



312 FORREST AVENUE • ANTIGO WI 54409

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ECONOMIC DEVELOPMENT LOAN PROGRAMS APPLICATION

Company Name: _____
 Street Address: _____
 Mailing Address: _____
 Email Address: _____ Web Address _____
 Telephone Number: _____ Tax I.D.: _____
 Date business commenced: _____

Sole Proprietorship: _____ Partnership: _____ Corporation: _____ Other: _____

Amount of loan Requested: _____ Term: _____ Interest Rate Requested: _____
 (Not to exceed 7 yrs working capital, 10 yrs equipment, 12 yrs real estate.)

Project Summary: _____

Project Sources & Uses of Funds							
USES OF FUNDS		SOURCES OF FUNDS					
Use	Amount	Lender	Term	Estimated Rate	Collateral	Amount	Annual Debt Service
Land							
Building Construction/Renovation							
Machinery/Equipment							
Furniture/Fixtures							
Leasehold Improvements							
Contingencies							
Working Capital							
Total Uses of Funds	\$ _____	Total Sources of Funds				\$ _____	\$ _____

Contact Names: (Proprietor, Partners, Officers, Directors and all holders of stock)

Name	Address	Phone	Percent Own	Social Security Number

Commercial Lender:

Name of Institution: _____ Loan Officer: _____ Title _____

Address: _____

Phone: _____ Email: _____

Amount: _____ Term: _____ Interest Rate: _____

Collateral: _____

Job Creation:

Number of Employees before project: _____ Number of Employees after project: _____

Current Business Indebtedness:

To Whom Payable	Original Amount	Present Balance	Int. Rate	Maturity Date	Monthly Payment Amount	Security	Current/Past Due
Acct#:							
Acct#:							
Acct#:							
Acct#:							

Amounts should correspond with most recent interim financial statement.

COLLATERAL			
SOURCE OF COLLATERAL	Present Market Value	Present Loan Value	ANNUAL DEBT SERVICE
Land and Buildings			
Machinery/Equipment			
Furniture/Fixtures			
Accounts Receivable			
Inventory			
Other			
TOTALS			

THE FOLLOWING EXHIBITS MUST BE COMPLETED WHERE APPLICABLE. ALL QUESTIONS ANSWERED ARE MADE A PART OF THE APPLICATION.

ALL MATERIALS REQUESTED MUST BE SENT WITH THE APPLICATION. THE FOLLOWING SPECIFIC INFORMATION SHOULD BE INCLUDED AS PART OF YOUR APPLICATION.

1. Have you or any officers of your company ever been involved in bankruptcy or insolvency proceedings? Yes ___ No ___ if so, please provide the details as a separate exhibit.
2. Are you or your business involved in any pending lawsuits? Yes ___ No ___ if yes, please provide the details as a separate exhibit.
3. Do you or your spouse or any member of your household, or anyone who owns, manages, or directs your business or their spouses or members of their households work for the Community or hold an official position within the Community? Yes ___ No ___ if so, please provide that person's name and address of and what department employed.

Employee Name & Address: _____

Date: _____

4. Does your business, its owners or majority stockholders own or have a controlled interest in other businesses? Yes ___ No ___ if yes, please provide their names and relationship with your company along with a current balance sheet and operating statement for each as a separate exhibit.

Name of Business: _____

Relationship to Applicant: _____

5. Do you buy from, sell to, or use the services of any concern in which someone in your company has a significant financial interest? Yes ___ No ___ if yes, provide details in a separate exhibit.
6. Are any of the individuals listed under "Management" on parole or probation? Yes ___ No ___ if yes, please provide details as a separate exhibit.
7. Have any of the individuals listed under "Management" been convicted of a crime? Yes ___ No ___ if yes, please provide details as a separate exhibit.

ACKNOWLEDGEMENT

1. I/We acknowledge that the following supporting documents must accompany this application for financing and that I/We must supply the following:
 1. Financial Statement for business and all owners holding more than 20 percent (20%) interest.
 2. Business Plan including narrative description of business, market, competition, plan of operation. (See attached format).
 3. Balance Sheet and Operating Statement (profit and loss) for past three (3) years (for expansion only)
 4. One to three year pro forma Balance Sheet and Profit and Loss (including assumptions to cash flow).
 5. Copies of all estimates, appraisals, title opinions, Certificate of Incorporation, Articles of Incorporation or partnership agreement as applicable.
 6. Copy of loan application and supporting documents submitted to private lender.
 7. Lender commitment for matching funds including amount, rate, term, and security taken.
2. I/We hereby acknowledge that the Langlade County Economic Development Corporation is hereby authorized to verify and discuss all matters pertaining to this application with all participating lenders, U.S. Small Business Administration, and any other interested party(s) including those providing assistance in the preparation of this application or supporting documents and exhibits accompanying same. Including, but not limited to, applicant's legal, accounting or other consultants.
3. I/We shall not discriminate upon the basis of sex, race, creed, color, class, national origin or ancestry in any employment or construction activity.
4. In the event the Revolving Loan Funds are secured by the Economic Development Corporation, I/we shall use the loan money only to pay the cost of services and materials necessary to complete the economic development activities for which the loan funds were awarded and shall permit the Loan Review Board or Committee and/or its staff the right of audit/inspection to verify compliance.
5. At the completion of the project, we agree to cooperate with Economic Development Corporation in preparation of a press release detailing non-confidential information.
6. I/We shall keep such records concerning the economic development work as may be required by Langlade County or the City of Antigo. These files shall be maintained for at least three years after the work for which the loan has been obtained is completed.

I/WE CERTIFY that all information in this application is true and complete to the best of my/our knowledge and are submitted to the Community so that the Community can decide whether to grant the loan. I/we agree to pay for

or reimburse the Community for the cost of any surveys, title or mortgage examinations, appraisals, etc., performed by non-Community personnel provided I/we have given my/our consent.

Signed: _____

Title: _____

Print Name: _____

Signed: _____

Title: _____

Print Name: _____

CREDIT REFERENCES			
NAME	RELATIONSHIP	CITY,STATE	PHONE NUMBER

Application Certification and Credit Authorization: I authorize Langlade County Economic Development Corporation to contact my credit references and to view my credit report. I authorize Langlade County Economic Development Corporation to contact the bank listed on this application about the project. I certify and affirm by my signature that the information contained in, and otherwise supplied as part of this application, is complete and current to the best of my knowledge. I further understand that intentional misrepresentation of facts may be the basis for a denial of credit.

Name: _____

Date: _____

Signature: _____

Title: _____

Name: _____

Date: _____

Signature: _____

Title: _____