

**Community Redevelopment Authority (CRA)
BUSINESS PROFILE & PRE-APPLICATION
Existing or Startup Business Information Form**

The CRA will use this information as a baseline report of your business. This instrument is held in complete confidentiality at the CRA office. Co-applicants will need to complete the Business Profile also and submit along with the loan pre-application.

PART I: Client Request for Counseling

- 1. Name:** _____ **2. E-mail Address:** _____
- 3. Home Address:** _____ **City:** _____ **Zip:** _____
- 4. Business Name:** _____ **County:** _____
- 5. Bus. Address:** _____ **City:** _____ **Zip:** _____
- 6. Phone: (primary)** _____ **(secondary)** _____ **Fax:** _____

I request business counseling service from the CRA or a CRA Resource Partner. I agree to cooperate should I be selected to participate in surveys designed to evaluate CRA services. I understand that any information disclosed will be held in strict confidence. (The CRA will not provide your personal information to commercial entities.) I understand that the CRA or its representatives agrees not to: 1) recommend goods or services from sources in which he/she has an interest, and 2) accept fees or commissions developing from this counseling relationship. In consideration of the counselor(s) furnishing management or technical assistance, I waive all claims against CRA personnel, and that of its Resource Partners and host organizations, arising from this assistance.

7. What type of business assistance are you seeking? Example - Business plan, start-up assistance, financing

8. Client signature: _____ **Date:** _____

Part II: Client Intake (to be completed by clients – please check all that apply for question #9)

- 9. Race:** Asian, Native American /Alaska Native, White, Native Hawaiian or other Pacific Islander, Black or African American
- 10. Ethnicity:** Hispanic Origin Not of Hispanic Origin
- 11. Gender:** Female Male
- 12. Marital Status:** Married Single Widowed
- 13. US Citizen:** Yes No
- 14. Do you consider yourself a person with disability?** Yes No
- 15. Veteran Status:** Non-Veteran Veteran Service-Disabled Veteran
- 16. Military Status:** Member of Reserve or National Guard On Active Duty
- 17. How did you hear about the Microenterprise Program?** _____

18. What kind of business do you have or are you contemplating? (Describe what kind of service, what you sell, or what you make.) _____

19. Which categories below best describe your business or business idea? Check those that apply.

- | | |
|--|---|
| <input type="checkbox"/> a. Agriculture | <input type="checkbox"/> g. Services -- Agriculture |
| <input type="checkbox"/> b. Construction | <input type="checkbox"/> h. Services – Automotive / Truck |
| <input type="checkbox"/> c. Manufacturing – General | <input type="checkbox"/> i. Services – Business &/or Personal |
| <input type="checkbox"/> d. Manufacturing – Crafts | <input type="checkbox"/> j. Services – Financial |
| <input type="checkbox"/> e. Manufacturing – Food Preparation | <input type="checkbox"/> k. Services – Recreational |
| <input type="checkbox"/> f. Retail trade | <input type="checkbox"/> l. Miscellaneous – other _____ |

20. Business Ownership: What percentage of your business is male or female ownership?
_____ % Male _____ % Female

21. Date you started your business or anticipate starting date. _____

22. Do you conduct business online? Yes No

23. Is this a home based business? Yes No

24. Do you have employees? Yes No If yes, how many full-time? _____ How many part-time? _____

25. For your most recent full business year, what were your: **Gross Revenues / Sales \$** _____
+Profits/ -Losses \$ _____

26. What is the structure of your business? Sole proprietorship Partnership Corporation LLC

27. What is your family household size? # of Adults _____ # of Children (under 21) _____

28. What is your family income per year?

- | | |
|---|---|
| <input type="checkbox"/> a. below \$9,999 | <input type="checkbox"/> e. between \$25,000 and \$29,999 |
| <input type="checkbox"/> b. between \$10,000 and \$14,999 | <input type="checkbox"/> f. between \$30,000 and \$39,999 |
| <input type="checkbox"/> c. between \$15,000 and \$19,999 | <input type="checkbox"/> g. between 40,000 and 49,999 |
| <input type="checkbox"/> d. between 20,000 and 24,999 | <input type="checkbox"/> h. above \$50,000 |

29. What percentage of your total household income now comes from your business (if this is a new business, what percentage do you anticipate)? % _____

30. What is the highest educational degree you have received? Check one.

- | | |
|---|--|
| <input type="checkbox"/> a. High school diploma | <input type="checkbox"/> d. Four year college degree |
| <input type="checkbox"/> b. GED (General Equivalency Diploma) | <input type="checkbox"/> e. Masters or above |
| <input type="checkbox"/> c. Vocational or tech degree (2 years) | <input type="checkbox"/> f. Other, specify _____ |

31. Do you have another job / work elsewhere? Yes No Full-time? _____ Part-time? _____
Where? _____ Number of hours/week _____

32. What other sources of household income do you have besides your business and any other job?
(EX: Public Assistance, Inheritance, Disability, etc.) _____

33. Within the last two years, have you received:

- a. Aid to Families with Dependent Children (AFDC) Yes No
b. Temporary Assistance to Needy Families (TANF) Yes No

34. Do you have health insurance? Yes No

If yes, do you have insurance through your business? Yes No

OR do you have insurance through your employer (including spouse's employer)? Yes No

35. Have you ever requested a bank loan for your business? Yes No Did you get it? Yes No
If not, why? _____

If you answered yes, are you using the bank at this time? Yes No

36. I would like to participate in the following activities of the Microenterprise program.

Borrow money Yes No Receive technical assistance for my business Yes No

Attend training Yes No

If yes to training, topics of interest _____

1. Please fill out the following information:

(Please type or write neatly.)

Business Name _____

Name _____

Business Address _____

Mailing Address _____

City, State, Zip Code _____

Phone _____ Fax _____ Cell _____

Email _____ Website _____

One sentence description of business _____

2. Please circle the category that best describes your business:

Service Crafts & Artisans Retail Food Agriculture Manufacturing/Wholesale

3. Please list a sub-category that best describes your business (e.g. Construction, Clothing, etc.)

IV. Direct Loan Pre-application

Please note: If applying for a CRA Loan or Technical Assistance and Training this application serves as the pre-application and additional documents, including a business plan, may need to be completed following approval of this pre-application. This document serves as a completed application for a CRA Microenterprise Loan, other CRA Loans or Microenterprise Technical Assistance and Training, although additional information may be required as requested.

1. What kind of training / experience do you have in this business? _____

2. What percent of your total working time is spent in this business?
____less than 25% ____25% to 50% ____51% to 75% ____76% to 100% Months per year? ____
3. Who are your current customers (location, age, gender, occupation, etc.) _____

4. If you expand your business are you going to need to find new customers? ____ Yes ____ No
(If yes) What is your marketing strategy? _____

(If no) Why won't you need to find new customers? _____

5. Who are your major competitors? _____

What edge do you have over your competitors? _____

6. How do you advertise? _____

7. What are the biggest problems your business faces? _____

8. List your business gross revenues for the last year. _____
List your anticipated business gross revenues for the next 12 months. _____
List your anticipated business expenses for the next 12 months. _____
9. Compared to a year ago, are your sales (Check one)
____up a lot ____up a little ____about the same ____down a little ____down a lot ____about the same
Why are sales up (or down)? _____

10. What sources of capital are you using for your business now? (Check all that apply, determine and insert percentages of each to total 100%)
____ Own savings _____ %
____ Loans from friends and family _____ %
____ Credit cards _____ %
____ Other finance companies _____ %
____ Personal loan from the bank _____ %
____ Business loan from the bank _____ %
____ Re-investment of business profits _____ %
____ Other _____ %

TOTAL 100 %

11. How would you use your loan? ***(Be specific.)***

How much for supplies/merchandise/raw materials? \$ _____

Specify use: _____

Supplier's name: _____

How much for tools/equipment? \$ _____

Specify use: _____

Supplier's name: _____

How much for improving place of business? \$ _____

Specify use: _____

Supplier's name: _____

How much for advertising? \$ _____

Specify use: _____

Supplier's name: _____

Other? _____ \$ _____

Specify use: _____

Supplier's name: _____

TOTAL LOAN REQUEST: (add above items) \$ _____ Number of payments _____

12. If the Loan Committee approves a loan amount smaller than you are requesting, which of the above would you reduce? _____

13. Any unusual repayment needs or considerations (Ex. seasonal business cycle that affects monthly payment ability): _____

14. If business is slow, what other ways do you have to make your payment? _____

15. Are your business and personal loan payments (credit card, loan from relative, etc.) current?

BUSINESS: ____ Yes ____ No PERSONAL: ____ Yes ____ No

16. Could you obtain this loan from a bank? ____ Yes ____ No

If you answered NO, why not? _____

If you answered YES, why aren't you borrowing from the bank? _____

17. Have you declared bankruptcy in the last three years? ____ YES ____ NO

18. My long range (one to five years) goals for this business are:

19. Complete the following statements with financial information from the last twelve months of business or complete with projected financial information if is a startup business:

INCOME STATEMENT

BUSINESS INCOME:

Sales _____
 - Cost of Goods Sold. _____
 = GROSS MARGIN..... _____

BUSINESS EXPENSES:

Salary Expense. _____
 Payroll Expense _____
 Outside Services. _____
 Supplies (Office & Operating) _____
 Repairs and Maintenance _____
 Advertising. _____
 Car, Delivery & Travel. _____
 Accounting & Legal _____
 Rent _____
 Telephone. _____
 Utilities. _____
 Insurance _____
 Taxes (real estate, personal property, sales, etc.) _____
 Interest. _____
 Depreciation. _____
 Other (List _____).

TOTAL EXPENSES _____

NET PROFIT

(Subtract Total Expenses from Gross Margin) _____

Owner's Draw (Yearly). _____

BALANCE SHEET

BUSINESS ASSETS:

Checking Account \$ _____
 Accounts Receivable \$ _____
 Inventory \$ _____
 Savings Account \$ _____
 Land \$ _____
 Buildings & Equipment \$ _____
 Autos/trucks \$ _____
 Other assets \$ _____

TOTAL ASSETS \$ _____

BUSINESS LIABILITIES:

Accounts Payable \$ _____
 Short term notes (<1 yr.) \$ _____
 Long term notes (> 1 yr.) \$ _____
 Credit Cards \$ _____
 Other Liabilities \$ _____

TOTAL LIABILITIES \$ _____

OWNER'S EQUITY \$ _____

(Total Assets - Total Liabilities)

TOTAL LIABILITY AND OWNER'S EQUITY \$ _____

Personal Balance Sheet

ASSETS

Current Assets:

Cash & Checking _____
Money Market, etc. _____
Securities _____
S-T notes receivable _____
Prepaid interest _____
Other _____

Subtotal: \$ _____

Intermediate Assets:

H'hold furniture _____
Vehicles _____
CD's & Securities _____
Other _____

Subtotal: \$ _____

Long-term Assets:

Real Estate _____
IRA, SRA, etc.. _____
Stocks, Bonds, etc.. _____
Other property _____
Other _____

Subtotal: \$ _____

TOTAL ASSETS: \$ _____

LIABILITIES

Current Liabilities:

Accounts Payable _____
Short term loans _____
Current payment on LT _____
Interest payable _____
Taxes payable _____
Other: _____

Subtotal: \$ _____

Intermediate Liabilities:

Consumer loans _____
Loans on vehicles _____
Other _____

Subtotal: \$ _____

Long-term Liabilities:

Real Estate Mortgage _____
Co-Signed loans _____
Other _____

Subtotal: \$ _____

TOTAL LIABILITIES: \$ _____

TOTAL ASSETS MINUS TOTAL LIABILITIES = NET WORTH \$ _____

Collateral Information

The applicant understands that, when listing assets below, they are documenting them as assets to be used as security for their proposed Loan and are certifying that the collateral is real and of the value established. Furthermore, the applicant will make available all identifying characteristics, lien information, and will allow for physical inspection of listed assets. The applicant also understands that, upon perfection of the security interest in the collateral, all products and proceeds from the secured assets will be attachable.

Please list below all requested information relating to the collateral offered as security for this proposed Loan. Please use fair market value when determining the worth of listed assets.

Asset	Description (serial #, model #, VIN, etc.)	Value of the Asset

The undersigned certifies that the assets listed above (and on attached sheets, if necessary) are real and of the value listed. The undersigned also agrees that all-identifying characteristics and lien information concerning these assets is forthcoming and accurate. Furthermore, the undersigned agrees to allow the CRA to perform a physical inspection of any of the assets proposed as collateral for security for this *Loan*.

If, after loan approved, there exists a misrepresentation of the above information, the CRA reserves the right to foreclosure, retrieval of secured assets, and the ability to engage collection proceedings for any unpaid balance of the *Loan*.

President/Principal _____ Date _____

**Community Redevelopment Authority
Credit History Search Authorization**

By signing this agreement, I hereby give full authorization to the Community Redevelopment Authority, Hastings, NE 68901, to perform a credit history search on my past and current credit history. Also, I hereby give full authorization to CRA to utilize the information that I have supplied on this form for the purpose of performing a credit history search.

Applicants Full Name: _____
 Date: _____
 dba: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Telephone: _____
 FAX: _____
 E-mail: _____
 Social Security #: _____
 Fed I.D. #: _____
 Date of Birth: _____
 Employment: _____
 (include address) _____

Please write a brief paragraph stating the reasons if you are unwilling to authorize this agreement.

Applicant Signature: _____ Date: _____

(For CRA office use only)

Credit Search Performed: YES _____ NO _____ Date: _____

Credit Search Performed by: _____

Copy of Credit Report Attached: YES _____ NO _____

Comments:

Signatures: _____
(Director)

20. Please complete the following source and use of funds:

<u>Source:</u>	<u>Amount:</u>	<u>Use:</u>
Lender _____	_____	_____
CRA _____	_____	_____
Owner Equity _____	_____	_____
Other _____	_____	_____

Certification

I hereby certify that the below named business is legally doing business in the State of Nebraska and that all representations made on this application are true and correct. I also hereby grant permission to the Community Redevelopment Authority to contact any and all parties they deem necessary to process this loan request. I understand that this application will be held in the strictest confidence and only discussed with those necessary to process this loan request.

In submitting this loan application, I understand that the decision to accept CRA provided training, loan assistance, or technical assistance in conjunction with the CRA lending programs is my own. I also understand that I waive all claims against the Community Redevelopment Authority and its staff.

President/Principal

Name of Business

Date: _____

FOR OFFICE USE ONLY

DO NOT WRITE BELOW THIS LINE

DATE: _____ NAME OF BORROWER: _____

AMOUNT OF LOAN REQUESTED: _____

LOAN: _____ Approved _____ Denied

AMOUNT OF LOAN APPROVED: \$ _____ INTEREST RATE: _____%

NUMBER OF PAYMENTS: _____

PAYMENT SCHEDULE: _____

COMMENTS: (If loan was denied or approved with conditions, state reasons, conditions and recommendations. Continue on back of page if necessary.)