



Minnesota Business Finance Corporation

Loan Application

616 Roosevelt Road-Suite 200
St. Cloud, MN 56301
320-258-5000 • 800-593-0123
Fax: 320-255-1815

Web Address: www.mbfc.org

Minnesota Business Finance Corporation

CHECKLIST regarding attachments to Application:

Financial Information

- _____ Three years of historical fiscal year end financial statements for business
- _____ Three years of tax returns for business.
- _____ Interim financial statement for business (current within 120 days).
- _____ Aging of A/R and A/P of the same date as interim financial statement.
- _____ If there are affiliates, please provide two years of tax returns or historical fiscal year end financial statements and current business debt schedule.
- _____ Two years of projections for business, complete with Assumptions if project is a start-up, existing cash flow doesn't support proposed debt or is a business purchase. (Projections should include a Pro Forma Balance Sheet and Income Statement. For a new business, a monthly cash flow analysis is also needed for the first 12 months of operation or for three months beyond the breakeven point.)
- _____ Schedule of Business Debts as of date of interim financial statement (see attached Schedule of Business Debts Form)
- _____ Schedule of Previous and Other Proposed Government Financing (if previous SBA borrowings, please provide a copy of the Loan Authorization.)
- _____ Personal Financial Statement current within 90 days (for each person with 20% or more ownership interest in Small Business or Borrower; either on SBA Form 413 or attached to signed SBA Form 413.)
- _____ Personal tax returns for last fiscal year

Business Information

- _____ Business Plan (strongly encouraged; format provided as attached)
- _____ Resumes of principals involved in day-to-day management (see Personal Resume form)
- _____ If a franchise, include a copy of the Franchise Agreement and the Franchisor's Disclosure Statement that is required by the Federal Trade Commission
- _____ A copy of key cost documents such as real estate purchase agreements, contractor cost estimates, vendor quotes for machinery and equipment, etc.
- _____ If project costs includes construction or renovation costs, the NEHRP provisions will need to be addressed with signed contractor certification, or removing the provisions from the authorization if renovations are temporary.
- _____ Appraisal as required by SBA Standard Operating Procedures (Please provide whatever property valuations and appraisals are available.)
 - ◆ Appraisals are required at the time of application for projects involving the use of existing property as a source of the equity injection.
 - ◆ Otherwise, SBA approval is made contingent on the assumed appraised value.
 - ◆ New construction special purpose project required the as completed appraisal to include any FF&E being financed.
- _____ Environmental Questionnaire
 - ◆ Based on results, further investigation including a RSRA or Phase I may be required
 - ◆ People-occupied facilities built prior to 1978, require lead-based paint testing
 - ◆ Gas stations and drycleaners, have further environmental requirement
- _____ Copy of existing or proposed lease agreement, if applicable

Business Organizational Documents

- _____ If SBC is a Corporation, please provide a copy of the Articles of Incorporation and Bylaws; Certificate of Incorporation
- _____ If SBC is a Partnership, please provide a copy of the Partnership Agreement.
- _____ If SBC is an LLC, please provide a copy of the Articles of Organization and Operating Agreement, and Certificate of Organization
- _____ If SBC is a Proprietorship or operates under a name other than SBC's Legal Name, an Assumed Name Certificate are needed.
- _____ Ownership Affidavit Completed in MBFC Application
- _____ If project property state differs from state of registration, the company must be registered as a foreign entity in the state doing business.

SBA Forms

- _____ Section 1: Business Information (SBA Form 1244)
- _____ Section 2: Information of Associates (SBA Form 1244) completed by all associates of the business; including all key employees, day-to-day managers, officers and directors; regardless of ownership; and for all stockholders with 20% or more ownership.
- _____ If a positive response to questions 3 or 4 on Section 2, Associate must complete SBA Written Addendum to detail offense and provide documentation. Original signature required.
- _____ Section 3: Statements Required by Laws and Executive Orders (SBA Form 1244) with original signature
- _____ Request for Tax Transcripts (SBA Form 4506 for small business concern)
- _____ Taxpayer Consent to use of IRS Tax Transcripts
- _____ If a Loan Packager was hired and compensated for completion of this Application, an SBA Form 159 Compensation Agreement must be completed by the Borrower and the Loan Packager (submit at closing)
- _____ Authorization to Release Information
- _____ Non-affiliation Certification for entities with minor ownership or non-control.
- _____ Exhibit Forms (**Signature Required on Exhibit 9 and 10**)
- _____ CIP Form (Customer is persons, meaning both natural persons and entities such as partnerships, corporations, LLC, or trusts applying, and/or receiving benefit of a 504 loan. Thus, customer will be any Borrower, EPC, OC and Co-Borrower. In Addition, if customer Borrower, EPC, OC, or Co-Borrower is an entity, then CIP will include all persons or entities with a managing or controlling interest as defined by SBA regulations. Forms include: Signature Form, Intake Identity Form, Customer Identification Form (Individual, Entity or Non-documentary.)
- _____ Driver License Copy
- _____ Job Creation/Retention completed in MBFC Application

Information provided by Lender

- _____ Commitment Letter or Letter of Proposed Terms stating the terms and conditions of its participation and the reason why it will not finance the entire project.
- _____ Lender's Credit Presentation
- _____ Credit Reports

Date: _____

Completed by: _____



Minnesota Business Finance Corporation

Third Party Lender - SBA 504 Debt Refinancing Checklist:

- _____ Debt was incurred not less than 6 months prior to the day of the 504 application for the benefit of the small business concern has been collateralized by Eligible Fixed Assets.
- _____ Existing federal debts including 7(a) and 504 loans are eligible to be refinanced. For 7(a) loans, the existing lender must provide documentation that they are unwilling or unable to modify the current payment schedule. In the case of Same Institution Debt, if the Third Party Lender is the 7(a) lender, the loan will be eligible for 504 refinancing only if the lender is unable to modify the terms of the existing loan because a secondary market investor will not agree to modified terms. If including a 504 in the refinance, the entire TPL loan and SBA 504 loan must be included in the project.
- _____ The refinancing of federally-guaranteed loans will provide substantial benefit to the borrower. The new loan amount will be at least 10% less than the new payment. The refinancing will provide better terms, or rate of interest than the existing debt. If a balloon balance comes due within 5 years or less of the SBA application, the presence of the balloon payment automatically meets the "substantial benefit test".
- _____ Small business concern must have been in business for two years prior to the submission of the application. A partial ownership change may be considered a new business if it results in new or unproven management and increased debt.
- _____ Provide copies of note, recorded mortgage, security agreement, UCC's, settlement statements, and any other collateral documentation securing the existing debt. If loan was refinanced, obtain copies of original loan documents (note, mortgage, security agreement, UCC's, settlement statement, etc).
- _____ If there are multiple refinances throughout the history of the loan, then provide copies of these loan documents (note, mortgage, security agreement, UCC's, settlement statement, etc.) Note: SBA will expect the lender, if it is the original lending institution, to produce the necessary documentation.
- _____ Documentation to prove substantially all (85% or more) of the proceeds of the original loan being refinanced must have been used for 504 eligible purposes; real estate purchase/improvement or long term equipment. The remaining amount (15% or less) was incurred for the benefit of the small business.
- _____ The small business must currently occupy at least 51% of the property.
- _____ 12 month payment transcript. Transcript should include bank name, borrower name, date payment is due, date payment is posted, amount of payment, original balance, remaining balance, late fees, etc. For same institution debt - transcript must be provided for the entire loan history.
- _____ Current payoff statement on loan(s) being refinanced.
- _____ Appraisal is not required at the time of application. Appraisal must be dated within one year of application. LTV max is 90% on non cash out refinance projects. (SBA must be listed as intended users.)
- _____ Special Purpose Project: At least 15% equity from borrower (As of 8/3/2020, reduced requirement to 10% until end of economic recession).
- _____ Bank commitment letter stating reason will not make the loan without SBA participation. Additionally, the Bank certifies it has no knowledge of default by the borrower on their existing financing nor knowledge or information that would indicate the likelihood of a default (MBFC will provide SBA form).
- _____ Bank must be in a 1st lien position and SBA in a 2nd lien position.

_____ The TPL loan needs to be at least as much as the 504 loan. SBA loan cannot be more than 40% of the project/Appraised Value.

_____ For CASH OUT REFINANCE: If borrower is utilizing equity to finance "Business Operating Expenses" (BOE):

_____ Max LTV is 85%. Business Operating Expenses portion cannot exceed 20% of appraised value.

_____ Verify BOE are due for payment within 18 months of the application date.

_____ Provide documentation of BOE such as invoices, bills, payroll receipts, cancelled checks, etc.



Minnesota Business Finance Corporation

Expansion + Refinance Checklist

Definition of Expansion – any project that involves the acquisition, construction or improvement of land, building, or equipment for use by the small business.

- _____ Amount eligible for refinancing must be no more than 100% of the cost of expansion.
- _____ Debt was used to finance SBA-eligible assets (as described above), and is collateralized by fixed assets.
- _____ Debt was incurred for the benefit of the small business.
- _____ Existing 7(a) and 504 loans are eligible to be refinanced. For 7(a) loans, the existing lender must provide documentation that they are unwilling or unable to modify the current payment schedule. In the case of Same Institution Debt, if the Third Party Lender is the 7(a) lender, the loan will be eligible for 504 refinancing only if the lender is unable to modify the terms of the existing loan because a secondary market investor will not agree to modified terms. If including a 504 in the refinance, the entire TPL loan and SBA 504 loan must be included in the project.
- _____ The refinancing will provide substantial benefit to the borrower. The new loan amount will be at least 10% less than the new payment. The refinancing will provide better terms, or rate of interest than the existing debt.
- _____ The borrower has been current on all payments for not less than 1 year preceding the date of the refinancing. Provide copy of payment transcript from the bank with no 30+ day late payments.
- _____ 504 proceeds are not used to refinance debt owed to an associate of the loan applicant, an SBIC, any creditor in a position to sustain a loss causing a shift to SBA of all or part of a potential loss from the existing debt.
- _____ Provide copies of note, recorded mortgage, security agreement, UCC financing statements, settlement statements, and any other collateral documentation securing the existing debt. If debt has been refinanced, provide copies of original loan documents, at least 85% or more of the original loan being refinanced must have been used for 504 eligible purposes.
- _____ Current pay-off statement on loan(s) being refinanced.
- _____ Appraisal within 12 months of application documenting market value of assets securing debt to be refinanced. MBFC and SBA listed as intended users of report.
- _____ MBFC will provide SBA form of commitment letter with language specific to permanent debt refinance.

MINNESOTA BUSINESS FINANCE CORPORATION
LOAN APPLICATION

SMALL BUSINESS CONCERN (SBC):

Company Name _____

Address _____

Phone (____) _____

Fax (____) _____

Email Address _____

Contact Person _____

Type of Entity ☐ Proprietorship ☐ Partnership ☐ Corporation ☐ LLC

Tax ID # _____ Date Established _____

Ownership Name _____ Title _____ Ownership _____ %

Name _____ Title _____ Ownership _____ %

Name _____ Title _____ Ownership _____ %

Have there been any ownership changes in the past 6 months? ☐ Yes ☐ No

BORROWER: (if other than Small Business Concern)

☐ Not Applicable

(Eligible Passive Company)

Borrower Name _____

Type of Entity ☐ Individual/Joint ☐ Partnership ☐ Corporation ☐ LLC

SSN or Tax ID # _____

Ownership Name _____ Title _____ Ownership _____ %

Name _____ Title _____ Ownership _____ %

Name _____ Title _____ Ownership _____ %

Have there been any ownership changes in the past 6 months? ☐ Yes ☐ No

Who will own the real estate? _____

Who will own the equipment? _____

LENDER:

Lender _____

Address _____

Phone (____) _____

Fax (____) _____

Email Address _____

Contact Person _____

ABOUT YOUR PROJECT

Purpose of project: _____

PROJECT USES OF FUNDS

Land (<i>and purchase of existing Building, if applicable</i>)	\$ _____
Building (<i>new construction, Remodeling, L/H improvement, etc.</i>)	\$ _____
Machinery & Equipment (<i>purchase, installation, etc.</i>)	\$ _____
Debt to be Refinanced	\$ _____
Professional Fees (<i>appraiser, architect, legal, etc.</i>)	\$ _____
Contingencies	\$ _____
Total Project Uses	\$ _____

PROJECT SOURCES OF FUNDS

Lender	1 st Mortgage	\$ _____	_____ %
SBA	2 nd Mortgage	\$ _____	_____ %
Equity Injection by owner		\$ _____	_____ %
Other		\$ _____	_____ %
Other		\$ _____	_____ %
Total Project Sources		\$ _____	100 %

SOURCE OF EQUITY INJECTION

Cash	\$ _____	Land and/or Building Equity	\$ _____
Other	_____		\$ _____

ABOUT YOUR BUSINESS

Affiliate Businesses, if applicable

Name _____ Owner _____ Ownership _____ %
(Applicant Co. or Individual)

Name _____ Owner _____ Ownership _____ %
(Applicant Co. or Individual)

Any Previous Government Borrowings by Small Business Concern or Affiliates

☐ Yes ☐ No If Yes, please describe _____

Nature of your business _____

Products or Services _____

Geographic Market Area _____

Key Customers _____

Major Competitors _____

Existing Location(s) _____

County(ies) _____

Sq. ft. _____ Do you Rent or Own? (Circle One)

What are your plans for existing location(s)? _____

Street Address of
New Project _____

County _____

Sq. ft. of new building _____

Sq. ft. company will occupy _____

of Employees

Current _____ (in FTE's)

Estimated # of new (FTE) employees within 2 years as a result of this project _____
(FTE = full-time equivalent)

1. Have you or any officer of your company ever been involved in bankruptcy or insolvency proceedings? _____

2. Are you or your business involved in any pending or prior lawsuits? _____

3. Are you current on all federal state and local taxes; including income, payroll, real estate and sales tax? _____

4. Is ANY owner delinquent on any federal debt or had prior loss to the government? _____

5. Does the State require your business to carry workers compensation, professional liability/malpractice or liquor liability insurance? _____

6. Is the subject property listed on the National Register of Historic Places or have any historical significance? _____

7. Do any owners have close relatives with identical or substantially identical business or economic interest within the same geographical area? A close relative is defined as a spouse, parent, child, or sibling; or a spouse of any such person. _____

8. Do any owners have any officer positions, board positions, or management control in any other business interest not related to this application? _____

Name of Borrower _____

Signature _____

Date _____

Title _____

Authorization to Release Information

I/We hereby authorize the release to Minnesota Business Finance Corporation of any information they may require at any time for any purpose related to my/our credit transaction with them.

I/We further authorize Minnesota Business Finance Corporation to release such information to any entity they deem necessary for any purpose related to my/our credit transaction with them.

I/We hereby certify that the enclosed information, including any attachments or exhibits provided herewithin or at a later date, is valid and correct to the best of my/our knowledge.

I/We were informed that the SBA does not require applicant to employ an agent or representative (including MBFC) to assist with the loan application, packaging or referring.

Name of Small
Business Concern _____

Signature _____

Date _____

Title _____

Name of Borrower _____

Signature _____

Date _____

Title _____

NON-AFFILIATION CERTIFICATION

***Complete if Applicable**

As part of my SBA loan application, I certify that I do not have majority ownership in the following entity:

Company Name	Ownership Percentage	Description
	____% K-1 is attached	
	____% K-1 is attached	
	____% K-1 is attached	
	____% K-1 is attached	
	____% K-1 is attached	
	____% K-1 is attached	

Further, I have no day-to-day management control, officer positions, or the ability to prevent a quorum with my voting shares.

Signed:

_____ Date: _____



U.S. Small Business Administration
Application for Section 504 Loans
OMB Control No.: 3245-0071 (Expiration Date 12/31/2021)

Purpose of This Form

This form and exhibits are to be completed by the Small Business Applicant (“Applicant”) and the Certified Development Company (CDC). The information is used to review the Applicant’s eligibility for a loan, indebtedness, creditworthiness, and certain other disclosures. The Applicant submits the requested information to the CDC, which will then upload the information to the SBA’s E-Tran system. This form must be completed and uploaded by both PCLP and non-PCLP CDCs.

Structure and Instructions for this Form

This form is divided into four sections:

Section One (Pages 2-3) is completed by the Applicant. This section requests information about the Applicant and its ownership structure. If there are Co-Applicants (e.g., “Eligible Passive Company (EPC)” and “Operating Company (OC)”), both entities must submit the information requested on page 2 and enter ownership information in the relevant table on page 3. The CDC may provide guidance to the Applicant in filling out this section; however, the Applicant is responsible for, and certifies to, the accuracy of the information.

Section Two (Pages 4-5) is completed by the Associates of the Applicant, including:

- For a sole proprietorship, the sole proprietor;
- For a partnership, all general partners, and all limited partners owning 20% or more of the equity of the firm; or any partner that is involved in management of the Applicant;
- For a corporation, all owners of 20% or more of the corporation, and each officer and director;
- For limited liability companies, all members owning 20% or more of the company, each officer, director, and managing member;
- Any person or entity hired by the business to manage day-to-day operations (“key employee”); and
- Any Trustor (if the Applicant is owned by a trust).

All parties listed above are considered “Associates” of the Small Business Applicant (as defined in 13 C.F.R. § 120.10). If more than one person is required to complete this section, each person must separately complete and sign Section Two.

Section Three (Pages 6–11) contains the Statements Required by Law and Executive Order. These statements must be reviewed and signed by the Applicant representative and the Associates who completed section two.

Section Four (Pages 12–20) is completed by the CDC. This section contains fields for information regarding the CDC, the Third Party Lender and Interim Lender, the 504 Project, the Applicant, and potential conflicts of interest; identifies the exhibits required for a complete Application; and includes the CDC Agreements and Certifications that an authorized CDC official must sign on behalf of the CDC.



Application for Section 504 Loans

Section One: Business Information

Applicant Name (Eligible Passive Company, if applicable)			
Legal Name		Business Address	
DBA or Tradename	Legal Structure	Tax ID	DUNS Number
Contact Name	Email Address	Phone Number	Business Web Address
Operating Company (if Applicant is an EPC)			
Legal Name		Business Address	
DBA or Tradename	Legal Structure	Tax ID	DUNS Number
Contact Name	Email Address	Phone Number	Business Web Address

Project Address (if different than OC Address)	Type of Business (Summary Description)

# of existing employees employed by business (including owners who work for this business)	# of jobs to be created in the next two years as a result of the loan	# of jobs to be retained in the next two years as a result of the loan (including owners who work for this business)
Loan Amount Requested	Purpose of the loan	
\$		

- Does the Small Business Applicant have any Affiliates? ☐ Yes ☐ No
If "Yes," please attach a listing as a part of Exhibit 10
- Have the Small Business Applicant or any Affiliates ever obtained or applied for a direct or guaranteed loan from SBA, or from any other Federal, State or local government loan program or been a guarantor on such a loan? If yes, provide relevant information in Exhibit 9 ☐ Yes ☐ No
- Has an application for this Project previously been submitted to the SBA by any CDC or Lender in connection with any SBA program? ☐ Yes ☐ No
If yes, provide CDC/Lender Name and Loan Program: _____
- Has the Applicant business ever declared bankruptcy? ☐ Yes ☐ No
If yes, explain and provide relevant documents in Exhibit 27
- Is the Applicant business involved in any pending lawsuits? ☐ Yes ☐ No
If yes, explain and provide relevant documents in Exhibit 27
- Is the Applicant business owned by one of the following? ☐ 401(k) ☐ ESOP ☐ Trust ☐ Cooperative
If the Applicant is owned by an ESOP (Employee Stock Ownership Plan) or 401(k) plan (including a Rollover as Business Start-Up (ROBS) plan), Applicant must provide evidence to the CDC that the Applicant, ESOP, and/or the 401(k) plan are in compliance with all applicable Government Agencies (e.g., IRS, Treasury, and Department of Labor) requirements and that it will comply with all relevant operating and reporting requirements.



Application for Section 504 Loans

Section One: Business Information

Business Ownership (Attach additional pages if needed)

This section requires the Small Business Applicant to disclose 100% of its ownership as well as its Key Employees that do not have an ownership stake. A Key Employee is any person (as defined in 13 C.F.R. 120.10) hired by the business to manage day-to-day operations.

If some or all of the Applicant is owned by one or more entities: For each entity, list the organization name, organization type, tax identification number, and ownership percentage, and include any individuals who own each entity (100% ownership must be disclosed). Attach additional pages as necessary.

Please be advised that the Applicant must be owned and controlled by U.S. citizens or individuals with Lawful Permanent Resident status as verified through the United States Citizenship and Immigration Services by SBA.

Eligible Passive Company (EPC) Ownership (if applicable)

Owner/Entity Name	Title/Organization Type	SSN/TIN	Ownership %

Operating Company (OC) Ownership

Owner/Entity Name	Title/Organization Type	SSN/TIN	Ownership %

Application for Section 504 Loans

Section Two: Information Required to be Submitted by each Associate of the Applicant

Each Associate of the Applicant must separately complete and sign this Section. If the Applicant is operating under an EPC/OC structure, each of the EPC's and OC's Associates must complete and sign this section.

Name (Last, First, Middle)		Former Names and Dates Used	
U.S. Citizen?	USCIS Registration # (if Legal Permanent Resident)	If a non-US citizen or LPR, provide Country of Citizenship	
Yes <input type="checkbox"/> No <input type="checkbox"/>			
Place of Birth (City and State or Foreign Country)		SSN or IRS TIN	Date of Birth
Phone Number (Home or Cell)		Home Address (Street, City, State, Zip code)	

Answer the following Yes/No Questions and Initial to the Right of Each Answer

Initial

1. Do you have an ownership interest in any other entity that has existing SBA loans? ☐ Yes ☐ No _____

If yes, provide loan numbers and current status: _____

2. Are you presently subject to an indictment, criminal information, arraignment, or other means by which formal criminal charges are brought in any jurisdiction? ☐ Yes ☐ No _____

If yes, the Applicant is not eligible for SBA assistance

3. Have you been arrested in the last 6 months for any criminal offense? ☐ Yes ☐ No _____

If yes, please provide relevant documents as a part of Exhibit 28

4. For any criminal offense – other than a minor vehicle violation – have you ever: ☐ Yes ☐ No _____

1) been convicted; 2) pleaded guilty; 3) pleaded nolo contendere; 4) been placed on pretrial diversion; or 5) been placed on any form of parole or probation (including probation before judgment)? (If “Yes,” furnish the dates, locations, fines, sentences, level of charge (whether misdemeanor or felony), dates of parole/probation, unpaid fines or penalties, name(s) under which charged, and any other pertinent information as part of Exhibit 28)

5. Are you presently suspended, debarred, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal Department or agency? ☐ Yes ☐ No _____

If yes, the Applicant is not eligible for SBA assistance



Application for Section 504 Loans

Section Two: Information Required to be Submitted by each Associate of the Applicant

6. If you are a 50% or more owner of the Applicant, are you more than 60 days ☐ Yes ☐ No _____
delinquent on any obligation to pay child support arising under an administrative
order, court order, repayment agreement between the holder and a custodial parent,
or repayment agreement between the holder and a state agency providing child
support enforcement services? **If yes, the Applicant is not eligible for SBA assistance**
7. Have you ever declared bankruptcy? ☐ Yes ☐ No _____
If yes, please provide relevant documents as a part of Exhibit 27
8. Are you currently the subject of any pending lawsuits (including divorce)? ☐ Yes ☐ No _____
If yes, please provide relevant documents as a part of Exhibit 27
9. Has the Applicant or any affiliated company of the Applicant as well as any ☐ Yes ☐ No _____
Associate of the Applicant received any previous government financing?
If yes, please provide relevant documents as a part of Exhibit 9

Veteran/Gender/Race/Ethnicity Information

This data is collected for program reporting purposes only. Disclosure is voluntary and has no bearing on the credit decision.

Categories	Category Codes	Response
Veteran	1=Non-Veteran; 2=Veteran; 3=Service-Disabled Veteran; 4=Spouse of Veteran; X=Not Disclosed	
Gender	M=Male; F=Female; X=Not Disclosed	
Race	1=American Indian or Alaska Native; 2=Asian; 3=Black or African American; 4=Native Hawaiian or Pacific Islander; 5=White; X=Not Disclosed	
Ethnicity	H=Hispanic or Latino; N=Not Hispanic or Latino; X=Not Disclosed	

Criminal Penalties for False Statements – The undersigned certifies that all information provided in this Section Two is true and complete to the best of his or her knowledge. The undersigned acknowledges that whoever makes any false statement or report, or willfully overvalues any land property or security for the purpose of influencing in any way the action of the SBA under the Small Business Investment Act, as amended, may be fined up to \$250,000 and/or be put in jail for up to 5 years under 18 U.S.C. § 1001; may be fined not more than \$5,000 and/or put in jail for not more than 2 years under 15 U.S.C. § 645; and if false statements are submitted to a Federally insured institution, may be punished by a fine of not more than \$1,000,000 or by imprisonment for up to 30 years, or both, pursuant to 18 U.S.C. § 1014. The undersigned further acknowledges that, in connection with a 504 loan, submission of any false statement to the CDC or SBA or submission of any record to the CDC or SBA omitting material information can result in civil money penalties and additional monetary liability up to three times the amount of damages which the Government sustains because of the false statement under the False Claims Act, 31 U.S.C. § 3729.

Signature: _____ Date: _____

Print Name: _____

Signer's Relationship with Applicant Business: _____



Application for Section 504 Loans

Section Three: Statements Required by Law and Executive Order and Certifications
(Signed by the Applicant and Associates)

PLEASE READ, DETACH, AND RETAIN FOR YOUR RECORDS STATEMENTS REQUIRED BY LAW AND EXECUTIVE ORDER

This application, and any assistance provided pursuant to this application, is subject to the following laws, regulations, and Executive Orders:

Freedom of Information Act (5 U.S.C. § 552) - This law provides, with some exceptions, that SBA must supply information reflected in agency files and records to a person requesting it. Information about approved loans that will be automatically released includes, among other things, statistics on our loan programs (individual borrowers are not identified in the statistics) and other information such as the names of the borrowers (and their officers, directors, stockholders or partners), the collateral pledged to secure the loan, the amount of the loan, its purpose in general terms and the maturity. Proprietary data on a borrower would not routinely be made available to third parties. All requests under this Act are to be addressed to the nearest SBA office and be identified as a Freedom of Information request.

Privacy Act (5 U.S.C. § 552a) and Debt Collection Improvement Act (31 U.S.C. § 7701)

Authorities and Purpose for Collecting Information: SBA is collecting the information on this form, including social security numbers and other personal information, to make a character and credit eligibility decision in connection with you or your company's application for SBA assistance. SBA may also use social security numbers for the purpose of collecting and reporting on any delinquent fees or other amounts owed SBA.

Under the provisions of 31 U.S.C. § 7701, the applicant business and any guarantor of the loan are required to provide their social security numbers, or other taxpayer identification numbers, in order to do business with SBA. Failure to provide this information would affect your ability to obtain a 504 loan. For other individuals signing this application, the submission of the social security number is voluntary and failure to provide your social security number may not affect any right, benefit or privilege to which you are entitled. However, in evaluating whether the applicant satisfies the criteria for a 504 loan under section 501 et seq. of the Small Business Investment Act, 15 U.S.C. § 695 et seq., SBA considers whether the applicant and each of its Associates possess good character. In making this determination, SBA considers the person's integrity, candor, and criminal history if any. SBA is authorized, through section 308(f) of the Small Business Investment Act, to verify your criminal history, or lack thereof, pursuant to section 7(a)(1)(B) of the Small Business Act, 15 U.S.C. § 636(a)(1)(B). In addition, for all forms of assistance, SBA is authorized to make all investigations necessary to ensure that a person has not engaged in acts that violate or will violate the Small Business Investment Act, see 15 U.S.C. § 687b(a). In conducting the criminal background check, SBA also uses your social security number to distinguish you from other individuals with the same or similar name or other personal identifier. This use is permitted under Executive Order 9397.

Routine Uses: Some of the information collected may be checked against criminal history indices of the Federal Bureau of Investigation. When the information collected indicates a violation or potential violation of law, whether civil, criminal, or administrative in nature, SBA may refer it to the appropriate agency, whether Federal, State, local, or foreign, charged with responsibility for or otherwise involved in investigation, prosecution, enforcement or prevention of such violations. *See* SBA's Privacy Act System of Records, at 74 Fed. Reg. 14890 (2009) (as amended from time to time) for other published routine uses for the collected information.



Application for Section 504 Loans

Section Three: Statements Required by Law and Executive Order and Certifications

(Signed by the Applicant and Associates)

Federal Funding Accountability and Transparency Act of 2006, as amended (31 U.S.C. 6101 Note) - SBA routinely publishes information related to this loan application (e.g., name and address of borrower, amount of loan) on USAspending.gov, as required by the Federal Funding Accountability and Transparency Act of 2006, as amended.

Right to Financial Privacy Act of 1978 (12 U.S.C. § 3401 et seq.) – As required by the Right of Financial Privacy Act of 1978, SBA provides this notice of SBA's right to access financial records held by financial institutions that are or have been doing business with you or your business, including any financial institutions participating in a loan or loan guarantee. The law provides that SBA shall have a right of access to your financial records in connection with its consideration or administration of assistance to you in the form of a Government loan or loan guaranty agreement. SBA is required to provide a certificate of its compliance with the Act to a financial institution in connection with its first request for access to your financial records, after which no further certification is required for subsequent accesses. The law also provides that SBA's access rights continue for the term of any approved loan or loan guaranty agreement. No further notice to you of SBA's access rights is required during the term of any such agreement.

The law also authorizes SBA to transfer to another Government authority any financial records included in an application for a loan, or concerning an approved loan or loan guarantee, as necessary to process, service or foreclose on a loan or loan guarantee or to collect on a defaulted loan or loan guarantee. No other transfer of your financial records to another Government authority will be permitted by SBA except as required or permitted by law.

Debt Collection Act of 1982 and Debt Collection Improvement Act of 1996 (5 U.S.C. § 5514 note and 31 U.S.C. § 3701 et seq.) – These laws require SBA to aggressively collect any loan or other payments which become delinquent. SBA must obtain your taxpayer identification number when you apply for a loan. If you receive a loan, and do not make payments as they come due, SBA may take one or more of the following actions:

- Report the status of your loan(s) or other debt owed to SBA to credit bureaus
- Hire a collection agency to collect your loan or other delinquent debt
- Offset your income tax refund or other amounts due to you from the Federal Government
- Suspend or debar you or your company from doing business with the Federal Government
- Refer your loan or other delinquent debt to the Department of Justice or other attorneys for litigation
- Foreclose on collateral or take other action permitted in the loan instruments
- If you default on an SBA loan and fail to fully reimburse SBA for any resulting loss, refer you to the computer database of delinquent Federal debtors maintained by the Department of Housing and Urban Development, or other Federal agency, which may disqualify you from receiving financial assistance from other Federal agencies. In addition, unless SBA is reimbursed in full for the loss, you will not be eligible for additional SBA financial assistance.

Flood Disaster Protection Act (42 U.S.C. § 4012a) – Under this Act, and its implementing regulations, SBA is prohibited from providing financial assistance in a designated floodplain unless Federal flood insurance is purchased as a condition of the loan. Failure to maintain the required level of flood insurance makes the Applicant ineligible for any future financial assistance from SBA under any program, including disaster assistance.

Executive Orders 11988 and 11990 -- Floodplain Management and Wetland Protection (42 F.R. 26951 and 42 F.R. 26961) -- SBA discourages settlement in or development of a floodplain or a wetland. This



Application for Section 504 Loans

Section Three: Statements Required by Law and Executive Order and Certifications

(Signed by the Applicant and Associates)

statement is to notify all applicants for SBA assistance that such actions are hazardous to both life and property and should be avoided. The additional cost of flood preventive construction must be considered in addition to the possible loss of all assets and investments due to a future flood.

Occupational Safety and Health Act (29 U.S.C. § 651 et seq.) – The Occupational Safety and Health Administration (OSHA) can require businesses to modify facilities and procedures to protect employees. Businesses that do not comply may be fined and required to abate the hazards in their workplaces. They may also be ordered to cease operations posing an imminent danger of death or serious injury until employees can be protected. Signing this form is certification that the applicant, to the best of its knowledge, is in compliance with the applicable OSHA requirements, and will remain in compliance during the life of the loan.

Civil Rights Legislation – All businesses receiving SBA financial assistance must agree not to discriminate in any business practice, including employment practices and services to the public, on the basis of categories cited in 13 C.F.R., Parts 112, 113, and 117 of SBA Regulations. This includes making their goods and services available to handicapped clients or customers. All business borrowers will be required to display the "Equal Employment Opportunity Poster" prescribed by SBA.

Equal Credit Opportunity Act (15 U.S.C. § 1691 et seq.) – The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit Applicants on the basis of race, color, religion, national origin, sex, marital status or age (provided that the Applicant has the capacity to enter into a binding contract); because all or part of the Applicant's income derives from any public assistance program, or because the Applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal agency that administers compliance with this law concerning this creditor is the Federal Trade Commission, Equal Credit Opportunity, Washington, D.C. 20580.

Executive Order 11738 -- Environmental Protection (38 C.F.R. 25161) – The Executive Order charges the SBA with administering its loan programs in a manner that will result in effective enforcement of the Clean Air Act, the Federal Water Pollution Act and other environmental protection legislation. SBA must, therefore, impose conditions on some loans. By acknowledging receipt of this form and presenting the application, the Associates of all small businesses borrowing \$100,000 or more in direct funds stipulate to the following:

- That any facility used, or to be used, by the subject firm is not cited on the EPA list of Violating Facilities.
- That subject firm will comply with all the requirements of Section 114 of the Clean Air Act (42 U.S.C. 7414) and Section 308 of the Water Act (33 U.S.C. § 1318) relating to inspection, monitoring, entry, reports and information, as well as all other requirements specified in Section 114 and Section 308 of the respective Acts, and all regulations and guidelines issued thereunder.
- That subject firm will notify SBA of the receipt of any communication from the Director of the Environmental Protection Agency indicating that a facility utilized, or to be utilized, by subject firm is under consideration to be listed on the EPA List of Violating Facilities.

Lead-Based Paint Poisoning Prevention Act (42 U.S.C. § 4821 et seq.) – Borrowers using SBA funds for the construction or rehabilitation of a residential structure are prohibited from using lead-based paint (as defined in Federal regulations) on all interior surfaces, whether accessible or not, and exterior surfaces, such as stairs, decks, porches, railings, windows and doors, which are readily accessible to children under 7 years of age. A "residential structure" is any home, apartment, hotel, motel, orphanage, boarding school, dormitory, day care center, extended care facility, college or other school housing, hospital, group practice or community facility and all other residential or institutional structures where persons reside.



Application for Section 504 Loans

Section Three: Statements Required by Law and Executive Order and Certifications

(Signed by the Applicant and Associates)

Executive Order 12549 as amended by E.O. 12689, Debarment and Suspension (2 C.F.R. 180, adopted by reference in 2 C.F.R. Part 2700 (SBA Debarment Regulations)) – By submission of this loan application, you certify and acknowledge that neither you nor any Associates: (a) are presently debarred, suspended, declared ineligible from participating in, or voluntarily excluded from participation in a transaction by any Federal department or agency; (b) are formally proposed for debarment, with a final determination still pending; (c) are presently indicted or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses listed in the SBA Debarment Regulations; (d) have been convicted, or had a civil judgment rendered against you within the preceding three years for any of the offenses listed in the SBA Debarment Regulations, including 2 C.F.R. §180.800(a); or (e) have had one or more public transactions (Federal, State, or local) terminated within the preceding three years for cause or default; or (f) are delinquent on any amounts due and owing to the U.S. Government or its agencies or instrumentalities as of the date of execution of this certification.

You further certify that you have not and will not knowingly enter into any agreement in connection with the goods and/or services purchased with the proceeds of this loan with any individual or entity that has been debarred, suspended, declared ineligible from participating in, or voluntarily excluded from participation in a Transaction. All capitalized terms have the meanings set forth in 2 C.F.R. Part 180.

Acknowledgment

By my signature below, I acknowledge receipt of the Statements Required by Laws and Executive Orders, that I have read them and that I have a copy for my files. My signature represents my agreement to comply with the requirements SBA makes in connection with the approval of my loan request and to comply, whenever applicable, with the limitations and requirements contained in these Statements and to comply, whenever applicable, with the hazard insurance, lead-based paint, civil rights or other limitations and requirements in the Statements Required by Law and Executive Order.

Representations, Certifications, or Authorizations by Applicant and Its Associates

By my signature below, I represent, certify, or authorize the following:

- All SBA loan proceeds will be used only for business related purposes as specified in the loan application.
- To the extent feasible, I will purchase only American-made equipment and products.
- None of the Applicant's direct, indirect, or future revenues, or revenues of any affiliated business(es) are derived from activities that are illegal under federal, state or local law, including activities that support the end-use of marijuana products, including leasing of collateral property to a third party that derives revenue from illegal activities.
- I authorize the SBA to request criminal record information about me from criminal justice agencies for the purpose of determining my eligibility for programs authorized by the Small Business Act, as amended, and Small Business Investment Act, as amended.
- I agree that if the SBA approves this application, I will not for at least two years hire an employee or consult anyone who was employed by the SBA during the one-year period prior to the disbursement of the debenture.
- I certify I have not paid anyone connected with the Federal Government for help getting this financial assistance.



Application for Section 504 Loans

Section Three: Statements Required by Law and Executive Order and Certifications

(Signed by the Applicant and Associates)

- I agree to report to the SBA Office of Inspector General, 409 Third Street S.W., Washington, D.C. 20416, any Federal Government employee who offers assistance in return for any type of compensation to help get this application approved.
 - I understand that I need not pay anybody to deal with SBA.
 - I also understand that a Certified Development Company may charge the Applicant a percentage of the loan proceeds as set forth in SBA regulations as a fee for preparing and processing the loan applications.
 - I agree to pay for or reimburse the CDC or the SBA for the cost of any surveys, title or mortgage examinations, appraisals, etc., performed by non-SBA personnel provided that I have given my consent.
- I understand that regulations issued by the SBA prohibit the making of loans to relocate any operations of a small business that will cause a net reduction of one-third or more in the workforce of the Applicant company or a substantial increase in unemployment in any area of the country.

In the event that proceeds from this loan are used to relocate an EPC/OC (including any affiliate, subsidiary or other business entity under direct, indirect or common control), the undersigned certifies that such relocation will not significantly increase unemployment in the area of the original location.
- If my business exceeds the small business size standard by more than 25%, I agree to use SBA's financial assistance within a labor surplus area.
- No overlapping relationship exists between the Applicant, including its Associates, and the CDC, including its Associates, or any other lender providing financing for the project, that could create an appearance of a conflict of interest as defined in 13 C.F.R. §120.140 or violate 13 C.F.R. § 120.851. No such relationships existed within six months of this application or will be permitted to exist while assistance is outstanding.
- I authorize disclosure of all information submitted in connection with this application to the financial institution agreeing to participate with SBA's guaranteed debenture.
- I waive all claims against SBA and its consultants for any management and technical assistance that may be provided.
- In consideration for assistance from the Small Business Administration, I hereby agree that I will comply with all Federal laws and regulations to the extent that they are applicable to such assistance, including conditions set forth in this application.
- I, my spouse, or any member of my household, or anyone who owns, manages, or directs the business or their spouses or members of their households do not work for the SBA, an SBA small business advisory council, or SCORE, any Federal agency, or the participating lender. If someone does, the name and address of such person and where employed is provided on an attached page.

Certification as to Application Accuracy - Criminal Penalties for False Statements – The undersigned certifies that all information provided to the CDC, and that all information in, and submitted with this application in Section One and Section Two, including all exhibits, is true and complete to the best of his or her knowledge. The undersigned acknowledges that the application and exhibits are submitted to the CDC and to SBA so that the CDC and SBA can decide whether to approve this application. Any future submissions of information to the CDC must be accompanied by a certification as to the accuracy of that information.

The undersigned acknowledges that whoever makes any false statement or report, or willfully overvalues any land property or security for the purpose of influencing in any way the action of the SBA under the Small Business Investment Act, as amended, may be fined up to \$250,000 and/or be put in jail for up to 5 years under 18 U.S.C. §1001, may be fined not more than \$5,000 and/or put in jail for not more than 2 years under 15 U.S.C. § 645, and if false statements are submitted to a Federally insured institution, may be punished by a fine of not more than \$1,000,000 or by imprisonment for up to 30 years, or both, pursuant to 18 U.S.C. § 1014.



Application for Section 504 Loans

Section Three: Statements Required by Law and Executive Order and Certifications

(Signed by the Applicant and Associates)

The undersigned further acknowledges that, in connection with a 504 loan, submission of any false statement to the CDC or SBA or submission of any record to the CDC or SBA omitting material information can result in civil money penalties and additional monetary liability up to three times the amount of damages which the Government sustains because of the false statement under the False Claims Act, 31 U.S.C. § 3729.

The Applicant's authorized representative must sign below. If the project involves an EPC/OC structure, an authorized representative for each co-borrower must sign. Attach additional signature pages if needed.

Legal Name of Applicant Business: _____ EPC or OC: _____

DBA/Trade Name (if applicable): _____

Authorized Signature: _____ Date: _____

Print Name of Authorized Representative: _____ Title: _____

Attested By: _____ (seal, if required)

Legal Name of Business: _____ EPC or OC: _____

DBA/Trade Name (if applicable): _____

Authorized Signature: _____ Date: _____

Print Name of Authorized Representative: _____ Title: _____

Attested By: _____ (seal, if required)

Each Associate of the Applicant must sign below. Each individual should only sign once. Attach additional signature pages if needed.

Signature: _____ Date: _____

Print Name: _____

Signature: _____ Date: _____

Print Name: _____

Signature: _____ Date: _____

Print Name: _____

Signature: _____ Date: _____

Print Name: _____

Signature: _____ Date: _____

Print Name: _____



Business Debt Schedule

Indebtedness: Furnish the following information on all installment debts, contracts, notes and mortgages payable. Do not include accounts payable or accrued liabilities.

Date: _____

Creditor Name/address	Original amount	Original date	Present Balance	Interest rate	Maturity date	Monthly payment	Security	Current or delinquent
Total present balance				Total Monthly Payment				

* Should be the same date as Current Financial Statement

** Total must agree with balance shown on current financial statement



Minnesota Business Finance Corporation

ESTIMATED PROJECTION AND FORECAST FOR TWO YEARS EARNINGS

(Attach Narrative Explaining Basis for the Figures You are Showing Such as Your Market, Sales, Expenses, and Profit.)

	Year_____	% of Sales	Year_____	% of Sales
Gross Receipts:	_____	_____	_____	_____
Cost of Goods Sold:	_____	_____	_____	_____
Opening Inventory	_____	_____	_____	_____
Purchases	_____	_____	_____	_____
Freight on Purchases	_____	_____	_____	_____
Direct Labor	_____	_____	_____	_____
Less Ending Inventory	_____	_____	_____	_____
Total Cost of Goods Sold:	_____	_____	_____	_____
Gross Profit	_____	_____	_____	_____
Expenses:				
Officers' Salaries (if corporation)	_____	_____	_____	_____
Employees' Wages	_____	_____	_____	_____
Accounting & Legal Fees	_____	_____	_____	_____
Advertising	_____	_____	_____	_____
Rent	_____	_____	_____	_____
Depreciation	_____	_____	_____	_____
Supplies	_____	_____	_____	_____
Electricity	_____	_____	_____	_____
Telephone	_____	_____	_____	_____
Interest	_____	_____	_____	_____
Repairs	_____	_____	_____	_____
Taxes	_____	_____	_____	_____
Insurance	_____	_____	_____	_____
Bad Debts	_____	_____	_____	_____
*Miscellaneous (Postage, etc)	_____	_____	_____	_____
Total Expenses	_____	_____	_____	_____
Net Profit:	_____	_____	_____	_____
Less Federal Income Taxes	_____	_____	_____	_____
Less State Income Taxes	_____	_____	_____	_____
Net Profit After Taxes	_____	_____	_____	_____
Less Withdrawals	_____	_____	_____	_____
Proprietorship/Partnership	_____	_____	_____	_____
Net Profit Remaining for Loan Payment	_____	_____	_____	_____

*If sum is large, please itemize.

Signature of Borrower

Title

Date



PERSONAL FINANCIAL STATEMENT

U.S. SMALL BUSINESS ADMINISTRATION

The purpose of this form is to collect information about the Business Applicant and its owners' financial condition. SBA uses the information required by this Form 413 as one of a number of data sources in analyzing the repayment ability and creditworthiness of an applicant for an SBA loan or, with respect to a surety bond, to assist in recovery in the event that the contractor defaults on the contract. SBA also uses the information to assess whether an individual meets the economic disadvantage threshold for the Women-Owned Small Business (WOSB) Program and the 8(a) Business Development (BD) Program. Submission of this information is required as part of your application for assistance. Failure to provide the information would impact the agency's decision on your application.

To complete this form

- 1) Check all that apply.
- 2) Complete the form in its entirety (attached a separate sheet, if necessary)
- 3) Review the applicable certifications and sign (spousal signature, if required)

<input type="checkbox"/> 7(a) loan / 504 loan / Surety Bonds
Complete this form for: (1) each proprietor; (2) general partner; (3) managing member of a limited liability company (LLC); (4) each owner of 20% or more of the equity of the Applicant; and (5) any person providing a guaranty on the loan (including the assets and liabilities of the owner's spouse and any minor children).
Return completed form to: For 7(a) loans: the Lender processing the application for SBA guaranty For 504 loans: the Certified Development Company (CDC) processing the application for SBA guaranty For Surety Bonds: the Surety Company or Agent processing the application for surety bond guarantee

<input type="checkbox"/> Disaster Business Loan Application (Excluding Sole Proprietorships)
Complete this form for: (1) each applicant; (2) each general partner; (3) each managing member of a limited liability company (LLC); (4) each owner of 20% or more of the equity of the Applicant business; and (5) any person providing an unlimited guaranty on the loan.
Return completed form to: Disaster Processing and Disbursement Center at 14925 Kingsport Road, Fort Worth, TX 76155-2243 or FAX to 1-202-481-1505 or disasterloans@sba.gov

<input type="checkbox"/> Women Owned Small Business (WOSB) Federal Contracting Program
This form must be completed by each individual claiming economic disadvantage in connection with the SBA's Women-Owned Small Business (WOSB) Federal Contracting Program. A separate form must be completed by the individual's spouse, unless the individual and the spouse are legally separated. Use attachments if necessary. Each attachment must be identified as a part of this statement and signed. In addition, each individual claiming economic disadvantage must update the form as changes arise, but at least annually, to ensure the information is current, accurate and complete.
SBA's regulations state that to be considered economically disadvantaged for purposes of the WOSB Program, a woman must have an adjusted gross income averaged over the three prior fiscal years of \$350,000 or less; less than \$6 million in the fair market value of all her assets (to include her primary residence and value of the business concern); and less than \$750,000 in personal net worth (excluding equity interest in her personal residence and ownership interest in the business, and funds invested in a retirement account that are unavailable until retirement age). 13 C.F.R. §127.203. The information contained in this form must be submitted and certified through beta.certify.sba.gov

<input type="checkbox"/> 8(a) Business Development Program
8(a) applicants must show that 51% of the firm is owned by one or more individuals determined by the SBA to be socially and economically disadvantaged. The information contained in this form must be submitted by each socially and economically disadvantaged individual using their one time 8(a) eligibility to qualify this firm for 8(a) certification. If married, the spouse must complete a separate SBA Form 413, except when the individual and the spouse are legally separated. If separated, provide copy of separation document.
SBA's regulations state that to be considered economically disadvantaged for purposes of the 8(a) Business Development Program, an individual must have an adjusted gross income averaged over the three prior fiscal years of \$350,000 or less; less than \$6 million in the fair market value of all assets (to include primary residence and value of the business concern); and less than \$750,000 in personal net worth (excluding equity interest in the personal residence and ownership interest in the business, and funds invested in a retirement account that are unavailable until retirement age). 13 C.F.R. §124.104.
Note: Please complete this form with Personal Information not Business Information and divide all jointly owned assets and liabilities, as appropriate with spouse or others. The information contained in this form must be submitted and certified through certify.sba.gov . For additional information go to: http://www.sba.gov/8abd

Name	Business Phone (xxx-xxx-xxxx)
Home Address	Home Phone (xxx-xxx-xxxx)
City, State, & Zip Code	
Business Name of Applicant/Borrower	
Business Address (if different than home address)	
Business Type: ___ Corporation ___ S-Corp. ___ LLC ___ Partnership ___ Sole Proprietor (does not apply to ODA applicant)	
This information is current as of [month/day/year] (within 90 days of submission for 7(a)/504/SBG/ODA/WOSB or within 30 days of submission for 8(a) BD)	
WOSB applicant only, Married ___ Yes ___ No	

ASSETS (Omit Cents)	LIABILITIES (Omit Cents)
Cash on Hand & in banks.....	Accounts Payable.....
Savings Accounts.....	Notes Payable to Banks and Others.....
IRA or Other Retirement Account.....	(Describe in Section 2)
(Describe in Section 5)	Installment Account (Auto).....
Accounts & Notes Receivable.....	Mo. Payments
(Describe in Section 5)	Installment Account (Other).....
Life Insurance – Cash Surrender Value Only.....	Mo. Payments
(Describe in Section 8)	Loan(s) Against Life Insurance.....
Stocks and Bonds.....	Mortgages on Real Estate.....
(Describe in Section 3)	(Describe in Section 4)
Real Estate.....	Unpaid Taxes.....
(Describe in Section 4)	(Describe in Section 6)
Automobiles.....	Other Liabilities.....
(Describe in Section 5, and include	(Describe in Section 7)
Year/Make/Model)	Total Liabilities.....
Other Personal Property.....	Net Worth.....
(Describe in Section 5)	
Other Assets.....	
(Describe in Section 5)	
Total	Total
	Must equal total in assets column.

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 (Alimony or child support payments should not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income)

Section 6. Unpaid Taxes. (Describe in detail as to 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 the SBA/Lender/Surety Company to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness.

CERTIFICATION: (to be completed by each person submitting the information requested on this form and the spouse of any 20% or more owner when spousal assets are included)

By signing this form, I certify under penalty of criminal prosecution that all information on this form and any additional supporting information submitted with this form is true and complete to the best of my knowledge. I understand that SBA or its participating Lenders or Certified Development Companies or Surety Companies will rely on this information when making decisions regarding an application for a loan, surety bond, or participation in the WOSB or 8(a) BD program. I further certify that I have read the attached statements required by law and executive order.-

Signature _____ Date _____

Print Name _____ Social Security No. _____

Signature _____ Date _____

Print Name _____ Social Security No. _____

NOTICE TO 7(a) LOAN, 504 LOAN AND SURETY BOND APPLICANTS: CRIMINAL PENALTIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:

Knowingly making a false statement on this form is a violation of Federal law and could result in criminal prosecution, significant civil penalties, and a denial of your loan or surety bond application. A false statement is punishable under 18 U.S.C. §§ 1001 and 3571 by imprisonment of not more than five years and/or a fine of up to \$250,000; under 15 U.S.C. § 645 by imprisonment of not more than two years and/or a fine of not more than \$5,000; and, if submitted to a Federally-insured institution, a false statement is punishable under 18 U.S.C. § 1014 by imprisonment of not more than thirty years and/or a fine of not more than \$1,000,000. Additionally, false statements can lead to treble damages and civil penalties under the False Claims Act, 31 U.S.C. § 3729, and other administrative remedies including suspension and debarment.

NOTICE TO DISASTER BUSINESS LOAN APPLICANTS: CRIMINAL PENALTIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:

Whoever wrongfully misapplies the proceeds of an SBA disaster loan shall be civilly liable to the Administrator in an amount equal to one-and-one half times the original principal amount of the loan under 15 U.S.C. § 636(b). In addition, any false statement or misrepresentation to SBA may result in criminal, civil or administrative sanctions including, but not limited to: 1) fines and imprisonment, or both, under 15 U.S.C. § 645, 18 U.S.C. § 1001, 18 U.S.C. § 1014, 18 U.S.C. § 1040, 18 U.S.C. § 3571, and any other applicable laws; 2) treble damages and civil penalties under the False Claims Act, 31 U.S.C. § 3729; 3) double damages and civil penalties under the Program Fraud Civil Remedies Act, 31 U.S.C. § 3802; and 4) suspension and/or debarment from all Federal procurement and non-procurement transactions. Statutory fines may increase if amended by the Federal Civil Penalties Inflation Adjustment Act Improvements Act of 2015.

NOTICE TO APPLICANTS OR PARTICIPANTS IN THE WOSB FEDERAL CONTRACTING PROGRAM: CRIMINAL PENALTIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:

Any person who misrepresents a business concern's status as a WOSB or EDWOSB, or makes any other false statement in order to influence the WOSB Program eligibility determination or other review process in any way (e.g., protest), shall be: (1) subject to fines and imprisonment of up to 5 years, or both, as stated in Title 18 U.S.C. § 1001; (2) subject to fines of up to \$500,000 or imprisonment of up to 10 years, or both, as stated in Title 15 U.S.C. § 645; (3) subject to civil and administrative remedies, including suspension and debarment; and (4) ineligible for participation in programs conducted under the authority of the Small Business Act.

NOTICE TO APPLICANTS OR PARTICIPANTS IN THE 8(a) BUSINESS DEVELOPMENT PROGRAM: CRIMINAL PENALTIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:

Any person who misrepresents a business concern's status as an 8(a) BD Program participant or SDB concern, or makes any other false statement in order to influence the 8(a) certification or other review process in any way (e.g., annual review, eligibility review), shall be: (1) subject to fines and imprisonment of up to 5 years, or both, as stated in Title 18 U.S.C. § 1001; (2) subject to fines of up to \$500,000 or imprisonment of up to 10 years, or both, as stated in Title 15 U.S.C. § 645; (3) subject to treble damages and civil penalties under the False Claims Act, 31 U.S.C. § 3729; (4) subject to administrative remedies, including suspension and debarment; and (5) ineligible for participation in programs conducted under the authority of the Small Business Act.

PLEASE NOTE: According to the Paperwork Reduction Act, you are not required to respond to this request for information unless it displays a valid OMB Control Number. The estimated average burden hours for the completion of this form is 1.5 hour per response. If you have questions or comments concerning this estimate or any other aspect of this information collection, please contact: Director, Records Management Division, Small Business Administration, 409 Third Street SW, Washington, D.C. 20416, and SBA Desk Officer, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, D.C. 20503. PLEASE DO NOT SEND COMPLETED FORMS TO OMB.

PLEASE READ, DETACH, AND RETAIN FOR YOUR RECORDS

Privacy Act (5 U.S.C. 552a) and Debt Collection Improvement Act (31 U.S.C. 7701)

Authorities and Purpose for Collecting Information: SBA is collecting the information on this form, including social security numbers and other personal information, to make a character and credit or other eligibility decision in connection with you or your company's application for SBA assistance. SBA may also use social security numbers for the purpose of collecting and reporting on any delinquent fees or other amounts owed SBA, where applicable.

For purposes of SBA's financial assistance programs, 31 U.S.C. 7701 requires loan applicants and guarantors, or any indemnitor of a surety bond to provide their social security numbers, or other taxpayer identification numbers. Failure to provide this information would affect your ability to obtain an SBA loan or bond. For other individuals signing this form, the submission of the social security number is voluntary and failure to provide your social security number may not affect any right, benefit or privilege to which you are entitled. However, your social security number or other taxpayer identification number helps SBA to distinguish you from other individuals with the same or similar name or other personal identifier. This use is permitted under Executive Order 9397. Personal information collected is protected to the extent permitted by law, including the Freedom Information Act, 5 U.S.C. 552, and the Privacy Act 5 U.S.C. 552. Such information is maintained pursuant to SBA's Privacy Act System of Records at

<https://www.sba.gov/sites/default/files/2020-01/sba-sorns.pdf>.

Right to Financial Privacy Act of 1978 (12 U.S.C. 3401) -- This is notice to you as required by the Right to Financial Privacy Act of 1978, of SBA's access rights to financial records held by financial institutions that are or have been doing business with you or your business, including any financial institutions participating in a loan or loan guaranty. The law provides that SBA shall have a right of access to your financial records in connection with its consideration or administration of assistance to you in the form of a Government guaranteed loan or guaranteed bond. SBA is required to provide a certificate of its compliance with the Act to a financial institution in connection with its first request for access to your financial records, after which no further certification is required for subsequent accesses. The law also provides that SBA's access rights continue for the term of any approved loan guaranty agreement or any approved bond agreement. No further notice to you of SBA's access rights is required during the term of any such agreement. The law also authorizes SBA to transfer to another Government authority any financial records included in an application for a loan or bond guarantee, or concerning an approved loan or loan guarantee or bond guarantee, as necessary to process, service or foreclose on a loan guaranty or collect on a defaulted loan guaranty, or to process or service the bond guarantee. No other transfer of your financial records to another Government authority will be permitted by SBA except as required or permitted by law.

Freedom of Information Act (5 U.S.C. 552)

This law provides, with some exceptions, that SBA must supply information contained in agency files and records to a person requesting it. Information about approved loans that will be automatically released includes, among other things, statistics on our loan programs (individual borrowers are not identified in the statistics), and other information such as the names of the borrowers (and their officers, directors, stockholders or partners), the collateral pledged to secure the loan, the amount of the loan, its purpose in general terms, and the maturity. With respect to SBA's bond guarantee program, SBA will release, among other things, statistics on the Surety Bond Guarantee (SBG) programs and other information such as the names of small businesses (and their officers, directors, stockholders or partners) and the amount of the bond guarantees. Proprietary data on a borrower would not routinely be made available to third parties. All requests under this Act are to be addressed to the nearest SBA office and be identified as a Freedom of Information request.



SAMPLE OUTLINE: COMPREHENSIVE BUSINESS PLAN

- I. TABLE OF CONTENTS** (Show the page number for each subject at right side of sheet)
- II. INTRODUCTION** Why business is being formed; growth potential; anticipated profit and return on investment; industry trends; pitfalls; research done; other?
- III. BUSINESS DESCRIPTION**
 - A. Name, location & reason for selecting each
 - B. Business hours to be maintained; zoning' licensing; parking facilities
 - C. Products and/or services
 - 1. Describe product line; features' uniqueness or superiority, benefits
 - 2. Price and quality comparisons
 - 3. Materials; suppliers; production methods, alternative options
 - 4. Proprietary position (patents, copyrights, legal considerations)
 - D. The Competition
 - 1. Name and address of major competitors
 - 2. Minor competitors or indirect competition to be considered
 - 3. Competitors' strengths, weaknesses, pricing & marketing methods
 - 4. Reasons customers are expected to do business with us
(Better prices or quality? Better selections? More reliable? Faster?)
 - E. The Market
 - 1. Identify target markets (age, sex, location, income, ethnic background)
 - 2. Determine market opportunities; size of market, expected share
 - 3. Customer needs and wants. (How are these ascertained?)
 - 4. Marketing and sales strategies to be used.
 - 5. Pricing, promotion and distribution plans (sales channels, credit? FOB?)
 - 6. Business image desired; method of attaining high visibility
- IV. THE MANAGEMENT: BUSINESS ORGANIZATION**
 - A. Form of business organization; reasons for selection
 - B. The officers: Their experience and salaries (resume of key personnel)
 - C. The employees: Their job descriptions, hourly wage, work schedules
 - D. Employee policies: Benefits, promotional opportunities, training plan
 - E. The management and operations plan
 - 1. Long and short term goals
 - 2. Timetable and deadlines for accomplishing goals
 - 3. Anticipated expansion and growth; capital improvements
 - 4. Control methods to be used; lead times necessary
- V. FINANCIAL DATE**
 - A. Capital investment; equity; fixed assets/indebtedness; repayment schedule
 - B. Records to be maintained; financial statements to be made (how often?)
 - C. Accounting and inventory control systems to be used (accountant's name)
 - D. Cash flow and income projections for several years (list assumptions only)
 - E. Future financial needs; capital expenditures; budgets; contingencies
 - F. Breakeven sales point
 - G. Key business ratios to be used
 - H. Insurance coverage; Sales & Use Tax procedures; Unemployment Tax... other tax?
 - I. Personal and bank references
 - J. Current balance sheet
- VI. APPENDICES**
 - Attach back-up data, statistics, trade journal articles, etc.



Personal Resume Form
TO BE COMPLETED BY EACH PRINCIPAL INVOLVED IN THE LOAN

Name _____
FIRST MIDDLE MAIDEN LAST

Date of birth _____ Place of birth _____ Race _____ Social Security No _____

U.S. Citizen – If not, please provide alien registration number _____

Email _____

Home address _____ City _____ State _____ Zip _____

From _____ To _____ Home phone _____ Business phone _____

Immediate past address _____ City _____ State _____ Zip _____

From _____ To _____

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 at discharge _____ Honorable? _____

Job Description _____

Work Experience

List chronologically, beginning with present employment

Name of company _____ % of business owned _____

Full address _____ City _____ State _____ Zip _____

From _____ To _____ Title _____ Duties _____

Name of company _____ % of business owned _____

Full address _____ City _____ State _____ Zip _____

From _____ To _____ Title _____ Duties _____



Name of company _____ % of business owned _____

Full address _____ City _____ State _____ Zip _____

From _____ To _____ Title _____ Duties _____

Education (College or Technical Training)

Name and Location	Dates Attended	Major	Degree or Certificate
-------------------	----------------	-------	-----------------------

1. _____

Comments: _____

2. _____

Comments: _____

3. _____

Comments: _____

4. _____

Comments: _____

SBA Written Addendum: Statement of Personal History Addendum

Lender Name: Minnesota Business Finance Corporation Phone: 320-258-5000
Address: 616 Roosevelt Rd, Suite 200
City, State, Zip St. Cloud, MN 56301

Principal Name: _____ Phone: _____
Address: _____
City, State, Zip _____

List Charge(s)

1) Charge: _____ ☐ Felony ☐ Misdemeanor

Month/Day/Year of Arrest (if actual day unknown, then Month/Year): _____

City, County, State of Arrest: _____

Disposition of Charge (List Specific Details)

Sentence: _____

Fine: _____

Other: _____

Date Disposition Completed: _____

Explanation: _____

[illegible]

Signature: _____ Date: _____

Written Statement Requirements

1. **Written Statement: (Defined)** is a brief understanding disclosing the facts surrounding the incident(s) which is needed. An explanation regarding the circumstances surrounding the incident(s) is required to be disclosed.
2. The applicant is **required** to disclose the below listed items in a written statement relating to his/her offense(s)
 - a. **Exact date of each offense/ At lease the month and year of the offense~ at minimum** (Just Writing: 30 yrs ago, 2007, In 20007, Summer of 2007, Approx2007 or I don't know is UNACCEPTABLE)
 - b. **Location of each offense:** city, state, and county
 - c. **Name of each offense:** (i.e. Gambling, Robbery, Assault etc.)
 - d. **Level of the original arresting charge (and) the original name of the charge received at the time of the arrest** (i.e. FELONY/MISDEMEANOR)
 - e. **Court Decision for each offense:** guilty/ not guilty- *the guilty plea is the result of the final court decision which must be disclosed in addition to the level of the original arresting charge*)
 - f. **Sentencing for each offense:** probation, conditions
 - g. **Consequences of each charge:** jail time / Fine
 - h. **Disposition of the charge(s)** including but not limited to: fines, class or work shop, jail time served, terms of probation, any court conditions
3. All written statements, explanations, affidavits, addendums, affirmative responses, positive responses, and any other documents disclosing any information regarding the applicant's offense(s) **require** both the applicant's current signature and date prior to submission
4. Please have the applicant provide a new written statement disclosing all of the required information above that is in his/her own words with his/her signature and date

Please see SOP 5010 5 (F) pages 258--263 for further guidance

IVES Request for Transcript of Tax Return

▶ Do not sign this form unless all applicable lines have been completed.

▶ Request may be rejected if the form is incomplete or illegible.

▶ For more information about Form 4506-C, visit www.irs.gov and search IVES.**1a.** Name shown on tax return (if a joint return, enter the name shown first)**1b.** First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)**2a.** If a joint return, enter spouse's name shown on tax return**2b.** Second social security number or individual taxpayer identification number if joint tax return**3.** Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions)**4.** Previous address shown on the last return filed if different from line 3 (see instructions)**5a.** IVES participant name, address, and SOR mailbox ID

Advanced Data Participant #0000302919/Mailbox: ADVDATAITV 32065 Castle Court, Suite 300, Evergreen, CO 80439 800-537-0458

5b. Customer file number (if applicable) (see instructions)**Caution:** This tax transcript is being sent to the third party entered on Line 5a. Ensure that lines 5 through 8 are completed before signing. (see instructions)**6. Transcript requested.** Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request

a. Return Transcript, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120-A, Form 1120-H, Form 1120-L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years ☐

b. Account Transcript, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns ☐

c. Record of Account, which provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. Available for current year and 3 prior tax years ☐

7. Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript. The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2016, filed in 2017, will likely not be available from the IRS until 2018. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213 ☐

Caution: If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.**8.** Year or period requested. Enter the ending date of the tax year or period using the mm/dd/yyyy format (see instructions)

/ / / / / / / /

Caution: Do not sign this form unless all applicable lines have been completed.

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, at least one spouse must sign. If signed by a corporate officer, 1 percent or more shareholder, partner, managing member, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-C on behalf of the taxpayer. **Note:** This form must be received by IRS within 120 days of the signature date.

☐ **Signatory attests that he/she has read the attestation clause and upon so reading declares that he/she has the authority to sign the Form 4506-C. See instructions.**

Sign Here	Signature (see instructions)	Date	Phone number of taxpayer on line 1a or 2a
	Print/Type name		
	Title (if line 1a above is a corporation, partnership, estate, or trust)		
	Spouse's signature	Date	
	Print/Type name		

Instructions for Form 4506-C, IVES Request for Transcript of Tax Return

Section references are to the Internal Revenue Code unless otherwise noted.

Future Developments

For the latest information about Form 4506-C and its instructions, go to www.irs.gov and search IVES. Information about any recent developments affecting Form 4506-C (such as legislation enacted after we released it) will be posted on that page.

What's New. Form 4506-C was created to be utilized by authorized IVES participants to order tax transcripts with the consent of the taxpayer.

General Instructions

Caution: Do not sign this form unless all applicable lines have been completed.

Designated Recipient Notification. Internal Revenue Code, Section 6103(c), limits disclosure and use of return information received pursuant to the taxpayer's consent and holds the recipient subject to penalties for any unauthorized access, other use, or redisclosure without the taxpayer's express permission or request.

Taxpayer Notification. Internal Revenue Code, Section 6103(c), limits disclosure and use of return information provided pursuant to your consent and holds the recipient subject to penalties, brought by private right of action, for any unauthorized access, other use, or redisclosure without your express permission or request.

Purpose of form. Use Form 4506-C to request tax return information through an authorized IVES participant. You will designate an IVES participant to receive the information on line 5a.

Note: If you are unsure of which type of transcript you need, check with the party requesting your tax information.

Where to file. The IVES participant will fax Form 4506-C with the approved IVES cover sheet to their assigned Service Center.

Chart for ordering transcripts

If your assigned Service Center is:	Fax the requests with the approved coversheet to:
Austin Submission Processing Center	Austin IVES Team 844-249-6238
Fresno Submission Processing Center	Fresno IVES Team 844-249-6239
Kansas City Submission Processing Center	Kansas City IVES Team 844-249-8128
Ogden Submission Processing Center	Ogden IVES Team 844-249-8129

Specific Instructions

Line 1b. Enter the social security number (SSN) or individual taxpayer identification number (ITIN) for the individual listed on line 1a, or enter the employer identification number (EIN) for the business listed on line 1a.

Line 3. Enter your current address. If you use a P.O. box, include it on this line.

Line 4. Enter the address shown on the last return filed if different from the address entered on line 3.

Note: If the addresses on lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address, or Form 8822-B, Change of Address or Responsible Party — Business, with Form 4506-C.

Line 5b. Enter up to 10 numeric characters to create a unique customer file number that will appear on the transcript. The customer file number cannot contain an SSN, ITIN or EIN. Completion of this line is not required.

Note. If you use an SSN, name or combination of both, we will not input the information and the customer file number will reflect a generic entry of "9999999999" on the transcript.

Line 8. Enter the end date of the tax year or period requested in mm/dd/yyyy format. This may be a calendar year, fiscal year or quarter. Enter each quarter requested for quarterly returns. Example: Enter 12/31/2018 for a calendar year 2018 Form 1040 transcript.

Signature and date. Form 4506-C must be signed and dated by the taxpayer listed on line 1a or 2a. The IRS must receive Form 4506-C within 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines, including lines 5a through 8, are completed before signing.



You must check the box in the signature area to acknowledge you have the authority to sign and request the information. The form will not be processed if unchecked.

Individuals. Transcripts listed on line 6 may be furnished to either spouse if jointly filed. Only one signature is required. Sign Form 4506-C exactly as your name appeared on the original return. If you changed your name, also sign your current name.

Corporations. Generally, Form 4506-C can be signed by:

(1) an officer having legal authority to bind the corporation, (2) any person designated by the board of directors or other governing body, or (3) any officer or employee on written request by any principal officer and attested to by the secretary or other officer. A bona fide shareholder of record owning 1 percent or more of the outstanding stock of the corporation may submit a Form 4506-C but must provide documentation to support the requester's right to receive the information.

Partnerships. Generally, Form 4506-C can be signed by any person who was a member of the partnership during any part of the tax period requested on line 8.

All others. See section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpayer.

Note: If you are Heir at law, Next of kin, or Beneficiary you must be able to establish a material interest in the estate or trust.

Documentation. For entities other than individuals, you must attach the authorization document. For example, this could be the letter from the principal officer authorizing an employee of the corporation or the letters testamentary authorizing an individual to act for an estate.

Signature by a representative. A representative can sign Form 4506-C for a taxpayer only if the taxpayer has specifically delegated this authority to the representative on Form 2848, line 5. The representative must attach Form 2848 showing the delegation to sign Form 4506-C.

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to establish your right to gain access to the requested tax information under the Internal Revenue Code. We need this information to properly identify the tax information and respond to your request. You are not required to request any transcript; if you do request a transcript, sections 6103 and 6109 and their regulations require you to provide this information, including your SSN or EIN. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506-C will vary depending on individual circumstances. The estimated average time is:

Learning about the law or the form . . . 10 min.
Preparing the form 12 min.
Copying, assembling, and sending the form to the IRS 20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506-C simpler, we would be happy to hear from you. You can write to:

Internal Revenue Service
Tax Forms and Publications Division
1111 Constitution Ave. NW, IR-6526
Washington, DC 20224

Do not send the form to this address. Instead, see Where to file on this page.

TAXPAYER CERTIFICATION AND CONSENT TO USE OF IRS TAX TRANSCRIPTS

The undersigned taxpayer is providing an IRS Form 4506-C, Request for Transcript of Tax Return, to Minnesota Business Finance Corporation (CDC) for CDC to obtain taxpayer's tax return transcripts from the Internal Revenue Service (IRS). The undersigned taxpayer consents to CDC, the U.S. Small Business Administration (SBA), and other parties participating in taxpayer's SBA 504 Loan Project ("Project Participants") obtaining, using and sharing tax return information for the purpose of compliance with 504 Loan Program Requirements, including (1) processing the Loan application; (2) verifying that taxpayer filed tax returns; (3) verifying taxpayer's tax return information against income tax returns, financial statements and other financial information provided in the 504 Loan application; (4) confirming taxpayer's income; (5) assessing the taxpayer's or Loan applicant's creditworthiness; (6) closing and servicing the 504 Loan; (7) for SBA lender oversight activities, debenture and/or loan purchase reviews, Complete File Reviews and other SBA reviews; and/or (8) as otherwise permitted by applicable laws, including Federal and state privacy and data security laws.

For purposes of this document, (a) CDC includes CDC's directors, officers, employees, contractors, interns, agents, and legal counsel, and any of the aforesaid parties' affiliates, successors and assigns; (b) SBA includes SBA employees, contractors, interns, agents, and volunteers, and any Federal, State or local agency, division or organization which investigates, prosecutes, or enforces violations of statutes, rules, regulations, or orders, when SBA determines that disclosure will promote integrity of the 504 Loan Program or protect the public interest, and any of aforesaid parties' affiliates, successors and assigns; and (c) Project Participants includes any actual or potential participating Interim or Third Party Lenders or lenders of subordinate financing or the Borrower Contribution in connection with the 504 Loan Project, any other party who acquires any beneficial or other interest in, or is a guarantor or other obligor for, the 504 Loan, the Interim Loan, the Third Party Loan, any subordinate financing or any Borrower Contribution loan, or any refinancing of or substitution of those loans, any mortgage broker or insurer, any servicers or service providers for these parties, and any of aforementioned parties' directors, officers, managers, owners, employees, contractors, interns, agents and legal counsel and any of the aforesaid parties' affiliates, successors and assigns.

The undersigned taxpayer hereby certifies that the tax information provided to CDC is identical to the tax information that taxpayer has submitted to the IRS. If there are any significant differences between the tax data that CDC obtains from the IRS and the financial data or tax returns submitted with the Loan application, the undersigned taxpayer agrees to resolve such differences to the satisfaction of CDC and SBA's Loan Processing Center. Any failure to resolve such differences may result in cancellation of the Loan and CDC notifying SBA's Office of Financial Assistance and Office of Inspector General.

This document may be signed manually or digitally with a digital or electronic signature. CDC shall be entitled, in its sole discretion, to image or make copies of this document, and may destroy or archive the paper original. The undersigned taxpayer (a) waives any right to insist or require that CDC or SBA produce the paper original; (b) agrees that such images shall be accorded the same force and effect as the paper original; (c) agrees that CDC and SBA are entitled to use such images in lieu of the destroyed or archived original for any purpose, including as admissible evidence in any proceedings, and (d) agrees that any executed facsimile (faxed), scanned, or other imaged copy of this document shall be deemed to be of the same force and effect as the original manually or digitally signed document.

The undersigned taxpayer certifies that all tax information provided to CDC, including without limitation, all information regarding the undersigned taxpayer's financial condition, is true and complete to the best of its knowledge and that the undersigned taxpayer has not withheld any material information. The undersigned taxpayer acknowledges that for the purpose of this transaction, CDC is acting on behalf of SBA, except that SBA accepts no liability or responsibility for any wrongful act or omission by CDC. The undersigned taxpayer further acknowledges that any false statements to CDC can be considered a false statement to the federal government under 18 U.S.C. § 1001, and may subject the undersigned taxpayer to criminal penalties and that CDC and SBA are relying upon the information submitted by the undersigned taxpayer.

Taxpayer Name shown on tax return: _____

Signature: _____ Date: _____

Name: _____

Title (if applicable): _____



Environmental Questionnaire

CDC (Lender) Name: Minnesota Business Finance Corporation (MBFC)

Applicant Name _____

OC Name(s) (If applicant is an EPC) _____

SBA 504 Loan Number (If assigned) _____

SBA 504 Loan Name (If assigned) _____

PART I - COLLATERAL PROPERTY

Address: _____

Current Owner: _____

Current Operator of site (if different from current Owner): _____

1. Past and Present Uses of Collateral Property:

a. Past use(s):

- (1) Did the past use(s) of the property involve an environmentally sensitive industry? *(If yes, then list NAICS code(s) from SOP 50-10(5) Appendix 4)*

b. Present use:

- (1) Does the present use of the property involve an environmentally sensitive industry? *(If yes, then list NAICS code(s) from SOP 50-10(5) Appendix 4)*

2. Hazardous Substances at Collateral Property:

a. If the property is being used for the storage, generation, treatment, emission or disposal of hazardous substances, then list what hazardous substance(s) *(otherwise, mark N/A)*:

- (1) If yes, are all permits current for the storage, generation, treatment, emission or disposal of hazardous substances at the property? *(if permits are not current, please explain)*

b. List any other hazardous substances identified, either in the past or present, as being at, on, in, into, under, above, from or about the property *(if none, mark N/A)*:

Environmental Questionnaire

3. Evidence of Contamination at Collateral Property: Is there any evidence of contamination at the property? *(If yes, please explain)*
4. Potential Sources of Contamination at Collateral Property: Are there potential sources of contamination¹ at the property? *(If yes, please explain)*
5. Past Evidence of Contamination at Collateral Property: Does the borrower, seller or CDC know of any past evidence of contamination or sources of contamination at the property? *(If yes, please explain)*
6. Lawsuits or Administrative Proceedings for Release of Hazardous Substances at Collateral Property: Does the borrower, seller or CDC know of any past, threatened or pending lawsuits or administrative proceedings concerning a release or threatened release of hazardous substances at the property? *(If yes, please explain)*
7. Regulatory Actions by Governmental Entity Involving Collateral Property: Are there, or have there been, any regulatory actions by any governmental entity for environmental conditions at the property? *(If yes, please explain)*
8. Previous Environmental Risk Studies of Collateral Property: Are there any previously performed environmental risk studies pertaining to the property? *(If yes –please attach copies)*

¹ Sources of contamination may include, but are not limited to, the following: (1) damaged or discarded automotive or industrial batteries; (2) pesticides, paints or other chemicals stored in individual containers greater than 5 gallons in volume or 50 gallons in the aggregate; (3) chemicals in industrial drums or sacks; (4) pits, ponds or lagoons used for waste disposal or storage; (5) fill dirt from a contaminated or unknown source; (6) underground or aboveground storage tanks; (7) vent pipes, fill pipes or access ways indicating a fill pipe protruding from the ground; (8) flooring drains or walls within a facility that are stained by substances other than water and/or are emitting noxious odors; (9) clarifiers, pits or sumps; (10) dry wells.



Environmental Questionnaire

9. Lead-Based Paint, Asbestos or PCBs at Collateral Property: Is lead-based paint, asbestos or polychlorinated biphenyls (PCBs) present at the property? *(If yes, please explain)*

Owner's remarks:

The undersigned owner(s) and/or operator(s) acknowledge(s) and agree(s) that intentionally falsifying or concealing any material fact with regard to the subject matter of this Environmental Questionnaire may, in addition to other penalties, result in prosecution under applicable law including 18 U.S.C. section 1001.

Owner's signature:

Date:

Operator of site's remarks:

Operator of site's signature:

Date:

MBFC's (Lender) remarks:

I affirm that I have made at least one site visit to the property.

MBFC's (Lender) signature:

Date:

Environmental Questionnaire

PART II – ADJOINING PROPERTY(IES)

The following must be completed for each adjoining property the border of which is shared in part or in whole with the Collateral Property, or that would be shared in part or in whole with the Collateral Property but for a street, road, or other public thoroughfare separating the properties. If needed, make additional copies of pages 4-5 for each adjoining property.

Address: _____

Location in relation to Collateral Property: _____

Current Owner: _____

Current Operator of site (if different from current Owner): _____

1. Past and Present Uses of Adjoining Property:

a. Past use(s):

(1) Did the past use(s) of the property involve an environmentally sensitive industry? *(If yes, then list NAICS code(s) from SOP 50-10(5) Appendix 4)*

b. Present use:

(1) Does the present use of the property involve an environmentally sensitive industry? *(If yes, then list NAICS code(s) from SOP 50-10(5) Appendix 4)*

2. Hazardous Substances at Adjoining Property:

a. If the property is being used for the storage, generation, treatment, emission or disposal of hazardous substances, then list what hazardous substance(s) *(otherwise, mark N/A)*:

(2) If yes, are all permits current for the storage, generation, treatment, emission or disposal of hazardous substances at the property? *(if permits are not current, please explain)*

b. List any other hazardous substances identified, either in the past or present, as being at, on, in, into, under, above, from or about the property *(if none, mark N/A)*:

Environmental Questionnaire

3. Evidence of Contamination at Adjoining Property: Is there any evidence of contamination at the property? *(If yes, please explain)*
4. Potential Sources of Contamination at Adjoining Property: Are there potential sources of contamination¹ at the property? *(If yes, please explain)*
5. Past Evidence of Contamination at Adjoining Property: Does the borrower, seller or CDC know of any past evidence of contamination or sources of contamination at the property? *(If yes, please explain)*
6. Lawsuits or Administrative Proceedings for Release of Hazardous Substances at Adjoining Property: Does the borrower, seller or CDC know of any past, threatened or pending lawsuits or administrative proceedings concerning a release or threatened release of hazardous substances at the property? *(If yes, please explain)*
7. Regulatory Actions by Governmental Entity Involving Adjoining Property: Are there, or have there been, any regulatory actions by any governmental entity for environmental conditions at the property? *(If yes, please explain)*

¹ Sources of contamination may include, but are not limited to, the following: (1) damaged or discarded automotive or industrial batteries; (2) pesticides, paints or other chemicals stored in individual containers greater than 5 gallons in volume or 50 gallons in the aggregate; (3) chemicals in industrial drums or sacks; (4) pits, ponds or lagoons used for waste disposal or storage; (5) fill dirt from a contaminated or unknown source; (6) underground or aboveground storage tanks; (7) vent pipes, fill pipes or access ways indicating a fill pipe protruding from the ground; (8) flooring drains or walls within a facility that are stained by substances other than water and/or are emitting noxious odors; (9) clarifiers, pits or sumps; (10) dry wells.

Environmental Questionnaire

PART II – ADJOINING PROPERTY(IES)

The following must be completed for each adjoining property the border of which is shared in part or in whole with the Collateral Property, or that would be shared in part or in whole with the Collateral Property but for a street, road, or other public thoroughfare separating the properties. If needed, make additional copies of pages 4-5 for each adjoining property.

Address: _____

Location in relation to Collateral Property: _____

Current Owner: _____

Current Operator of site (if different from current Owner): _____

1. Past and Present Uses of Adjoining Property:

a. Past use(s):

(1) Did the past use(s) of the property involve an environmentally sensitive industry? *(If yes, then list NAICS code(s) from SOP 50-10(5) Appendix 4)*

b. Present use:

(1) Does the present use of the property involve an environmentally sensitive industry? *(If yes, then list NAICS code(s) from SOP 50-10(5) Appendix 4)*

2. Hazardous Substances at Adjoining Property:

a. If the property is being used for the storage, generation, treatment, emission or disposal of hazardous substances, then list what hazardous substance(s) *(otherwise, mark N/A)*:

(3) If yes, are all permits current for the storage, generation, treatment, emission or disposal of hazardous substances at the property? *(if permits are not current, please explain)*

b. List any other hazardous substances identified, either in the past or present, as being at, on, in, into, under, above, from or about the property *(if none, mark N/A)*:

Environmental Questionnaire

3. Evidence of Contamination at Adjoining Property: Is there any evidence of contamination at the property? *(If yes, please explain)*
4. Potential Sources of Contamination at Adjoining Property: Are there potential sources of contamination¹ at the property? *(If yes, please explain)*
5. Past Evidence of Contamination at Adjoining Property: Does the borrower, seller or CDC know of any past evidence of contamination or sources of contamination at the property? *(If yes, please explain)*
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Minnesota Business Finance Corporation

Notice

IMPORTANT INFORMATION ABOUT IDENTIFICATION PROCEDURES FOR PROCESSING A 504 LOAN

To help the government fight the funding of terrorism and money laundering activities, Federal law requires Certified Development Companies to obtain, verify, and record information that identifies each person who applies for a 504 loan.

What this means for you:

When you apply for a 504 loan, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

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I have read and have received a copy of the notice regarding the Identification Procedures for processing a 504 loan.

(Name – Please print)

(Date)

(Signature)

Minnesota Business Finance Corporation
Customer Identification Program
Intake Identity Form

This Customer Identification Program Intake Identity Form must be used whenever Customer Identification Program identity information about a Borrower, EPC, OC, Co-Borrower, or its managing or controlling person or entity is not available through an SBA Form 912 (Statement of Personal History) or SBA Form 1244, Part B (Application for Section 504 Loan). Example: where a limited liability company EPC is in the process of being formed during the 504 Loan application process.

Name of Applicant / Borrower

Date of Birth for an Individual

Address*

** For an individual, the address must be his/her residential or business street address or, if the individual has no residential or business street address, then his/her Army Post Office (APO) or Fleet Post Office (FPO) box number, or the residential or business street address of the individual's next of kin or other contact individual.*

** For an entity, this must be the entity's principal place of business, local office, or other physical location.*

Identification Number #

For a U.S. person (meaning a U.S. citizen or an entity organized under the laws of a state, the District of Columbia or the United States), this must be the person's taxpayer identification number.

For a non-U.S. person, this must be one or more of the following:

- 1. A taxpayer identification number*
- 2. A passport number and country of issuance*
- 3. An alien identification card number*
- 4. The number and country of issuance of any other government-issued document evidencing nationality or residence and bearing a photograph or similar safeguard*

If the customer has applied for, but not yet received a taxpayer identification number (TIN) at the time of 504 Loan application, then the CDC loan processor or loan closer must confirm, before submitting the 504 Loan to SBA for funding, that the TIN application has been filed and the TIN actually issued. Please remind the customer to provide the taxpayer identification number as soon as it is received.

CAUTION: Knowingly making a false statement on this form is a violation of Federal law and could result in criminal prosecution, significant civil penalties, and a denial of your loan, surety bond, or other program participation. A false statement is punishable under 18 USC 1001 by imprisonment of not more than five years and/or a fine of not more than \$10,000; under 15 USC 645 by imprisonment of not more than two years and/or a fine of not more than \$5,000; and, if submitted to a Federally insured institution, under 18 USC 1014 by imprisonment of not more than thirty years and/or a fine of not more than \$1,000,000.

Signature: _____ Date: _____

Title: _____