



314 Main Street, Kalispell, MT 59901

# Loan Program and Application

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Thank you for considering Montana West Economic Development (MWED) for your financial needs. Our goal is to build Northwestern Montana's economy by working with new and expanding businesses. Your success in business helps sustain communities, and also creates income opportunities for residents.

The loan process at MWED begins with a telephone call to Tina Oliphant at 406-257-7711. We can explain the loan process and evaluate if MWED financing programs are right for your project, and if the company is ready to complete the process.

The application begins on page 2 and lists supporting documentation requirements (page 4). If you need assistance with the application, or if you have questions about the lending process and timeline, we are available to help and answer questions.

If you need assistance developing your business plan or cash flows, or require other business counseling, MWED can provide these resources or connect you with the Small Business Development Director for this region.

## Included in this package:

Application

Supporting Documentation Requirements

Personal Financial Statement

Credit Verification and Authorization

Civil Rights Monitoring

*MWED practices equal treatment of clients. MWED does not discriminate on the grounds of race, color, religion, gender, marital status, disability or national origin in services or accommodations offered to our employees, clients or guests*

## APPLICATION – Part I – BUSINESS

Complete one copy of this form for your business. If you need assistance filling out this application, please contact MWED at (406) 257-7711.

Business Name	Business Phone	Website
Business Address	Primary Contact Person	Contact's Cell Phone
Business City, State & Zip	Tax ID Number	Year Business Founded

CHECK AS APPLICABLE: Applicant is applying for this loan:

- Individually, without a co-applicant(s) or guarantor(s).
- Jointly, with a co-applicant(s) or guarantor(s). All persons with more than 20% ownership in the business must apply as co-applicants.

Name of Primary Applicant: \_\_\_\_\_ Social Security Number \_\_\_\_\_

Name of Co-applicant or Guarantor: \_\_\_\_\_ Social Security Number \_\_\_\_\_

Name of Co-applicant or Guarantor: \_\_\_\_\_ Social Security Number \_\_\_\_\_

Name of Co-applicant or Guarantor: \_\_\_\_\_ Social Security Number \_\_\_\_\_

## Business Ownership

Please list all owners of the business and percent ownership:

NAME	OWNED SINCE (YEAR)	PERCENT (%) OWNED

## Loan Request

Amount of loan requested:	\$ _____		
Purpose of loan:	_____		
Type of business:	_____		
Have you applied for a loan with MWED for this business before?	_____	If yes, date: _____	
Have you applied for other financing in conjunction with this loan?	_____	If yes, where: _____	Were you successful? _____

Existing Business Debt							
Lender	Loan # (if applicable)	Original Loan Amount	Interest Rate	Loan Start Date	Loan End Date	Monthly Payment	Current Balance

Collateral					
Please list and describe the business and personal collateral available to secure this loan.					
Item	Resale Value	Is this used as collateral on an existing loan?		Existing Debt on Item	Item Description
		Yes	No		

Business Impacts					
To fulfill MWED's mission, we track employment impacts for our loans. Please let us know about your company's employees or; if you are starting a new business, please tell us about the positions that your company will create.					
FULL TIME POSITIONS			PART TIME POSITIONS		
Number of Current F/T Permanent Positions			Current P/T Permanent Positions		
Number of F/T Positions above that are new as a result of this loan			Number of P/T Positions above that are new as a result of this loan		
# of Women Employees		# of Minority Employees		# of Disabled Employees	
Do you Provide any benefits? Please explain:					

I hereby authorize MWED or any of its affiliates to make all inquiries it deems necessary to verify the accuracy of the information provided herein, to determine my credit-worthiness, and for any other purpose related to my credit transaction with them. Further, I hereby certify that the enclosed application information, including any attachments/exhibits, is valid and correct to the best of my knowledge.

\_\_\_\_\_ Date

Applicant or Guarantor's Signature

\_\_\_\_\_ Date

Co-Applicant's Signature (if listing assets jointly)

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**Other Required Business Documents: Please call to confirm what is required**

<i>Application and Supporting Documents</i>	<i>Corporate Structure Documents</i>
<ul style="list-style-type: none"><li>€ Application</li><li>€ 3 years business tax statements if applicable</li><li>€ 3 years company prepared financial statements</li><li>€ Interim financial statement if applicable</li><li>€ 2 Years Projections – Profit and Loss and Cash Flow</li><li>€ Business Plan</li><li>€ Personal financial statements on owners in excess of 20% ownership (attached)</li><li>€ Request for Credit Release (attached)</li><li>€ 3 years tax statements on owners in excess of 20% ownership</li><li>€ Appraisals and descriptions of collateral is applicable</li></ul>	<ul style="list-style-type: none"><li>€ Corporation: Articles of Incorporation and Bylaws</li><li>€ Partnership: Partnership Agreement</li><li>€ LLC and LLP: Operating Agreement</li></ul>

## MWED LOAN APPLICATION – Part II – OWNERS, CO-APPLICANTS and GUARANTORS

Part II of MWED's loan application must be completed individually by each owner with 20% or more ownership. In addition, each guarantor and co-signer must individually complete this section of the application. If additional copies of the MWED Loan Application Part II are needed, this section can be photocopied or it can be downloaded at [www.mtcdc.org](http://www.mtcdc.org).

Name		Business Phone	Residence Phone	Cell Phone
Residence Street Address		City	State	Zip
Email Address		Social Security Number	Business Name of Applicant/Borrower	
Occupation	Name of Employer			# of Years
Date of Birth	Number of Dependents	Ages of Dependents	Have you ever applied for an MWED loan? If so, date: / /	
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (includes single, divorced or widowed) <i>MWED does not discriminate on the basis of marital status, this information will be used to assess collateral and guarantees</i>				
Applicant Type: <input type="checkbox"/> Owner/Partner/Shareholder/Director with more than 20% ownership <input type="checkbox"/> Guarantor				
Are you, (a) presently under indictment, on parole or probation or (b) have you ever been charged with or arrested or convicted of any criminal offense other than a vehicle violation? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Have you, (a) been involved in bankruptcy or insolvency proceeding or (b) have pending personal or business judgments, unsettled lawsuits or major disputes? <input type="checkbox"/> Yes <input type="checkbox"/> No				

### Personal Financial Statement

Please fill out the following summary information. The 12 schedules following this chart ask for detailed information about each line item below. Please make sure that the detailed information total from each of the 12 schedules matches in numbers entered in this chart.

ASSETS		LIABILITIES	
Cash on Hand	\$	Accounts and Bills Payable (Complete Schedule I)	\$
Cash in Bank Accounts (Complete Schedule A)	\$	Debt on Real Estate (Describe in Schedule J)	\$
IRA or Other Retirement Account (Complete Schedule B)	\$	Notes and Loans Payable (Describe in Schedule K)	\$
Accounts and Notes Receivable (Complete Schedule C)	\$	Unpaid Taxes and Other Liabilities (Describe in Schedule L)	\$
Cash Value of Life Insurance Face Value \$ _____ (Complete Schedule D)	\$	TOTAL LIABILITIES	\$
Stock and Bonds (Describe in Schedule E)	\$		\$
Real Estate (Describe in Schedule F)	\$		\$
Privately Owned Businesses (Describe in Schedule G)	\$		\$
Total Other Assets (Describe in Schedule H)	\$	NET WORTH (TOTAL ASSETS LESS TOTAL LIABILITIES)	\$
TOTAL ASSETS	\$	TOTAL LIABILITIES PLUS NET WORTH	\$

**PLEASE INDICATE OR PROVIDE EXPLANATION RELATING TO ANY ASSETS OWNED JOINTLY OR BY A TRUST OR LIABILITIES OWED WITH OTHERS. (ATTACH SCHEDULES AND EXPLANATORY NOTES IF NECESSARY)**

\* Alimony, child support or maintenance payment income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

**Detailed Schedules for the Personal Financial Statement**

<b>SCHEDULE A</b>			<b>CASH LOCATION, STATUS OF BANK ACCOUNTS AND SAVINGS ACCOUNTS</b>						
CKNG	CD'S	SVNG	Bank and Branch Where Carried	Balance	Interest Rate	Date CD Matures	Is this account pledged for a loan?	Balance of Loan	Maturity Date of Loan

<b>SCHEDULE B</b>		<b>RETIREMENT ACCOUNTS</b>				
Account Type	Investment Company	Balance	Is this account pledged for a loan?	Balance of Loan	Maturity Date of Loan	Is account fully vested?
TOTAL		\$				

<b>SCHEDULE C</b>		<b>ACCOUNTS AND NOTES RECEIVABLE</b>				
Owner(s)	Due From	Address	Collateral	Maturity	How Payable	Balance
					\$ per	
					\$ per	
					\$ per	
					\$ per	
					\$ per	
TOTAL					\$ per	\$

<b>SCHEDULE D</b>		<b>LIFE INSURANCE</b>				
Insurance Company Name	Policy #	Type Owner	Face Amount of Policy	Beneficiary	Amount	Net Cash Value Borrowed
TOTAL						\$

<b>SCHEDULE E</b>		<b>STOCKS AND BONDS (Include interest in any closely held business)</b>					
Description	No. Shares	Registered in Name of	Source of Valuation	Date	Price Per Share	Total Value	Purchased on Margin or Pledged
TOTAL						\$	

<b>SCHEDULE F</b>		<b>REAL ESTATE</b>			
Description	Address/Location	Owner(s)	Date Acquired	Purchase Price	Present Value
TOTAL					\$

<b>SCHEDULE G</b>		<b>PRIVATELY OWNED BUSINESS</b>				
Name/Type of Business	Date Acquired	% Owned	Gross Revenue 3 Years	Net Profit 3 Years	Cost	Market Value
TOTAL						\$

<b>SCHEDULE H</b>		<b>AUTOMOBILES, OTHER ASSETS AND PERSONAL PROPERTY</b>					
Automobiles	Value	Rec. Vehicles & Boats	Value	Personal Property	Value	Subtotals	
Yr: Make:		Yr: Make:		Furniture		Autos	\$
Yr: Make:		Yr: Make:		Jewelry		RVs/Boats	\$
Yr: Make:		Yr: Make:		Equipment		Pers Prop	\$
		Other		Other			
Subtotal Autos	\$	Subtotal RVs/Boats	\$	Subtotal Personal Property	\$	<b>TOTAL Other Assets</b>	\$

<b>SCHEDULE I</b>		<b>ACCOUNTS AND BILLS PAYABLE (including credit cards)</b>			
Payable To	Account Number	Person(s) Liabile	How Payable	Balance Due	
			\$ per		
			\$ per		
			\$ per		
			\$ per		
			\$ per		
TOTALS			\$ per	\$	

<b>SCHEDULE J</b>		<b>DEBT ON REAL ESTATE</b>			
Description	Payable To	Payment	Date of Loan	Original Balance	Balance Due
TOTALS		\$			\$

<b>SCHEDULE K</b>		<b>NOTES AND LOANS PAYABLE (Automobile, Installment Loans, Life Ins., 401K)</b>				
Payable To	Address	Collateral	Person(s) Liable	Maturity Date	How Payable	Balance Due
					\$ per	
					\$ per	
					\$ per	\$
TOTALS					\$ per	

<b>SCHEDULE L</b>		<b>TAX AND OTHER LIABILITIES</b>		
Payable To	Person(s) Liable	Collateral	How Payable	Balance Due
			\$ per	
			\$ per	
TOTALS			\$ per	\$

<b>Monthly Personal Financials</b>					
<b>INCOME</b>		\$ Amount	<b>EXPENSES</b>		\$ Amount
Salary/Owner Draws from Business	\$		Education and Childcare	\$	
Spouse's Income	\$		Food and Clothing	\$	
Applicant's Other Employment Income	\$		Child Support / Alimony	\$	
Any Other Income (describe below)	\$		Home Rent / Mortgage	\$	
TOTAL	\$		Utilities	\$	
			Insurance, Gasoline, Miscellaneous	\$	
			Credit Card Payments	\$	
			Vehicle and Other Loan Payments	\$	
			TOTAL	\$	

<b>Business and Personal References (Non-Family)</b>			
Name	Address	Phone	Relationship
Name, Address and Phone Number of closest relative not living with you:			

I hereby authorize MWED or any of its affiliates to make all inquiries it deems necessary to verify the accuracy of the information provided herein, to determine my credit-worthiness, and for any other purpose related to my credit transaction with them. Further, I hereby certify that the enclosed application information, including any attachments/exhibits, is valid and correct to the best of my knowledge.

\_\_\_\_\_ Date

Applicant or Guarantor's Signature

\_\_\_\_\_ Date

Co-Applicant's Signature (if listing assets jointly)

**Please attach a list explaining any unsatisfactory accounts that may appear on your credit report**

# CREDIT REPORT VERIFICATION AND AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern:

I/We have applied for a business loan with Montana West Economic Development. You are hereby authorized to release any information or consumer report required by Montana West Economic Development to complete the processing of the loan request. Necessary credit information may include savings deposits, checking accounts, consumer credit balances, business credit balances, payments and history, including mortgage payment records and balances, and lease payments.

I/We authorize the credit reporting agency chosen by Montana West Economic Development to verify my/our past and present employment earnings records, bank accounts, stock holdings and any other asset balances that are needed to process my/our loan application.

A photographic or carbon copy of this signed authorization may be used as a duplicate original.

Thank you.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Social Security #

\_\_\_\_\_  
Address

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Social Security #

\_\_\_\_\_  
Address

## CIVIL RIGHTS MONITORING INFORMATION

The following information is requested by MWED in order to provide evidence of compliance to our loan program funders. You are not required to furnish this information, but are encouraged to do so. The law requires that a lender may neither discriminate on the basis of this information, nor on whether you choose to furnish it. However, if you choose not to furnish it, this lender is required to note race and sex on the basis of visual observation or surname. If you do not wish to furnish the information, please check the box below. (Lender must review the material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable loan fund requirements for the particular type of loan applied for.)

Borrower	Co-Borrower				
<input type="checkbox"/> I do not want to furnish this information <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Black, not of Hispanic origin <input type="checkbox"/> Other (specify) <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Hispanic <input type="checkbox"/> White, not of Hispanic Origin  Sex <input type="checkbox"/> Female <input type="checkbox"/> Male	<input type="checkbox"/> I do not want to furnish this information <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Black, not of Hispanic origin <input type="checkbox"/> Other (specify) <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Hispanic <input type="checkbox"/> White, not of Hispanic Origin  Sex <input type="checkbox"/> Female <input type="checkbox"/> Male				
To be completed by interviewer. This application was taken by:  <input type="checkbox"/> face-to-face <input type="checkbox"/> by mail <input type="checkbox"/> by telephone	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Interviewer's name (print or type)</td> <td rowspan="3" style="width: 50%; vertical-align: top;">                             Montana West Economic Development                              314 Main Street                              Kalispell, MT 59901                         </td> </tr> <tr> <td>Interviewer's Signature</td> </tr> <tr> <td>Interviewer's Phone Number (include area code)</td> </tr> </table>	Interviewer's name (print or type)	Montana West Economic Development 314 Main Street Kalispell, MT 59901	Interviewer's Signature	Interviewer's Phone Number (include area code)
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Interviewer's Signature					
Interviewer's Phone Number (include area code)					

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name