

Proudly Serving:

Parishes: Assumption • Lafourche • St. Charles • St. James • St. Mary • St. John • Terrebonne

Municipalities: Baldwin • Berwick • Franklin • Golden Meadow • Gramercy •
Lockport • Lutcher • Morgan City • Napoleonville • Patterson • Thibodaux

Dear Loan Applicant,

Thank you for your interest in South Central Planning and Development Commission's Revolving Loan Program. Attached are the necessary forms to be completed for consideration for financial assistance via SCPDC. The purpose of the Program is to foster economic development within our Region and to assist businesses during setup or growth phase, thereby, creating jobs in our community.

Prior to submitting an application for the SCPDC Loan Program, you must first visit a local lending institution and apply for funding. Once you have done so, you will then submit with your application either a denial letter from the bank or a letter from the bank proposing their participation. To meet this requirement, this letter has to include:

1. Project (what you are applying for)
2. Amount requested
3. Reason for denial

In addition to the aforementioned bank letter, your application must contain the following five components by the monthly deadline to be considered a completed application and potentially eligible to be presented to the committee:

1. completed application, including a detailed budget and accompanying documentation
2. comprehensive business plan with three years of projections
3. 3 years financial statements (balance sheets, income statements, cash flow statements) – *for existing businesses only*
4. copies of 3 years of business and personal taxes
5. \$150 application fee

If you have any questions regarding this application package, please feel free to contact me at (985) 655-1051 ext. #2075. Again, thank you for your interest on our Loan Programs.

Best Regards,

Lisa Maloz

Grant and Loan Analyst

Enclosures

Revised 4/16/2019

Outline of a typical business plan

- I. Cover letter
 - a. Name of the bank and banker contacted
 - b. Dollar amount being requested
 - c. Terms and timing of the loan request
 - d. Type and value of collateral
- II. Executive summary
 - a. Business description
 - i. Name
 - ii. Location
 - iii. Product or service
 - iv. Market and competition
 - v. Management goals
 - b. Business goals
 - c. Summary of financial needs and how funds will be used
 - d. Earnings projections and potential return to investors
- III. Market analysis
 - a. Description of total market
 - b. Industry trends
 - c. Target market
 - d. Competition
- IV. Products or services
 - a. Description of product or service
 - b. Proprietary position – patents, copyrights, legal and technical considerations
 - c. Comparison to competitors' products/services
- V. Manufacturing process (if applicable)
 - a. Materials
 - b. Sources and suppliers
 - c. Production methods
- VI. Marketing strategy
 - a. Overall strategy
 - b. Pricing strategy
 - c. Sales terms
 - d. Method of selling, distributing, servicing, warranting products/services
- VII. Management plan
 - a. Form of business organization
 - b. Board of directors composition
 - c. Officers – organizational chart and responsibilities
 - d. Resumes of key personnel
 - e. Staffing plan/number of employees
 - f. Facilities plan/plan for capital improvements
 - g. Operating plan/schedule of upcoming work for the next 1-2 years
- VIII. Financial data*
 - a. Financial history (three years)
 - b. Financial projections (three years)
 - i. Profit and loss statements (P & Ls)
 - ii. Balance sheets
 - iii. Cash flow statements
 - iv. Capital expenditures
 - c. Explanation of projections
 - d. Key business ratios
 - e. Explanation of use and expected results of new funds
 - f. Potential return to investors compared to competitors and industry

***NOTE 1:**

ALL FINANCIAL STATEMENTS MUST MEET GENERALLY ACCEPTED ACCOUNTING PRINCIPLES (GAAP)



LOAN APPLICATION FORM

DATE OF APPLICATION

BUSINESS INFORMATION:

INDUSTRY CODE (from taxes): _____

Business Name: _____

Mailing Address: _____ City: _____ State: _____ ZIP Code: _____

Physical Address: _____ City: _____ State: _____ ZIP Code: _____

Name of Principal in Charge: _____ Title/Position: _____

Phone #'s Home: () _____ Business Phone: () _____

Cell: () _____ Date Business Established: _____

Type of business: _____

Employer ID #: _____ Email: _____

How did you hear about us? _____

STRUCTURE OF BORROWING ENTITY:

Name of Borrower: _____

When was your entity established? (date) _____ Type of Entity (check one):

1. _____ Corporation President: _____ Secretary: _____

2. _____ Partnership Vice: _____ Treasurer: _____

3. _____ Sole Proprietorship Managing Members _____ %

4. _____ Limited Liability Company (Names) _____ %

_____ %

_____ % 100%Total

Is the business: _____ Industrial Firm _____ A Service Provider

_____ A Manufacturer _____ Retailer

BUSINESS SUMMARY:

IF YOU ARE PURCHASING AN EXISTING BUSINESS, ANSWER ADDITIONAL QUESTIONS ON PAGE 6

1. What products or services do you sell (enclose any catalogs and/or brochures)? _____

2. What is your geographic market area? _____

3. How do you market your product or service? _____

4. List competition _____

5. How will the business benefit the community? _____

FRANCHISE:

IF YOU ARE PURCHASING A FRANCHISE, ANSWER ADDITIONAL QUESTIONS ON PAGE 7

Is your business a franchise? _____ Yes _____ No

If so, include a copy of the Franchise Agreement and the Franchisor's FTC Disclosure Statement.

USE of FUNDS

	SCPDC request	bank financing	owner contribution*	cash	in kind
<i>Land Acquisition*:</i>	\$	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
<i>Building Acquisition*:</i>					
<i>Existing on Site:</i>	\$	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
<i>Modular/Mobil**:</i>	\$	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
<i>Small Scale Renovation**:</i>	\$	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
<i>Large Equipment**:</i>	\$	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
<i>Hand Tools**:</i>	\$	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
<i>Working Capital (3-6 mos.):</i>					
<i>Lease of Building/Property***:</i>	\$	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
<i>Payroll:</i>	\$	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
<i>Utilities:</i>	\$	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
<i>Inventory**:</i>	\$	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
<i>Insurance**:</i>	\$	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
<i>Other (**if applicable):</i>	\$	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
<i>Other Start Up Costs (**if applicable):</i>	\$	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
Sub Totals:	\$ -	\$ -	\$ -		
GRAND PROJECT TOTAL:	<div style="border: 2px solid black; padding: 5px; display: inline-block;"> \$ - </div>				

List any personal collateral you are willing to offer to secure funding from SCPDC. Must be REAL PROPERTY.
 All business asset WILL be secured with UCC-1 filing.

*owner contribution can be in cash or in kind (property, equipment, inventory, cash, etc); must evidence purchase within the last 12 months or commit to purchase within the next 12 months; if purchasing in the next 12 months, must evidence availability of funds; future revenues CANNOT be considered as owner contribution
 **appraisal REQUIRED; less than 1 year old; to be paid by applicant
 ***third party quotes, estimates, pricing REQUIRED
 ****lease REQUIRED, even if proposed; executed lease REQUIRED prior to closing

HISTORY AND NATURE OF YOUR BUSINESS

PROJECT INFORMATION

Physical Address of Project Site: _____

City: _____ Parish: _____ State: _____ Zip : _____

1. Are you purchasing land? _____ No _____ Yes *If yes, then an environmental form is to be completed*
2. Are you purchasing a building? _____ No _____ Yes *If yes, then a recent appraisal is required (w/in 12 months)*
3. Is construction being done? _____ No _____ Yes *If yes, then a building development permit is required*
4. If expanding, what will be the size of your new (or enlarged) facility? _____
5. How will this new (or remodeled) facility help your business (please be specific, e.g. increased revenues, add new products/services, improve efficiency, etc.)? _____
6. If you are moving to a new location, how will this effect your business? _____
7. Realistic timetable of project:
 Start date: _____ completion date: _____

BUILDING SIZE AND OCCUPANTS

1. What is the square footage of this building? _____
2. Tenants:
 - a. Are there any existing tenants that will remain in the building? _____ Yes _____ No
 - b. Do you intend to lease out any space? _____ Yes _____ No

If you answered "YES" to either question, complete the information below:

<i>Tenant</i>	<i>Square Footage</i>	<i>Lease Expires</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

EMPLOYMENT

Current Number of Employees: _____ Anticipated New Jobs: _____

Number of new employees anticipated as a result of this project within the next two years:

<i>Number of new employees</i>	<i>Job Category</i>	<i>Hourly Rate</i>
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

PLEASE ANSWER THE FOLLOWING QUESTIONS, AND PROVIDE THE APPROPRIATE INFORMATION, IF APPLICABLE

Do you have any affiliate and/or subsidiary firms? _____ Yes _____ No
 If yes, please list below and provide the last fiscal year end financial statements for each firm.

Name of affiliate and/or subsidiary firm: _____
 Name of affiliate and/or subsidiary firm: _____
 Name of affiliate and/or subsidiary firm: _____
 Name of affiliate and/or subsidiary firm: _____

Provide a schedule of any previous government financing by any principals or affiliates, i.e. SBA, BRGL, etc.

1. Name of Agency: _____ Original Amount: _____
 Date of Request: _____ Approved: _____ Declined: _____
 Outstanding balance: _____ Status: _____

2. Name of Agency: _____ Original Amount: _____
 Date of Request: _____ Approved: _____ Declined: _____
 Outstanding balance: _____ Status: _____

3. Name of Agency: _____ Original Amount: _____
 Date of Request: _____ Approved: _____ Declined: _____
 Outstanding balance: _____ Status: _____

4. Name of Agency: _____ Original Amount: _____
 Date of Request: _____ Approved: _____ Declined: _____
 Outstanding balance: _____ Status: _____

5. Name of Agency: _____ Original Amount: _____
 Date of Request: _____ Approved: _____ Declined: _____
 Outstanding balance: _____ Status: _____

6. Name of Agency: _____ Original Amount: _____
 Date of Request: _____ Approved: _____ Declined: _____
 Outstanding balance: _____ Status: _____

If not applicable, check here _____

BANK AND TRADE REFERENCES

BANK INFORMATION(Business and/or Personal; circle appropriate response for each):

SEE ALSO FORM F

1. Name of Bank: _____	Account Officer: _____
Account # _____	Business/Personal _____ Phone #: () _____
2. Name of Bank: _____	Account Officer: _____
Account # _____	Business/Personal _____ Phone #: () _____
3. Name of Bank: _____	Account Officer: _____
Account # _____	Business/Personal _____ Phone #: () _____
4. Name of Bank: _____	Account Officer: _____
Account # _____	Business/Personal _____ Phone #: () _____

PARTICIPATING FINANCIAL INSTITUTION (IF APPLICABLE):

Name: _____ Contact Name: _____

Phone #: () _____ Email: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

TRADE REFERENCES

Company	Contact Person and Phone #
_____	_____
_____	_____
_____	_____

PLEASE LIST ALL EXISTING BUSINESS and PERSONAL DEBTS

DEBT SCHEDULE

* Date: _____

Creditor (Name & Address)	Original Amount	Original Date	Present Balance	% Rate	Maturity Date	Monthly Payment	Security	Current or Delinquent
** Total Present Balance:				Total Monthly Payments:				

* Should be the same date as current financial statement
 ** Total must agree with balance shown on current financial statement.

BUYING A BUSINESS

1. Why is the business for sale? _____
2. What is the value of the business? _____
3. What are the company's products and services? _____
4. Who started the business? _____
5. What is the history of the business? _____
6. Where is it located and where are its customers located? _____
7. Has the competition increased or changed? _____
8. What sales and marketing plans have you seen? _____
9. What are the business' sales trends? _____
10. How will you increase sales? _____
11. Will you hire new employees and managers or use the existing staff?

12. CHECKLIST for buying a business:

- _____ Talk to the business' customers and suppliers.
- _____ Review financial statements and tax returns from the last 3 years.
- _____ Develop a purchase and sale agreement which shows:
 - The purchase price components – down payment, allocation of the price, and how it will be financed
 - How the business will be conducted until purchased
 - The liabilities you are assuming including accounts payable, loans, leases, contracts, taxes, and legal
 - The value of the assets you are buying including Accounts Receivable (quality & age of invoices), inventory (value & age), machinery/equipment/furniture (age, condition & value), patents/trademarks, & real estate
 - That the purchase and sale agreement is subject to financing and inspections
- _____ Know how you will finance the business. Is the seller willing to finance all or any of the business (especially the goodwill – the difference between the value of hard assets and the business' purchase price)? What are the terms, rates, and conditions? Develop a Loan Request
- _____ Determine who will pay for closing costs including legal services, points, appraisals and environmental inspections.

PLEASE NOTE - any one or more of the following may be required as part of your loan application:

- | | |
|-----------------------------------|--|
| pictures of the business location | detailed description and appraised value of the building |
| inventory and equipment purchases | assets and liabilities |
| inspection reports | any patents/trademarks |
| purchase-and-sale agreement | any legal documents |

AS PER OUR POLICY: WE REQUIRE A DATED & SIGNED LETTER (on company letterhead, if applicable) STATING THE BUSINESS WILL CLOSE AND THE NUMBER OF JOBS LOST IF IT IS NOT PURCHASED.

BUYING A FRANCHISE

1. How many franchises are there and how many in your area? _____
Don't be afraid to ask for a list, then visit as many as you can.
If possible, speak with the owner(s) about some of the real-world realities of running the business.
2. How long has the franchiser been in the industry? _____
Ask how long they have been selling franchises.
3. How financially healthy is the franchiser? _____
You have a right to see their financial statements, which should be included in the Disclosure Document.
Make sure you are comfortable with all the numbers.
4. What does your initial cost cover? _____
Discuss things like the licensing fee, training, equipment, starting inventory and promotional fees.
Find out if the land will be purchased or leased, and whether the building will be constructed or renovated.
5. Will the franchiser help finance the business? _____
If so, you still need to develop a business plan with financial projections.
6. What ongoing costs will you pay the franchiser? _____
Discuss royalties, training, insurance and advertising.
7. Will you be required to buy supplies from the franchiser or their designated supplies? _____
Will prices be competitive? _____
8. Do any restrictions apply when competing with the competition? _____
9. What is the length of the partnership? _____
Be clear about the terms covering renewal rights.
10. Do you have the right to resell the franchise? _____

BUYER, BE AWARE

A franchise is a legal, business relationship between a franchiser (Burger King, for example) and the franchisee (you). The franchiser owns the right to the business name, and sells that right to you. In return, you sell products and services supplied by the franchiser.

The advantages of buying a franchise can be appealing. You get an established business presence. And since many of the decisions and products come from the franchiser, your risks are reduced. You are also provided with range of support services, such as site selection, training, supplies, and advertising/marketing plans.

THE DISCLOSURE DOCUMENT: READ IT CAREFULLY

The Federal Trade Commission (FTC) requires sellers of franchises and other business-opportunity ventures to provide a Disclosure Document to prospective buyers. In it, you should find detailed information that explains how business between you and the franchiser will be conducted.

It is crucial that you read this document very carefully, as many times as you need to, because it contains important information - audited financial statements, your start-up and ongoing costs, and locations of other franchises. It will clearly explain the responsibilities of the buyer and the seller. Have your attorney read through it as well.

The Disclosure Document must be given to you in advance so you can gather and consider any and all information you need to be sure your decision is an informed one.

PLEASE PROVIDE THE FOLLOWING DOCUMENTATION FOR ALL THAT ARE APPLICABLE*

When necessary, SCPDC required forms may be duplicated for multiple applicants.

- _____ Loan Application
- _____ Last 3 years Personal Tax Returns (*on each individual*)
- _____ If existing business, past 3 years Business Tax Returns
- _____ Current Personal Financial Statement (*on each individual*)
- _____ Individual Profile Form (*on each individual*)
- _____ Personal Resume' - (on each individual)
- _____ If existing business, Current Financial Statement
- _____ If existing business, Articles of Incorporation and By-laws Board of Resolution/Certificate of Authority
- _____ Credit Authorization Form (*on each individual*)
- _____ Business Plan (*to include projections for a minimum of 3 years*)
- _____ Documentation of Lease or Rental Agreement (*copy for file*)
- _____ Estimates for Equipment and Renovations IRS Form 8821
- _____ Letter from Bank stating their Intentions (*denial*)
- _____ W9 Form
- _____ If existing business, Articles of Incorporation and By-laws
- _____ Current Occupational License
- _____ Balance sheet and income statement with aging of Accounts Receivable and Payable
- _____ Names of affiliated/subsidiary businesses; 2 fiscal year-end financial statements & a current statement
- _____ Appraisal/Comparative Market Analysis
- _____ Documentation of commitment of all sources of funding (equity/other sources of financing)
- _____ Copy of current government-issued identification for all owners/principals
- _____ Proof of business/ownership structure
- _____ Proof of number of employees (*copy of 941*)
- _____ Proof of address (*copy of utility bill, i.e. electric, water, phone, etc.*)
- _____ Business LMI Form (*and Personal, if applicable*)

TO THE BEST OF MY KNOWLEDGE, ALL INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND ACCURATE

Applicant's Signature _____

Date _____

PERSONAL FINANCIAL STATEMENT

insert date here

NAME (s) - use one form for husband AND wife (combine all assets and debts)

TOTAL ASSETS

CASH ASSETS

Cash in Bank (checking)	\$
Cash in Bank (savings)	\$
Value of CDs	\$
IRA (personal retirement)	\$
401k (or other employer retirement)	\$
Cash Value of Life Ins (not death benefit)	\$
Other Investment Accounts (stocks, bonds, etc)	\$
Other Cash Assets	\$
TOTAL CASH ASSETS	\$

REAL ASSETS

Personal Residence	\$
Other Real Estate 1 (describe)	\$
Other Real Estate 2 (describe)	\$
Other Real Estate 3 (describe)	\$
Other Real Estate 4 (describe)	\$
Other Real Estate 5 (describe)	\$
Other Real Estate 6 (describe)	\$
Vehicle 1 (describe)	\$
Vehicle 2 (describe)	\$
Vehicle 3 (describe)	\$
Vehicle 4 (describe)	\$
Vehicle 5 (describe)	\$
Vehicle 6 (describe)	\$
Other Real Asset(s) (describe)	\$
TOTAL REAL ASSETS	\$

OTHER ASSETS

Household Goods (furniture, electronics, etc)	\$
Recreational 1 (boats, ATVs, RVs, etc) (describe)	\$
Recreational 2 (boats, ATVs, RVs, etc) (describe)	\$
Recreational 3 (boats, ATVs, RVs, etc) (describe)	\$
Jewelry	\$
Guns	\$
Other 1 (describe)	\$
Other 2 (describe)	\$
Other 3 (describe)	\$
TOTAL OTHER ASSETS	\$

TOTAL ASSETS

OWNERS EQUITY (NET WORTH)

TOTAL LIABILITIES & NET WORTH

TOTAL LIABILITIES

SHORT TERM LIABILITIES

Credit Card balances	\$
Loans against CDs	\$
Outstanding Loan balance on employer retirement	\$
Outstanding Loan balance on life insurance	\$
Outstanding Loan balance on investment accounts (margin)	\$
TOTAL SHORT TERM LIABILITIES	\$

REAL ASSET LIABILITIES

Mortgage balance(s) on Personal Residence	\$
Mortgage balance(s) on Other Real Estate 1	\$
Mortgage balance(s) on Other Real Estate 2	\$
Mortgage balance(s) on Other Real Estate 3	\$
Mortgage balance(s) on Other Real Estate 4	\$
Mortgage balance(s) on Other Real Estate 5	\$
Mortgage balance(s) on Other Real Estate 6	\$
Loan balance on Vehicle 1	\$
Loan balance on Vehicle 2	\$
Loan balance on Vehicle 3	\$
Loan balance on Vehicle 4	\$
Loan balance on Vehicle 5	\$
Loan balance on Vehicle 6	\$
Loan balance on Other Real Asset(s)	\$
TOTAL REAL ASSET LIABILITIES	\$

OTHER LIABILITIES

Loan balance on Household Goods	\$
Loan balance on Recreational 1	\$
Loan balance on Recreational 2	\$
Loan balance on Recreational 3	\$
Loan balance on Jewelry	\$
Loan balance on Guns	\$
Loan balance on Other 1	\$
Loan balance on Other 2	\$
Loan balance on Other 3	\$
TOTAL OTHER LIABILITIES	\$

TOTAL LIABILITIES

signature

spouse's signature

INDIVIDUAL PROFILE FORM
SCPDC Revolving Loan Program

1. OWNER NAME: _____

2. BUSINESS NAME: _____

3. If applicable, indicate any previous government financing:

Agency Name	High Borrowing	Balance	Date Paid Out
-------------	----------------	---------	---------------

4. List all businesses in which you now have, or have had, an equity interest over the past FIVE years.

5. If any of the following questions are answered yes, it will not necessarily qualify you. However, a false or inaccurate answer will probably cause disqualification.

- | YES | NO | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | a. Are you presently under indictment, on parole, or probation? (NOTE: SCPDC may require a back ground check, and your signature On this form constitutes authorization to conduct such a search of records, at The discretion of SCPDC. <i>If yes, furnish details in a separate exhibit.</i> List name(s) under Which held, if applicable? |
| <input type="checkbox"/> | <input type="checkbox"/> | b. Have you ever been charged with, or arrested for, any criminal offense other than a minor motor vehicle violation? Include offenses which have been dismissed, discharged, or <i>nolle prosequi</i> . <i>If yes, furnish details in a separate exhibit.</i> List name(s) under which charged, if applicable? |
| <input type="checkbox"/> | <input type="checkbox"/> | c. Have you ever been convicted of any criminal offense other than a minor motor vehicle violation? <i>If yes, furnish details in a separate exhibit.</i> List name(s) under which convicted, if applicable? |
| <input type="checkbox"/> | <input type="checkbox"/> | d. Have you ever filed bankruptcy personally, or have any of the businesses that you have, or had ownership interest in, ever filed bankruptcy? <i>If yes, furnish details as to the circumstances in a separate exhibit.</i> |
| <input type="checkbox"/> | <input type="checkbox"/> | e. Do you or your company currently have any suits, judgments, or liens filed against you or any of your assets? <i>If yes furnish details in a separate exhibit.</i> |
| <input type="checkbox"/> | <input type="checkbox"/> | f. Do you, or does anyone in your family (i.e., spouse, children, parents, brothers or sisters), work for South Central Planning and Development Commission or for one of its member Governments (the Parishes of Assumption, Lafourche, St. Charles, St. James, St. John the Baptist, St. Mary and Terrebonne; the Municipalities of Baldwin, Berwick, Franklin, Golden Meadow, Gramercy, Lockport, Lutcher, Morgan City, Napoleonville, Patterson, Thibodaux)? <i>If yes, furnish names and positions held on a separate page.</i> |
| <input type="checkbox"/> | <input type="checkbox"/> | g. Do you, or does anyone in your family, serve as a consultant, officer, elected official, or appointed official for South Central Planning and Development Commission or any of its member governments? <i>If yes, furnish names and positions held on a separate page.</i> |

Signature

Date

INQUIRY FORM – Financial & Tax Records
SCPDC Revolving Loan Program

Name of CPA/Accountant/Bookkeeper/Financial Professional

Address

Phone

Email

I, _____, do hereby authorize South Central Planning and
(borrower's name)

Development Commission to contact and request financial information and data including but not limited to

financial statements and tax returns for _____
(name of business)

as well as my individual tax returns and financial information through the term of my loan with SCPDC. I agree

to contact South Central Planning if the above information changes.

Signature

Date

INQUIRY FORM – Banking Records
SCPDC Revolving Loan Program

BANK: _____ CONTACT: _____

PHONE: _____ EMAIL: _____

BRANCH ADDRESS: _____

Dear Sir or Madam:

Your institution is authorized to release information to South Central Planning and Development Commission regarding the following individual(s) and business(es):

Name of Company

Name of Individual

Name of Company

Name of Spouse

Name of Company

Please forward this information either verbally, in writing, or by fax to upon request to :

SCPDC Revolving Loan Programs
South Central Planning and Development Commission
P.O. Box 1870
Gray, LA 70359 Phone (985) 655-1051 (Fax) (985) 655-7000

Thank you for your prompt cooperation.

Authorized Signature

Date

Spouse Signature

Date

PERSONAL RESUME FORM
SCPDC Revolving Loan Program

General Information (To be completed by each individual principal involved in the project.)

Name _____
FIRST MIDDLE (MAIDEN) LAST

Cell phone _____ Business phone _____

Date of birth _____ Place of birth _____

Race (voluntary disclosure – has no bearing on credit decision) _____ Social Security No. _____

U.S. Citizen: YES NO if not, please provide alien registration number _____

Current home address _____ years at this address _____

City _____ State _____ Zip _____

Immediate past home address _____ years at this address _____

City _____ State _____ Zip _____

Marital status: married single divorced separated widowed other: _____

Are you employed by the U.S. Government? If so, give the name of the agency and position _____

Military service background

Branch _____ From _____ to _____

Rank _____ Honorable discharge? _____

Job description _____

Work experience (List chronologically, beginning with present employment)

1. _____
Name of company (current) _____ % of business owned _____

City _____ State _____ from date _____ to date _____

Duties _____

PERSONAL RESUME FORM
SCPDC Revolving Loan Program

Work experience (continued)

2. _____
Name of company (most recent past employer) % of business owned

City State from date to date

Duties

3. _____
Name of company (2nd most recent past employer) % of business owned

City State from date to date

Duties

4. _____
Name of company (3rd most recent past employer) % of business owned

City State from date to date

Duties

Education (College or Technical Training)

Name of institution degree earned

City State from date to date

Name of institution degree earned

City State from date to date

Name of institution degree earned

City State from date to date

Signature

Date

