Board of Chosen Freeholders County of Burlington

> Freeholders Tom Pullion, Director Balvir Singh, Deputy Director Felicia Hopson Daniel O'Connell Latham Tiver

P.O. Box 6000 Mt. Holly, NJ 08060-6000 (609) 265-5020 • Fax (609) 702-7000 www.co.burlington.nj.us



Burlington County Bridge Commission

Commissioners John B. Comegno II James D. Fattorini Troy E. Singleton

1300 Route 73 North • P.O. Box 6 Palmyra, NJ 08065-1090 (856) 829-1900 • Fax (856) 829-5205 www.bcbridges.org

Thank you for requesting an application for a Burlington County Small Business loan. The Burlington County Small Business Loan Program is for businesses located in or relocating to Burlington County.

This loan application is for a direct loan request up to \$50,000.00.

Please review the documentation required and complete the loan application in its entirety. Mention here how they can fill out online, then save and print; completed application should be mailed with application fee. Or...if we also want them to be able to fill out online and SUBMIT, include those instructions as well.

Once completed, return the loan application along with the required documentation to the following:

Mr. Mark Remsa, Director Economic Development & Regional Planning Burlington County Bridge Commission 1900 Briggs Road Mount Laurel, New Jersey 08054

Please enclose a non-refundable application fee of \$200.00 (check payable to "County of Burlington, Treasurer")

Should you have any questions, please contact the Department of Economic Development and Regional Planning office at 609-265-5055.

You may also visit our web site at www.bcbridges.org.

LOAN PACKAGE REQUIREMENTS

Submit the following items for loan consideration:

- Completed, signed and dated *loan application*. Attached Exhibit A
 (All business principals and guarantors are required to sign and date the application and complete all sections as applicable)
- Loan application fee in the amount of \$200.00.
 Please make check payable to the "County of Burlington, Treasurer".
- 3. Copy of a **resume** for all business owners/principals.
- 4. Three years of signed *personal* federal and state *income tax returns* for all business principals.
- 5. Three years of business *financial statements* prepared by accountant, including a balance sheet and statement of income.
- 6. Three years of signed **business** federal and state income **tax returns**.
- 7. Schedule of debt for the business and business principals to include to whom payable, amount of debt, monthly payment, maturity date, and loan status (current or delinquent).
- 8. Pro Forma *cash-flow projections* for three years.
- 9. Copy of business *project related* cost, if applicable. Example: vendor estimates, vendor quotes, and/or billing invoices for equipment or other items to be purchased with loan funds, etc.
- 10. Copy of business franchise, if applicable.
- 11. Copy of corporation, partnership, or LLC papers filed with the State of New Jersey.
 - A. If *Corporation*, provide the following:
 - i. Corporate resolution authorizing submission of the application and its execution by a corporate officer or the corporation's attorney.
 - ii. Copy of corporate charter and a copy of the corporate bylaws
 - iii. Name of the President, Chief Executive Officer and Secretary.
 - B. If *Partnership*, provide a copy of the partnership agreement.
 - C. If *Limited Liability Company*, provide a copy of the management agreement.
- 12. State of New Jersey *Business Registration Certificate* obtained from the State of New Jersey Division of Revenue at www.nj.gov/njbgs, 609-292-1730.

13. Copy of any/all personal loan agreements, as unrecorded debt, that are not reflected in a recorded document for all business owners.

14. Collateral - If residential or commercial real estate will be utilized to collateralize the loan, provide the following:

- A. Copy of title insurance policy
- B. Copy of a survey, if available
- C. Current appraisal or current market analysis establishing the current market value of the real estate
- D. For each tax map parcel that applicant proposes to serve as collateral for repayment of the loan, provide the following:
 - i. Name and address of ALL persons who have an ownership interest in all or any part of the property.
 - ii. Name and address of ALL persons who reside on the property and their interests, if any, to the applicant(s).
 - iii. Is the property under agreement of sale or does any person have an option to purchase?

Note: A signed statement by the Applicant(s) is acceptable.

If Commercial Property: Has a phase 1 environmental assessment been done for any portion or all of the property? Note: A signed statement by the Applicant(s) is acceptable. Copy of report is needed.

- 15. Completed, signed, and dated copy of Conflict of Interest Policy. Attached Exhibit B
- 16. Completed, signed, and dated copy of Credit Check Release form. Attached Exhibit C
- 17. Completed, signed and dated personal financial statement for all business principals.

 Attached Exhibit D

NOTES:

- A) Applicant's equity into the project must be at least 10%.
- B) Eligibility Criteria: Must meet the jobs-to-be-created and/or retained.
- **C)** Additional information may be required upon request.

PROGRAM GUIDELINES

Loan Amount: Maximum amount is \$50,000.00

Length of Term: Not to exceed 10 years

Collateral: Required

Interest Rate: The interest rate will be determined at the time the application and

application fee are received by the Department of Economic Development

and Regional Planning. .

Eligibility Criteria: Businesses located in or relocating to Burlington County.

Within eighteen (18) months of loan funding, all borrowers must create or

retain jobs.

As a guide, the loan requires one full-time permanent job or two part-time permanent jobs of at least twenty-five (25) hours per week created for every \$35,000.00 funded and/or one full-time permanent position or two part-time

permanent positions retained for every \$10,000.00 funded.

Application Fee: \$200.00 a non-refundable fee

PROGRAM GOALS/OBJECTIVES

The main goal of the Department of Economic Development and Regional Planning is to stimulate countywide employment growth by providing financial assistance to small businesses located in Burlington County. The Small Business Loan Program funds direct loans.

All Small Business Loans are required to promote at least one (1) of the following economic development goals:

- 1. Create and retain permanent private-sector jobs within eighteen (18) months of loan funding. As a guide, the loan requires one full-time permanent job or two part-time permanent jobs of at least twenty-five (25) hours per week created for every \$35,000.00 funded and/or one full time permanent position or two part-time permanent positions retained for every \$10,000.00 funded.
- 2. Provide entrepreneurial opportunities for qualified individuals.
- 3. Stimulate neighborhood commercial revitalization and balanced development.
- 4. Stimulate private sector investments in physical plant and equipment for local small businesses.
- 5. Encourage the increase of available funds for local small businesses by leveraging state and private sector funds to maximum levels.
- Stimulate balanced development.

PROGRAM CRITERIA

The Small Business Loan Program criteria are a decision-making guide for the Loan Review Committee and the Burlington County Board of Chosen Freeholders. The criteria illustrate factors to be considered by the Loan Review Committee and the Board of Chosen Freeholders for granting loan approval. The relative weight given to these criteria is at the sole discretion of the Loan Review Committee and the Burlington County Board of Chosen Freeholders. All loans will be reviewed for compliance with Program Goals/ Objectives and any and all funding source criteria.

- 1. Create and retain permanent private-sector jobs.
- 2. Promote at least one (1) of the County's Program Goals/Objectives.

Note: Targeted area to be identified and prioritized by Burlington County Department of Economic Development and Regional Planning.

3. Project to include business expansion of sales or employment or significant property rehabilitation.

ELIGIBILITY REQUIREMENTS

Financial assistance through the Small Business Loan Program will be considered for all business owners of for-profit commercial or industrial businesses that:

- 1. Comply with Program Goals/Objectives and Criteria
- 2. Provide proof of satisfactory payment of Federal Income Tax for three (3) years for both business and personal
- 3. Provide proof of current and up-to-date payment status of Federal, State, County and Local taxes for both business and personal
- 4. Agree to create or retain full-time permanent jobs
 - A. Create one full-time permanent job or two part-time permanent jobs of at least twenty-five (25) hours per week for each \$35,000.00 funded
 - B. Retain one full-time permanent position or two part-time permanent positions for each \$10,000.00 funded

EQUITY REQUIREMENTS

Borrower must contribute equity in the amount established by the Burlington County Board of Chosen Freeholders.

SMALL BUSINESS PROGRAM LOAN APPLICATION

(Return to address indicated on page 1)

The following information is required to process your loan request. Please complete the form in its entirety and write "NONE" or "NOT APPLICABLE" where appropriate. If you need additional space

to respond to any question, plea completed, signed, and dated a	•	paper and attach to form. Return ired documentation.
Brief history and description of	ousiness:	
Brief narrative detailing the reas	son for the loan, use of funds	and expected benefits from the loan
Requested Loan Amount:	Length of Te	erm:
Type of Loan (choose one):	Working Capital	
	Fixed Assets	
A. Applicant Information:		
Name of Principal:		Soc.Sec.#:
Home Street Address:		Phone:
City:	State:	Zip Code:
Email:		
Education Level:	% of Ownership:	Office Held:
Name of Spouse:	Soc	Sec.#:
Name of Principal:		Soc.Sec.#:
Home Street Address:		Phone:
City:	State:	Zip Code:
Email:		
Education Level:	% of Ownership:	Office Held:
Name of Spouse:	Soc	.Sec.#:

B. General Information:				Exh
Name of Business:				
Business Street Address	s:			
City:	S	tate:	Zip Cod	e:
Website:		Fede	eral Tax ID#:	
Business Type:	Nur	mber of Years ir	n Business:	
Number of Years of Exp	erience in Bus	iness:		
Current # of Jobs:	Jobs	to be created:	Jo	bs to be retained
C. Financial Information				
Name of bank/financial in	nstitution:			
Bank Street Address:				
City:	S	State:	Zip Co	de: <u>:</u>
Type of Accounts Held:	Personal:	Checking	Business:	Checking
		Business		Business
		Other		Other
Name of bank/financial in	nstitution:			
Bank Street Address:				
City:	S	tate:	Zip Co	ode:
Type of Accounts Held:	Personal:	Checking	Business:	Checking
		Business		Business
		Other		Other
D. List of all capital project	ts and/or item	s to be finance	ed (entire proje	ct):
Project/Items:		Cost:		

E. Summary of 100% of financing for the entire project:

Source of Financing:

Lender Financing	Address	Phone #	Contact Person	•	Percentage of Project
Name of Bank	Street, Town, NJ Zip	(xxx)xxx-xxxx	First, Last	\$xx,xxx	xx%

Applicant's Equity (must be at least 10% of project):

Burlington County Small Business Loan Program:

Other:

<u>TOTALS:</u> 100%

F. Miscellaneous/Other Information:

Do you owe any outstanding Municipal Taxes?

If yes, please identify by checking the applicable taxes:

Real Estate Taxes: Water: Sewer:

Within the past five (5) years, any ownership interest in a business entity?

Are you currently a party in any litigation?

If yes, please describe the litigation and your interest in it:

Does any person hold a judgment against you? (A judgment is an order entered by a court)

If yes, provide the following information about the person holding the judgment:

Name: Address:

City: State: Zip:

Date the judgment was entered:

Amount of Judgment:

Provide a copy of any written order, judgment, resolution or agreement resulting from any concluded court or arbitration proceeding in which the applicant was a defendant or respondent.

Have you ever been involved in bankruptcy or insolvency proceedings? If yes, please provide details and copy of discharge.

I (we) hereby certify that the information provided in this Application is true. I (we) covenant, promise and agree that if any facts, circumstances or conditions change that would make any of the answers to the questions or information provided in or with this application to not be true if made after this date, I (we) am/are obligated to immediately report the change to the County in writing. I (we) understand that if any false information has been provided in or with this application or if I (we) fail to correct any information or facts that change while this application is pending and the County determines to reject this application as a result thereof, I (we) shall be responsible to pay the County for the costs incurred by the County in processing this application including, but not limited to, the costs of title and credit searches and accountant review. In addition, the County may declare the applicant ineligible to file any new application for a loan with the County.

If the applicant is a partnership, all partners must sign below.

Print Name	Signature of Applicant	Date
Print Name	Signature of Applicant	Date
Print Name	Signature of Applicant	Date
Print Name	Signature of Applicant	Date
Print Name	Signature of Applicant	Date

CONFLICT OF INTEREST POLICY

The Department of Economic Development and Regional Planning is required to comply with Federal Regulations prohibiting conflicts of interest. Please answer the following questions. Return completed, signed, and dated form with your loan application and documentation for loan consideration.

- 1. Are you now, or have you been within the past year:
 - A. an employee, consultant, officer or elected or appointed official of Burlington County?
 - B. an employee, consultant, or officer of any firm or agency receiving Community Development Block Grant funds or participating in the Community Development Block Grant Program?
- 2. Is any member of your family or spouse's family, now or within the past year:
 - A. an employee, consultant, officer, or elected/appointed official of Burlington County?
 - B. an employee, consultant, or officer of any firm or agency receiving Community Development Block Grant funds or participating in the Community Development Block Grant Program?
- 3. Is any person with whom you have a business relationship, now or within the past year:
 - A. an employee, consultant, officer or elected or appointed official of Burlington County?
 - B. an employee, consultant, or officer of any firm or agency receiving Community Development Block Grant funds or participanting in the Community Development Block Grant Program?

Note. If you ariswered	TES lo arry or l	the above questions,	please provide the	details below.

Note: If you analyzed "VES" to any of the above guartiens, places provide the details helevy

Signature of Applicant:	Date:
Signature of Applicant:	Date:

CREDIT CHECK RELEASE

Please review, complete, sign, and date this form.

If there is more than one Business Principal, all parties must complete this form. Please copy the Credit Check Release form as needed.

Return the completed form with your application and all documentation for loan consideration.

I hereby authorize the Department of Economic Development and Regional Planning to access my credit history and any other information relevant to my application for a small business loan.

Signature of Applicant	Date
Name	Title
Social Security Number (no dashes; 1231231234)	
Signature of Applicant	Date
Name	Title
Social Security Number (no dashes; 1231231234)	

As of:

INDIVIDUAL FINANCIAL STATEMENT

Lender:				
Applicant Name:	SS	SN/TIN:		
Address:	City:			
	State:	Zip	Code:	
Applicant is applying for this loan:	Individually	Jointly		
Check Appropriate Box:				
I am applying for individual credit in my own name and am relying on myown income or assets and not the income or assets of another person as the basis for repayment of the credit requested. Complete all applicable sections.				
This is an application for joint credit with another person. Complete applicant and co-applicant sections below and indicate or provide explanation relating to any assets owned jointly or by a trust or liabilities owed with others. (Attach schedules and explanatory notes if necessary.) We intend to apply for joint credit:				
Applicant:	Co-Applica	nt:		
I am applying for individual credit, but am relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as the basis for repayment of the credit requested. Complete all sections to the extent possible, providing information in the applicant section about the person on whose alimony, support, or maintenance payments or income or assets you are relying. (Attach schedules and explanatory notes if necessary.)				

STATEMENT OF FINANCIAL CONDITION OF:

ASSET AMOUNT

LIABILITY AMOUNT

CASH - (SCHEDULE A)

In This Institution

Other Banks or Savings & Loans

STOCKS AND BONDS - (SCHEDULE B)

Marketable Securities

Others

TAX

Tax Refund Due

Taxes Owed

INSURANCE - (SCHEDULE C)

Cash Value

Insurance Loans

<u>ACCOUNTS & NOTES RECEIVABLE - (SCHEDULE D)</u>

REAL ESTATE (ASSETS)/NOTES & CONTRACTS PAYABLE (LIABILITIES) - (SCHEDULE E)

Residence(s)

Unimproved Land

Income Property(ies)

Other

OTHER (ASSETS)/(LIABILITIES) - (SCHEDULE F)

Other Assets and Personal Property

Other Liabilities

NOTES & LOANS PAYABLE - Other than Real Estate (LIABILITIES) - (SCHEDULE G)

Notes Payable to Banks

Notes & Loans Payable (Other)

ACCOUNTS & BILLS PAYABLE (LIABILITIES) - (SCHEDULE H)

Bank Cards

Open & Revolving Accounts

Other

TOTAL ASSETS/LIABILITIES

RECAP OF INCOME AND EXPENSES

*See Notice Below Before Completing "Other Income"

NET WORTH (Difference Between Total Asset & Total Liabilities)

ANNUAL INCOME FOR YEAR: ANNUAL EXPENSES FOR YEAR:

Salary or Wages Property Tax & Assessments

Dividends or Interest Federal & State Income Tax

Rentals (Gross Income) Real Estate Loan Payments

Business (Net Income) Payment on Contracts / Notes

Other Income (Describe)* Estimated Living Expenses

Describe Other

Alimony, child support or separate maintenance payment income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

TOTAL INCOME: TOTAL EXPENSES:

CONTINGENT LIABILITIES

As Endorser on Notes/Contracts
As Guarantor on Notes/Contracts

For Taxes

Other (Describe)

TOTAL LIABILITIES:

SCHEDULE A: CASH LOCATION AND STATUS OF BANK ACCOUNTS:

Checking/CD/Saving
Bank
Branch Carried
Balance
Interest Rate Earned
CD Maturity Date
Pledged for a Loan
Loan Balance
Loan Maturity Date
SCHEDULE B: STOCKS AND BONDS (Include Interest In Any Closely Held Business)
Description
of Shares
Registered Name
Valuation Source
Date
Price Per Share
Total Value
Purchased on Margin or Pledged

SCHEDULE C: LIFE INSURANCE

Insured

Primary Beneficiary

Face Amount

Actual Cash Value

Loans on Policy

Name of Company

Location of Office

SCHEDULE D: ACCOUNTS AND NOTES RECEIVABLE

Owner(s)

Due From

Address

City

State/Zip

Collateral

Maturity Date

Payable Amount

Payable Per

Balance Due

SCHEDULE E: REAL ESTATE (Show Mortgage Information in Schedule J) Description Address City State/Zip Owner(s) Owner(s) Owner(s) **Date Acquired** Cost **SCHEDULE F: OTHER ASSETS AND PERSONAL PROPERTY Automobiles** Year Make Value **Rec Vehicles & Boats** Year Make Foot Other Value **Personal Property** Furniture Value Jewelry Value **Equipment Value**

Other Value

SCHEDULE G: NOTES AND LOANS PAYABLE TO BANKS AND OTHERS

Payable to
Address
City
State/Zip
Collateral
Persons Liable
Maturity Date
How Payable: Amount
Per
Balance Due
SCHEDULE H: ACCOUNTS AND BILLS PAYABLE (Including Bank Cards)
Payable To
Account Number
Persons Liable
How Payable: Amount
Per
Balance Due

SCHEDULE I: OTHER LIABILITIES

Payable To

Persons Liable

Collateral

How Payable: Amount

Per

SCHEDULE J: NOTES, CONTRACTS, ACCOUNTS PAYABLE (Including Mortgages on Property Listed in Schedule E)

Mortgage or Lienholder

Annual Taxes

Monthly Income

Monthly Payments

Present Value

Balance Due

If applicant resides in a communi marital status:	ty property state, pleas	e complete the	following concerning
Applicant is:	:		
Applicant Information:			
Social Security #:	Driver's License #		Date of Birth
Home Phone#	Business Phone #		
Employer Name	C	ccupation	
Number of Years	S	alary	Per
Amount of alimony, child support	and separate maintena	ance payment	income
NOTE: Alimony, child support or not wish to have it considered as	•		me need not be revealed if you do
Name and address of payor of a disclosed above as a source of re		ort or separate	maintenance payment income
Alimony, child support, separate	maintenance received	under	
Income (salary, pension, social se	ecurity, dividends, inter	est, etc) Sourc	e:
		Amount	Per
Have you ever borrowed from any	y other branch of this ir	nstitution:	
Name	Location		Date
Number of Dependents	Α	ges	
Have you established a trust?	Туре	Name(s) of trustee(s)
Have you made a will? N	lame of personal repre	sentative	
Have you guaranteed or endorse	d the notes of any othe	r person?	
Do you have any other contingen	t liabilities?		
Are there any outstanding judgme	ents against you?		
Have you been declared bankrup	ot within the last 7 years	s?	
Reference Name/Address			
Reference Name/Address			

Reference Name/Address

If co-applicant resides in a community property state, please complete the following concerning marital status:

<u>Co-Applicant Information, if any:</u>
--

Co-Applicant is: Co-Applicant's Full Name Co-Applicant Address Social Security # Driver's License # Date of Birth Home Phone # Business Phone # Occupation Employer Name Number of Years Salary Per Amount of alimony, child support and separate maintenance payment income NOTE: Alimony, child support or separate maintenance payment income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. Name and address of payor of any alimony, child support or separate maintenance payment income disclosed above as a source of repayment. Alimony, child support, separate maintenance received under Income (salary, pension, social security, dividends, interest, etc) Source Amount Per Have you ever borrowed from any other branch of this institution: Location Name Date Ages Number of Dependents (not listed by applicant) Have you established a trust? Type Name(s) of trustee(s) Name of personal representative Have you made a will? Have you guaranteed or endorsed the notes of any other person? Do you have any other contingent liabilities?

Are there any outstanding judgments against you?

Have you been declared bankrupt within the last 7 years?

Co-applicant References

Name	Address		
City		State	Zip
Name	Address		
City		State	Zip
Name	Address		
City		State	Zip

APPLICANT'S SIGNATURE(S)

I (we) hereby affirm that the foregoing information contained in this financial statement is presented for the purpose of obtaining credit as of the date indicated and is true, complete and correct. I understand Lender is relying on this statement of my financial condition in making loan(s) to me. Lender is authorized to make any investigation of my credit or employment status either directly or through any agency employed by Lender for that purpose. I agree to inform Lender immediately of any matter which will cause any significant change in my/our financial condition. I understand that Lender will retain this financial statement whether or not credit is granted.

CONSENT

The lender may be relyling on: 1) income from an individual who is not an applicant for the consumer loan, or 2) an individual co-borrower, owner, partner, officer or guarantor, for the business loan. Because of your relationship to the loan applicant or your role in the accommodation for the loan, your personal creditworthiness is a factor in the evaluation of the application or accommodation for the loan. By signing below, I authorize the financial institution to obtain a consumer credit report on me for that purpose to evaluate the loan application.

Social Security Number