Other Current Liabilities	_____	_____	_____	_____
<b>TOTAL Current Liabilities:</b>	<b>\$</b> _____	<b>\$</b> _____	<b>\$</b> _____	<b>\$</b> _____
Long-Term Debt - Notes Payable	_____	_____	_____	_____
Real Estate Mortgages	_____	_____	_____	_____
Subordinated (Officer) Debt	_____	_____	_____	_____
Other Fixed Liabilities	_____	_____	_____	_____
<b>TOTAL LIABILITIES:</b>	<b>\$</b> _____	<b>\$</b> _____	<b>\$</b> _____	<b>\$</b> _____
Common Stock	_____	_____	_____	_____
Capital Surplus	_____	_____	_____	_____
Retained Earnings	_____	_____	_____	_____
(Less) Treasury Stock	_____	_____	_____	_____
<b>TOTAL NET WORTH:</b>	<b>\$</b> _____	<b>\$</b> _____	<b>\$</b> _____	<b>\$</b> _____
<b>TOTAL LIABILITIES &amp; NET WORTH:</b>	<b>\$</b> _____	<b>\$</b> _____	<b>\$</b> _____	<b>\$</b> _____

GREATER EGYPT REGIONAL PLANNING AND DEVELOPMENT COMMISSION

Company Name: \_\_\_\_\_

**Pro Forma Balance Sheet**

	Balance at start up	Balance at end of year one	Balance at end of year two	Balance at end of year three
<b>Assets:</b>				
<b>Current Assets:</b>				
Cash & Mktable Securities				
Accounts Receivable				
Inventory				
Prepaid Expenses				
Other Current Assets				
<b>TOTAL Current Assets:</b>				
<b>Fixed Assets:</b>				
<b>TOTAL Net Fixed Assets:</b>				
Notes Receivable				
Inv. in Subsidiaries				
Intangibles				
Other Assets				
<b>TOTAL ASSETS</b>				
<b>Liabilities and Net Worth:</b>				
<b>Current Liabilities:</b>				
Short Term N/P - Bank				
Short Term N/P - Other				
Accounts Payable				
Accrued Salaries				
Accrued Payroll Tax & Deduction				
Current Portion-Long Term Debt				
Other Current Liabilities				
<b>TOTAL Current Liabilities:</b>				
Long Term Debt - Notes Payable				
Real Estate Mortgages				
Subordinated (Officer) Debt				
Other Fixed Liabilities				
<b>TOTAL LIABILITIES:</b>				
Common Stock				
Capital Surplus				
Retained Earnings				
(Less) Treasury Stock				
<b>TOTAL NET WORTH</b>				
<b>TOTAL LIABILITIES &amp; NET WORTH:</b>				

GREATER EGYPT REGIONAL PLANNING AND DEVELOPMENT COMMISSION

Company Name: \_\_\_\_\_

**Three Year Projection of Sales and Earnings**

	Year Ending / ,	Year Ending / ,	Year Ending / ,
Gross Sales	\$	\$	\$
less Cost of Goods Sold			
Gross Profit	\$	\$	\$
Expenses:			
Selling			
General & Administrative			
Depreciation			
Interest			
Rent			
Advertising			
Repairs & Maintenance			
Equipment Rental			
Supplies			
Utilities			
Real Estate Taxes			
Payroll Taxes			
Loss for Bad Debts			
Accounting & Legal			
Payroll - Office & Officers			
Other (Income)/Expenses			
<b>TOTAL EXPENSES</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>
Net Profit (EBT)			
less Federal Income Taxes			
less State Income Taxes			
<b>NET PROFIT AFTER TAXES</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

