



Credit and Loan Information

Uses of Funds	Amount	Sources of Funds	Amount
Leasehold Improvements	\$	Bank Loan (if any)	\$
Machinery and Equipment	\$	TOD Retail RLF	\$
Working Capital	\$	Owner Equity Contribution	\$
Other	\$	Other	\$
TOTAL	\$	TOTAL	\$

Current Bank Relationship:

Comments (Optional):



I/We hereby request and authorize you to release to the National Development Council (NDC) on behalf of Suffolk County Economic Development Corporation, for verification purposes, personal and corporate credit reports and information concerning the company/corporation/partnership and/or the officers and individuals listed below. That information may include but is not limited to:

- a. Employment history dates, title, income, hours worked, etc.
- b. Banking (checking and saving) accounts of record
- c. Mortgage loan rating (opening date, high credit, payment amount, loan balance, and payments)
- d. Any information deemed necessary in connection with a consumer credit report for my loan application

This information is for the confidential use of this lender in compiling a loan report. A photographic or carbon copy of this authorization (being a photographic or carbon copy of the signature(s) of the undersigned), may be deemed to be the equivalent of the original and may be used as a duplicate original.

Date: _____

Application Information

Business Name:	
Phone Number:	
Affiliated Business:	
Phone Number:	

Individual 1

Name of Officer/Owner:	
Address for last two Years:	
Social Security #:	Date of Birth:
Signature: X	

Individual 2

Name of Officer/Owner:	
Address for last two Years:	
Social Security #:	Date of Birth:
Signature: X	

Individual 3

Name of Officer/Owner:	
Address for last two Years:	
Social Security #:	Date of Birth:
Signature: X	

Personal Financial Statement

As of _____, 20____

Complete this form for (1) each proprietor, or (2) each limited partner who owns 20% or more interest, and each general partner, or (3) each stockholder owning 20% or more of voting stock, or (4) any other person or entity providing a guaranty of the loan.

Name	Business Phone ()
Residence Address	Residence Phone ()
Business Name of Applicant/Borrower	Business Phone ()

ASSETS	LIABILITIES
Cash on hand and in banks \$ _____	Accounts Payable \$ _____
Savings accounts and CDs \$ _____	Notes Payable (Section 2) \$ _____
IRA or other Retirement Accounts \$ _____	Auto Loans – Monthly Payment \$ _____ \$ _____
Accounts & Notes Receivable \$ _____	Credit Cards – Monthly Payment \$ _____ \$ _____
Life Insurance – Cash Value only (Section 8) \$ _____	Other Installment Loans (Section 5) \$ _____
Stocks & Bonds (Section 3) \$ _____	Loan on Life Insurance \$ _____
Real Estate (Section 4) \$ _____	Mortgages on Real Estate (Section 4) \$ _____
Automobile Yr./Make _____ \$ _____	Unpaid Taxes (Section 6) \$ _____
Automobile Yr./Make _____ \$ _____	Other Liabilities (Section 7) \$ _____
Other Personal Property (Section 5) \$ _____	Total Liabilities \$ _____
Other Assets (Section 5) \$ _____	Net Worth \$ _____
Total Assets \$ _____	Total Liabilities & Net Worth \$ _____

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

Description of Other Income in Section 1

Note: Alimony or child support payments need not be disclosed in Other Income unless it is desired to have such payments counted in total income.

Section 2 -- Note Payable to Bank and Others (Use attachments as necessary. Each attachment must be identified as a part of the statement, signed and dated.)

Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Payment Frequency	How Secured or Endorsed & Type of Collateral

Section 3 – Stocks & Bonds (Use attachments as necessary. Each attachment must be identified as a part of the statement, signed and dated.)

Number of Shares	Name of Securities	Cost	Market Value Quotation Or Exchange	Date of Quotation Or Exchange	Total Value

Section 4 – Real Estate Owned (List each parcel separately. Each attachment must be identified as a part of the statement, signed and dated.)

Type of Property Address of Property	Date Purchased	Original Cost	Present Market Value	Mortgage Balance	Monthly Payments	Monthly Rental Income	Name & Address of Mortgage Lender

Section 5 – Other Personal Property & Other Assets including business investments not described above (Describe, and if any is pledged as security, provide details of debt in Section 2 above. If assets are pledged for the debt of others, state name and address of lienholder, amount of lien, terms of payment, and if delinquent, describe delinquency.)

Section 6 – Unpaid Taxes (Describe in detail: type, to whom payable, when due, amount, and to what property, if any a tax lien attaches.)

Section 7 – Other Liabilities (Describe in detail.)

Section 8 – Life Insurance Held (Give face amount and cash surrender value of policies, name of insurance company and beneficiaries.)

I authorize SCEDC to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify that the statements contained in the attachments and above are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan, equity capital, a guaranty or some other financial accommodation. I understand FALSE statements may result in forfeiture of benefits and possible prosecution.

Have you ever filed bankruptcy? _____ Yes _____ No Do you have a will? _____ Yes _____ No
 Do you have life insurance? _____ Yes _____ No Do you have disability insurance? _____ Yes _____ No

Signature: _____ Date: _____ Social Security #: _____

Signature: _____ Date: _____ Social Security #: _____