

BUSINESS LOAN APPLICATION

MISSION

Metro Community Development is committed to empowering economically disadvantaged individuals and communities, through asset building activities. Our work strengthens the community by building partnerships and leveraging resources that increase asset growth opportunities.

LOAN APPLICATION REQUIREMENTS

- If you are applying for a loan for a new business (start-up or in operation less than two (2) years), you must first complete BizBOX training (bizboxmichigan.org) and work with either the local Michigan Small Business Development Center www.SBDCMichigan.org located in your area or complete the University of Michigan Innovation Incubator business boot camp series as part of the BizBOX training. Other educational requirements may be substituted but must be approved by Metro Community Development.
- 2. To be reviewed for a decision, the completed application must be received with all necessary documentation and the application fee. Incomplete applications will be held for 30 days, if after 30 days the application package is not completed it will be declined.
- 3. Application fees are **non-refundable**.
- 4. Your Loan Officer will review the application, verify references and collateral, and review your credit report. Your application will then be processed according to Metro's internal loan decision policy.
- 5. The Loan Officer will notify you of the recommended decision. If approved, the Loan Officer will begin facilitating the loan closing process and provide the applicant an overview of next steps. If denied, you will receive a decision letter outlining the reason(s) for the adverse action.
- 6. As a client or borrower of Metro Community Development, your personal and company information is held in strict confidence. MCD limits access to borrower and client records to its own employees who manage the credits or accounts, to those performing regulatory/oversight functions, and to subcontractors who have signed confidentiality agreements. We will not publicly disclose information without your permission. MCD is sensitive about the confidentiality of client information and uses a firewall and network security policies to make sure there is no unauthorized access to electronic files. Working papers and other sensitive documents that are not kept in secure files are shredded.





Small Business Loan Application

LOAN REQUEST			T							
Amount		F	Purpose							
APPLICANT INFO	RMATION									
Name of business app ("applicant")	blying for loan									
Street Address of Bus	iness									
City				State				Z	ip	
County				Date Sta	arted					
Telephone Number				Tax ID N	lumber					
E-mail Address				Website	2					
Company Type	Sole Proprieto	or Incorpora	ated		2	<u></u> р	Partnershi	ip		Nonprofit Corporation
Date Founded				Date of Owners						
Mailing Address (if di	fferent than ab	ove)								
Address										
City				State				Z	ip	
County										
Where did you h	ear about M	etro?								
Employee Inform	nation									
The creation of new jobs is a major factor in providing financing, as it is a catalyst to community development and the mission of MCD. If the loan request is approved, Metro Community Development will contact you to update our information regarding number of employees and track the direct relation of the loan to employees.										
Current number of	W2 employee	es								
Current number of	Current number of individuals hired that are 1099 contractual employees or vendors									
Anticipated number of employees to be hired as a result of this loan										
CPA/ BOOKKEEP	ER INFORMA	TION								
Name of Company										
Street Address										
City			Sta	te			Zip			
Name of Contact			•	•			•			
Telephone Number										
E-mail Address										

Personal Financials of Principal Owner and Guarantor

All persons with an ownership stake in business applying for loan must provide information on personal assets & liabilities. This includes partners (LLC) and officers (incorporation) with 20% or more ownership stake in the business.									
Applicant Identification Information and Individual Details Principal Owner and Contact									
Full Legal	er and Contact			Phone			Email		
Name				Number			Address		
Home Address			City, State	, Zip Code					
Date of Birth				Social Sec	urity Numbe	er	-	-	
	own your residence?			Years at A	ddress				
What was the las and federal incon	t year for which you filed	l state							
	r, officer, or owner		If yes, please e	xplain:					
	ant in any lawsuits yes, please explain:		If yes, please	explain:					
Do you currently Federal or state t	have any outstanding ax liens?		If yes, please	explain:					
Have you ever tal			If yes, please	explain:					
Are you currently making application	/ employed outside of co on?	ompany	If yes, please	provide cor	itact name, a	address, pł	none number	of employer:	
Number years at			Total yearly p	ersonal gro	ss Income	\$			
current employer: PERSONAL ASSETS									
Bank Accounts (C	Checking & Savings)				Names(s) on account Current Balance				
Other Investmen Name of Investm	ts (not retirement accou	unts) – St	ocks, bonds, mo	ney market		f shares		Market Value	
Nume of investin					# 0	1 31101 C3			
Real Estate Owne	ad								
Address of Prope					Cı	irrent Valu	e Cu	urrent Loan Balance Owed	
Cash Value of Life	e Insurance								
Name of Company				Curre	ent Cash V	alue Lo	oans on Balance		
Other Assets									
Description of Asset					Curre	ent Cash V	alue Lo	ans on Balance	
·									
				Total Asset	5				

Personal Liabilities									
Bank Loans, Credit Cards and Loans to Individuals									
Name of Institution or Individual		Account Number (last 4 digits)		Monthly Payment	Balance Remaining	Is Balance Due To Business Purpose?			
			Totals						
If any balances above are fo	or business purposes.	please explain how		e used					
Unpaid Taxes Due:									
Name Taxing E	Entity	Years taxes owed for			Total amount owed				
Garnishments and Judgmer	nts								
Name of Ent		Reason for legal action taken			Amount owed				
Total of all liability monthly payments			Total of a	III liabilities					
Contingent Liabilities									
Guaranteed or Co-signed Loan		Type of Loan			Total	Amount			
	Ŭ								
		T	otal Contin	gent Liabilities					

Total Assets	Minus	Total Liabilities	Equal	Net Worth
	-		=	

Personal Financials of Co-Owner and Guarantor

All persons with an ownership stake in business applying for loan must provide information on personal assets & liabilities. This includes partners (LLC) and officers (incorporation) with 20% or more ownership stake in the business.							
Co-owner							
Full Legal Name			Phone Number			-	
Home Address	255		City, State, 2	Zip Code			
Date of Birth			Social Secur	ity Numbe	r	-	-
Do you currently own your residence?			Years at Add	dress			
What was the last year for which you file and federal income taxes?	d state						
Are you a partner, officer, or owner in Any other business?		If yes, please e	xplain:				
Are you a defendant in any lawsuits or legal action? If yes, please explain:		If yes, please	explain:				
Do you currently have any outstanding Federal or state tax liens?		If yes, please	explain:				
Have you ever taken bankruptcy?		If yes, please	explain:				
Are you currently employed outside of company If yes, pl making application?			f yes, please provide contact name, address, phone number of employer:				
Number years at current employer:				s Income \$			
		PERS	ONAL AS	SETS			
Bank Accounts (Checking & Savings)							
Name of Financial Institution			Names(s) on account Current Balance				
Other Investments (not retirement acco	unts) – St	ocks, bonds, mo	ney markets,				
Name of Investment				# of	shares		Market Value
Real Estate Owned				T		1	
Address of Property				Cu	rrent Value	Ci	urrent Loan Balance Owed
Cash Value of Life Insurance Name of Company				Curre	nt Cash Value		oans on Balance
				Curre			
Other Assets							
Description of Asset				Curre	nt Cash Value	Lo	oans on Balance
			Total Assets				

Co-owner and Contact Continued								
Name of Principal/Contact								
PERSONAL LIABILITIES								
Bank Loans, Credit Cards and Loans to Individua	als		1					
Name of Institution or Individual	Account Number (last 4 digits)	Monthly Payment	Balance Remaining	Is Balance Due To Business Purpose?				
If any balances above are for business purposes	Tota							
		s were used						
Unpaid Taxes Due:								
Name Taxing Entity	Years taxes o	wed for	Total amount owed					
Garnishments and Judgments								
Name of Entity	Reason for legal a	action taken	Amou	nt owed				
	C							
Total of all liability	Tota	al of all liabilities						
monthly payments								
Contingent Liabilities								
Guaranteed or Co-signed Loan	Type of L	.oan	Total	Amount				
Total Contingent Liabilities								

Total Assets	Minus	Total Liabilities	Equal	Net Worth
	-		=	

Loan Collateral

Metro Community Development requires collateral on all business loans. Collateral can be pledged by the business directly or personal collateral of the owners or guarantors. Any equipment, land, or vehicles that will be purchased using loan proceeds will be required to be pledged as collateral for the loan. If more collateral is available than fits in the space below, please attach an additional piece of paper with the list of items.

Loan Collateral List					
Description of Collateral	Serial/VIN Number	Year New	Original Value	Current Value	
Total Collateral					

The information below is voluntary and will not have an impact on the decision of your loan application. This data is collected for informational purposes only and to comply with record-keeping and reporting requirements of the U.S. Small Business Administration.

Gender: Female Male Prefer not to answer						
Military 🗆 Active Duty or Reserve 🛛 Service-disabled veteran 🗆 Spouse 🗔 Other Vet 🗔 Non-veteran						
Race: African American White, non-Hispanic	Hispanic or Latino					
🗌 Native American or Alaska Native 🛛 🛛 Pacific Islander/Hawa	iian Native 🛛 Asian					
\Box I do not wish to furnish this information						
Signature:	Date:					
Printed Name:						
Gender: Female Male Prefer not to answer						
Military \Box Active Duty or Reserve \Box Service-disabled veteran \Box Sp	ouse 🛛 Other Vet 🗌 Non-veteran					
Race: African American White, non-Hispanic	🗌 Hispanic or Latino					
🗆 Native American or Alaska Native 🛛 Pacific Islander/Hawaiian Native 🗔 Asian						
\Box I do not wish to furnish this information						
Signature:	Date:					
Printed Name:						

CREDIT RELEASE FORM

For

Metro Community Development Business Loan Program

I/We certify that all the information contained in the attached application is true and includes a complete representation of all material facts as of this date.

In addition, I/we give permission to Metro Community Development, Inc., Executive Director, Loan Officer, and/or staff to request and receive all information required to verify employment, mortgages, deed of trust, savings accounts, credit accounts, and all other information necessary to complete the application for this loan, including but not limited to, maintenance of account.

The information contained in this application is provided for the purpose of obtaining business (non-consumers) credit with the Lender on behalf of the undersigned. It is understood Lender will rely on the information provided in making a credit decision. The undersigned warrants and represents the information herein submitted is true and correct in all respects and Lender may consider their representation continuing until written notice to the contrary is received by the Lender from the undersigned. The Lender is authorized to make all inquiries it deems necessary to verify the accuracy of the statements herein made, or in its discretion, to further determine the undersigned's credit standing, or the credit standing of any owner or guarantor. The Lender is hereby authorized to answer any questions from their parties concerning the undersigned's experience with the Lender.

Applicant Signature	Co-Applicant Signature
Applicant's Name (type or print clearly)	Co-Applicant's Name (type or print clearly)
Social Security Number	Social Security Number
Date of Birth	Date of Birth
Street Address	Street Address
City, State, and Zip Code	City, State, and Zip Code
Telephone Number	Telephone Number
Driver License Number	Driver License Number