

SMALL BUSINESS LOAN PROGRAM APPLICATION

DeKalb County Community Development Department Economic Development Division

Application Structure:

- 1. Business Information Basic company details and structure
- 2. Loan Request Amount, purpose, and community benefit
- 3. Owner Information Including years of industry experience
- 4. Financial Information Revenue, banking, and accounting details
- 5. Collateral Section Detailed listing of pledged assets
- 6. Credit Information Score verification and history
- 7. Documentation Checklist Comprehensive list of required documents
- 8. Certifications Legal agreements and authorizations

LOAN PROGRAM OVERVIEW

Loan Amount Range: \$15,000 - \$50,000

Minimum Credit Score: 650Collateral Required: Yes

SECTION 1: BUSINESS INFORMATION

Business Name:			
Legal Business Name (if	different):		
Business Address:			
City, State, ZIP:			
Business Phone:			
Business Email			
Federal Tax ID (EIN):			
□ Other: Date Business Establishe	ed:		
Number of Employees:		Part-time:	
Primary Industry/Busines			
Brief Business Description	n:		

SECTION 2: LOAN REQUEST INFORMATION

Requested Loan Amount:	\$
Loan Term Requested:	years
Purpose of Loan (check all that Equipment Purchase Working Capital Inventory Business Expansion Real Estate Purchase Leasehold Improvements Other:	at apply):
Detailed Description of Loan I	Purpose:
How will this loan benefit you created or maintained?	r business and the local community? How many jobs will be
SECTION 3: BUSINE	SS OWNER/PRINCIPAL INFORMATION
Primary Owner/Principal: Name:	
Title:	
Social Security Number:	
Date of Birth	
Home Address:	
Phone: City, State, ZIP:	
Email:	

SECTION 3: BUSINESS OWNER/PRINCIPAL INFORMATION (continued)

Percentage of Ownership: %					
Years of Experience in This Industry:					
Years of Experience in Business Managemen	rt:				
Education/Training Relevant to Business:					
Additional Owners/Principals (if applicable):					
Name:	Ownership %: %				
Name:	Ownership %: %				
Name:	Ownership %:				
Current Annual Gross Revenue: \$ Net Income (most recent year): \$ Business Checking Account Balance: \$ Business Savings Account Balance: \$ Outstanding Business Debt: \$					
Primary Business Bank:					
Bank Name:					
Account Number:					
Contact Person:					
Phone:					
Accountant/CPA Information: Name:					
Firm:					
Phone:					
Email:					

SECTION 5: COLLATERAL INFORMATION

List all collateral to be pledged for this loan:

Primary Owner's Credit Date of Credit Report: Have you or your busine Filed for bankruptcy? Had a foreclosure? Defaulted on any loan? Been involved in any lite	ess ever: Yes Yes Yes Yes tigation?	□ No □ No □ No □ Yes	If yes, date: If yes, date If yes, explain:
Primary Owner's Credit Date of Credit Report: Have you or your busine Filed for bankruptcy? Had a foreclosure? Defaulted on any loan?	ess ever: Yes Yes Yes	□ No □ No □ No	If yes, date: If yes, date If yes, explain:
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Primary Owner's Credit Date of Credit Report: Have you or your busine	t <u>Score:</u>		
Primary Owner's Credi		ORM	MATION
Primary Owner's Credi		ORM	MATION
		ORM	1ATION
Total Estimated Collate	eral Value:	\$	
Balance Owed: \$			
Lien Holder (if any):			
Estimated Value: \$ Location:			
Description:			
Collateral Item 3:			
Balance Owed: \$			
Lien Holder (if any):			
Location:			
Estimated Value: \$			
Description:			
Collateral Item 2:			
Balance Owed: \$			
Livii i lotuei (ii aliy).			
Lien Holder (if any):			
Location:			
Estimated Value: \$ Location:			
Location:			

SECTION 7: SUPPORTING DOCUMENTATION CHECKLIST

I/We certify that: All information provided is true and complete I/We authorize DeKalb County to verify all informati I/We authorize credit and background checks as ne I/We understand that providing false information ma I/We understand that loan approval is subject to De I/We agree to comply with all loan terms and condit I/We understand that DeKalb County staff may cond I/We agree to maintain adequate insurance on all comply with the county staff may conditional Owner Signature: Print Name: Additional Owner Signature:	cessary ay result in denial or cancellation of the loar Kalb County policies and available funding ions if approved duct site visits and business inspections
 All information provided is true and complete I/We authorize DeKalb County to verify all informati I/We authorize credit and background checks as ne I/We understand that providing false information ma I/We understand that loan approval is subject to De I/We agree to comply with all loan terms and condit I/We understand that DeKalb County staff may condit I/We agree to maintain adequate insurance on all condit Primary Owner Signature:	cessary ay result in denial or cancellation of the loar Kalb County policies and available funding ions if approved duct site visits and business inspections ollateral
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 All information provided is true and complete I/We authorize DeKalb County to verify all informati 	•
All information provided is true and complete	on provided
I/We certify that:	
SECTION 8: CERTIFICATIONS AND A	GREEMENTS
, II ,	
☐ Contracts or Purchase Orders (if applicable)	
☐ Lease Agreements (business location)	
☐ Accounts Receivable Aging (if applicable)	
□ Proof of Insurance on Collateral	
☐ Collateral Documentation (titles, deeds, appraisals)	
☐ Credit Report (dated within 90 days)	
☐ Copy of Business License☐ Articles of Incorporation/Operating Agreement	
☐ Bank Statements (last 6 months - business and person	at)
☐ Business Tax Returns (last 2 years) ☐ Bank Statements (last 6 months, business and person	al)
☐ Personal Tax Returns (last 2 years)	
☐ Business Financial Statements (last 2 years)	
Personal Financial Statement	
•	
 □ Completed Application □ Business Plan or Executive Summary □ Personal Financial Statement 	

Submit completed application and all supporting documents to:

DeKalb County Community Development Department Small Business Loan Division 178 Sams Street

Decatur, GA 30030 Phone: 404-371-2727

Email: c-egramsay@dekalbcountyga.gov

FOR OFFICE USE ONLY

Date Application Received:		
Application Fee Paid:	□ Yes □ No	
Assigned Loan Officer:		
Phone Number		
Email Address		
Credit Score Verified:	□Yes □No Score:	
Collateral Verified:	□ Yes □ No	
Income Verified:	□ Yes □ No	
Application Status:	☐ Approved ☐ Denied ☐ Pending	
Loan Committee Review Date:		
Comments:		