

APPLICATION: PCDC Gap Financing Loan

Applicant(s):		
Business Name:		
Bus. Address:		
Contact Person:		
Title:		
Telephone:		
Email:		
Fed Tax ID#-SS#:		
Business Information:		
Classification	<u>Organization</u>	<u>Type</u>
Administrative	Proprietorship	Start-Up
Management HQ Manufacturing/Processing	Partnership Corporation	Existing
Manufacturing/Processing Warehouse/Distribution	Other	Business Buy-Out (transition)
Retail	— Other	(transition)
Service		
Tourism		
Wholesale		
Business Owner(s):		
		
% Women Owned:		
% Minority Owned		
% Disabled Owned		
Business, Product, or Service:		
Current Employees:		
Projected Employees: 1 year	3 years	5 years

Project Financing

Provide a description of the project's financing plan and the assistance requested from PCDC on a separate one-page document, attached. Include owner's equity, bank financing, grant funding, assistance from relatives or others, and the reason for seeking assistance from PCDC. Attach bank underwriting documents.

Total Project Cost / Investment \$	
Sources of Funds	Uses of Funds
Owner Equity	Land
Bank Financing	Duil die e
Bank Interest Rate	Furniture/Equipment
Other	Training
PCDC Request	Working Capital
PCDC % Project	Other
TOTAL Sources	TOTAL Uses
(PCDC loan cannot exceed 50% of pro	ject financing)
Other sources of income	
Business or Person	Income Source
Documentation required. Additional doc	cumentation may be required in some cases.
Business Application Requireme	ents - Checklist
Business Plan	
 Tax Returns (two or more year) 	ears)
— Current P&L	
Credit ReportProof of Ownership	
— 1 Tool of Ownership	
upon by representatives of the Phelps	ication and supporting information is accurate, and may be relied County Development Corporation. Furthermore, I recognize that I utilizes the community's LB840 program and must meet guidelines Development Plan and by PCDC.
	Date
Name	Date:
Title	
Name	

Title