



*Credit Union use only*  
 Member Number \_\_\_\_\_  
 Biz Account Open Date \_\_\_\_\_  
 Loan Officer \_\_\_\_\_

# Small Business Loan Application

Application Date \_\_\_\_\_

## A. BUSINESS INFORMATION

Business Name \_\_\_\_\_ Tax I.D. \_\_\_\_\_

Mailing Address \_\_\_\_\_

Physical Address  same as above \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Email \_\_\_\_\_ Website \_\_\_\_\_

**Business Structure**  
 Sole Proprietorship       For-Profit Corporation       Mutual Corporation  
 Partnership       Non-Profit Corporation       Other \_\_\_\_\_  
 Limited Liability Corporation       Cooperative Corporation

Please briefly describe the nature of your business including products sold / services provided.

North American Industry Classification System (NAICS) # \_\_\_\_\_ DUNS # \_\_\_\_\_

Is the business a start-up?      Date Established \_\_\_\_\_      Years at Present Location \_\_\_\_\_  
 Yes  No       Own  Lease

# Current Employees including Owner(s) \_\_\_\_\_ Full Time      \_\_\_\_\_ Part Time      \_\_\_\_\_ Seasonal/Temp

Will the loan result in new employees?       Yes       No      If yes, how many? \_\_\_\_\_ FTEs\*  
*\*Full Time Equivalents. For example, one full-time employee and one half-time employee are 1.5 FTEs. Include owner(s).*

Is this business principally owned by Socially and Economically Disadvantaged Individual(s) (SEDI\*)?  
 Select all that apply.

Racial/ethnic minority group \_\_\_\_\_       Physical disability  
 Gender \_\_\_\_\_       Limited English proficiency  
 Veteran status       Membership in Native American nation/tribe  
 Other \_\_\_\_\_      *\*See ESD Definition: [esd.ny.gov/capital-access-program](http://esd.ny.gov/capital-access-program)*

**Business Certifications** – Select all that apply, and indicate certification type (federal, state, local)

MBE \_\_\_\_\_  WBE \_\_\_\_\_  SDVOB \_\_\_\_\_  Other \_\_\_\_\_

**B. OWNER INFORMATION**

**Principal Owner Name**

**Home Address**

**Home Phone** ( )

**Cell Phone** ( )

**Work Phone** ( )

**Email**

**Date of Birth**

**SSN/ITIN**

**Does this owner have life insurance?**  Yes  No

**If yes, Life Insurance Policy #**

**Life Insurance Coverage Amount**

**Life Insurance Term**

**Ownership Distribution:** List all owners, partners, stockholders, etc. Attach additional sheets if necessary.

Name, Address, Phone	Title	# of Years	Own %	SSN/ITIN

**C. PROFESSIONAL SERVICES INFORMATION**

Please describe any technical assistance or training programs utilized by your business.

**Merchant Card Service Provider, if any:**

**Accountant**

**Telephone** ( )

**Insurance Agent**

**Telephone** ( )

**Attorney**

**Telephone** ( )

**D. FINANCIAL INFORMATION**

**Business Financial Accounts:** List all credit union and bank accounts owned by the business.

Financial Institutions Name	Account Number

Attach additional sheets if necessary. Please note: Business borrowers are generally required to use Cooperative Federal for their primary operating (checking) account.

**Credit Relationships:** Please ATTACH a list of all loans and leases payable, including Name of Creditor, Purpose of Loan, Original Loan Amount, Amount Presently Owing, Repayment Terms, and Maturity Date.

→ *Template available at [www.coopfed.org](http://www.coopfed.org).*

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### E. BUSINESS PLAN

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Please ATTACH a description of your business's products/services, history, future plans and projections, marketing strategy, and management qualifications.

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### F. LOAN REQUEST

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**Type of Loan**    Line of Credit    Term Loan    Business Home Equity    Commercial Real Estate

Specific Loan Purpose* (Check all that apply)	Amount for this Purpose
<input type="checkbox"/> Working Capital	\$ _____
<input type="checkbox"/> Finance Purchase of Equipment	\$ _____
<input type="checkbox"/> Finance Purchase of Real Estate	\$ _____
<input type="checkbox"/> Finance Purchase of Business	\$ _____
<input type="checkbox"/> Refinance Existing Loan or Debts	\$ _____
<input type="checkbox"/> Other ( _____ )	\$ _____
<b>TOTAL LOAN AMOUNT REQUESTED</b>	<b>\$ _____</b>

*\*All proceeds must be used only for business purposes.*

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### G. COLLATERAL INFORMATION

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Please ATTACH a summary of assets that you own that are available to collateralize your loan request. Include description, location, appraised value, appraisal date/source, existing liens, and unencumbered amounts. Include collateral that would be purchased with the requested loan proceeds, if any.

→ *Template available at [www.coopfed.org](http://www.coopfed.org).*

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### H. GUARANTORS

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For incorporated borrowers, personal guarantees of owner(s) are usually required, unless secured by Cooperative Federal deposits. If personal assets are in joint names, a sole proprietorship, and/or partnership, Cooperative Federal may require all parties to pledge collateral. **Attach additional sheets if necessary.**

**Name** \_\_\_\_\_

**Address, SSN, and Phone listed above (Section B)**    Yes    No   If no, attach on additional sheet.

**Name** \_\_\_\_\_

**Address, SSN, and Phone listed above (Section B)**    Yes    No   If no, attach on additional sheet.

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### I. MISCELLANEOUS INFORMATION

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Are all tax liabilities current?    Yes    No   Settled through \_\_\_\_\_

Is the business an endorser, guarantor, or co-maker for any obligation not listed in the financial statements?  
 No    Yes   If yes, what is the contingent liability? \_\_\_\_\_

Does the business or business owner(s) have any outstanding judgements?    No    Yes

If yes, ATTACH a memo with details and a copy of discharge and schedules.

Has the business or business owner(s) ever declared bankruptcy?    No    Yes

If yes, ATTACH a memo with details and a copy of discharge and schedules.

Is the business a defendant in any lawsuit?  No  Yes If yes, ATTACH a memo with details.

Does the business have a pension fund?  No  Yes Profit-sharing fund?  No  Yes

If yes, does the business have any related unfunded liabilities?  No  Yes: \$ \_\_\_\_\_

#### J. BUSINESS LOAN APPLICATION CHECKLIST

Required from all businesses:	
1. Business Plan → If you don't have a detailed business plan, contact <a href="mailto:biz@coopfed.org">biz@coopfed.org</a> to request a consultation. We can also refer you to other local agencies that provide training, advising, and assistance with business planning. Businesses seeking microloans may be permitted to use our "Business Plan EZ" template (available at <a href="http://www.coopfed.org">www.coopfed.org</a> ); request a consultation to learn more.	
2. Resumes or Profiles for All Owners and Managers – if not included in Business Plan	
3. Itemization of the use of the Loan Proceeds (be <u>specific</u> ) – if not included in Business Plan	
4. List of Collateral (template available at <a href="http://www.coopfed.org">www.coopfed.org</a> )	
5. List of Business Credit Relationships – if applicable (template available at <a href="http://www.coopfed.org">www.coopfed.org</a> )	
6. Personal Financial Statement for All Business Owners (template available at <a href="http://www.coopfed.org">www.coopfed.org</a> )	
7. Personal Federal Tax Returns for 2 Years for All Business Owners, signed and dated	
8. Copy of Business License	
9. Bankruptcy, Judgement and/or Open Lawsuit information – if applicable	
10. Company Product/Service Brochures/Samples/Other Information	

11. Company Product/Service Brochures/Samples/Other Information	
12. Other:	
<b>Required for businesses requesting \$10,000 or less:</b>	
13. Month to Month Budget with assumptions for <u>one (1) year</u> . <i>Exceptions may be granted at the discretion of Loan Officers for short-term activities, if the applicant has sufficient income to support loan payments</i>	
<b>Required for businesses requesting more than \$10,000:</b>	
14. Month to Month Budget with assumptions for <u>two (2) years</u>	
15. Balance Sheet and Income Statement Projection with assumptions for two (2) years	
<b>Required for businesses <u>other than</u> Sole Proprietorships:</b>	
16. Organizational Papers: Incorporation Documents, Partnership Agreement, DBA, etc.	
17. IRS EIN Notification (not required if you already have a business account with Cooperative Federal)	
18. Corporate Resolution (template available at <a href="http://www.coopfed.org">www.coopfed.org</a> )	
<b>Required for existing businesses:</b>	
19. Business Federal Tax Returns for 2 Years, signed and dated – if applicable	
20. Business Balance Sheet and Income Statements for 2 Years – if applicable	
21. Most recent month end Balance Sheet & Income Statements	
22. Aging of receivables and payables	

<b>Required for loans to be secured with Real Estate:</b>	
23. Abstract of Title and Survey	
24. Other	

**K. CERTIFICATION**

The undersigned certifies that

- To the best of his or her knowledge and belief, all information contained in this loan application and in the accompanying statements and documents is true, complete, and correct.
- Business owner(s) will notify Cooperative Federal promptly of any material changes in this information.
- Whether or not the loan herein applied for is approved, the undersigned will reimburse Cooperative Federal for the costs, if any, of surveys, title or mortgage examinations, pay-off statements, appraisals, credit reports, etc., performed by non-Cooperative Federal personnel with the consent of the applicant.
- Cooperative Federal is authorized to contact any party named in this application, and any financial institution and trade creditors it deems necessary without further notice, including, but not limited to, Dunn & Bradstreet reports or information from a credit bureau. The undersigned also authorizes Cooperative Federal to answer questions and inquiries from others seeking credit experience information about the business or organization.
- The proceeds of any loans made as a result of this application will be used for legal business purposes only, and will not be used for personal or consumer purposes.
- The business and its owners do not discriminate on the basis of race, religion, sex, disability, sexual preference, age or marital status.
- The business and its owners waive all claims against Cooperative Federal and its consultants that may have provided Management, Technical and Business Development Assistance.
- He/she has read and received a copy of the "STATEMENTS REQUIRED BY LAW AND EXECUTIVE ORDER" and agrees to comply, whenever applicable, with the hazard insurance, lead-based paint, civil rights or other limitations in this notice.
- If the loan is supported, in full or part, by grants or other financial resources from government or philanthropic agencies, the business owner(s) authorizes Cooperative Federal to supply business and application information, as required, for routine reporting to those agencies. If the loan is being funded by the ESD Revolving Loan Trust Fund, the business owner(s) agrees to consider for employment persons eligible to participate in Job Training Partnership Act (JTPA) programs.

Business Name (print): \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Title: \_\_\_\_\_

Guarantor(s) Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Guarantor(s) Signature: \_\_\_\_\_ Date: \_\_\_\_\_

