



El Paso Empowerment Zone

## Small Business Loan Application Packet Checklist

<input checked="" type="checkbox"/>	Start-Up	New Business (less than 3 years in existence)	Existing Business (more than 3 years in existence)
Loan Application	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Financial Statement [for each owner with 20% or more ownership]			
Owner: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Owner: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Income Tax Returns [for each owner with 20% or more ownership]			
Owner: _____	last 3 years '13, '12, '11 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	last 3 years '13, '12, '11 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	last 3 years '13, '11, '11 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Owner: _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Business Income Tax Returns		since existence '13, '12 <input type="checkbox"/> <input type="checkbox"/>	last 3 years '13, '12, '11 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Business Year-end Financial Statements		since existence '13, '12 <input type="checkbox"/> <input type="checkbox"/>	last 3 years '13, '12, '11 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Income Statement		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Balance Sheet		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Cash Flow Statement (with assumptions and justifications)		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Most Current Interim Financial Statements [Less than 90 days old]		Jan 2014-current	Jan 2014 - current
Income Statement		<input type="checkbox"/>	<input type="checkbox"/>
Balance Sheet		<input type="checkbox"/>	<input type="checkbox"/>
Cash Flow Statement (with assumptions and justifications)		<input type="checkbox"/>	<input type="checkbox"/>
Pro Forma Financial Statements	next 12 months	next 12 months	next 12 months
Income Statement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Balance Sheet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cash Flow Statement (with assumptions and justifications)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Business Plan Outline (at minimum):

1. **History of Business:** Starting Date, Amount of Initial Investment/Loan
2. **History of Owners/Operators:** Resumes, Name(s) of Other Businesses Owned
3. **Business Operation/Location:** Product/Service, Cost/Price, Production, Selling Methods, Marketing Plan, Established Customers, Competitors, Facility Age/Description
4. **Professional Assistance Available:** Name of Accountant, Attorney, Banker, Insurance Representative (if applicable)
5. **Number/type of jobs presently held by EZ Residents**

The business plan is an important component to your loan packet. It will show how well your proposal has been thought out. Templates are available upon request.

For questions, please call Isela Robison at 212-1675 or email [robisonie@elpasotexas.gov](mailto:robisonie@elpasotexas.gov).



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- Please type or print clearly.
- Be sure to fill in each blank and answer each question.
- If not applicable, mark N/A and explain. If there is not enough room, use an additional page and indicate the section to which you are adding.

City Date Stamp: \_\_\_\_\_

(Office Use Only: Loan App # \_\_\_\_\_)

### LOAN APPLICATION

#### SECTION 1 - APPLICANT INFORMATION ?

1. Name of Business/Borrower:	2. Tax ID#:
	3. Telephone #:
4. Type of Business:	5. Fax #:
6. Business Physical Address:	7. Zip:
8. Business Mailing Address:	9. Zip:
10. Person to Contact (Name, Title):	
11. E-mail:	12. Telephone #:
13. Borrower is: <input type="checkbox"/> Individual <input type="checkbox"/> LLP <input type="checkbox"/> Joint <input type="checkbox"/> Franchise    Date Established: _____ <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> LLC    Partnership <input type="checkbox"/> Corporation    State of Incorporation: _____	
14. If corporation or partnerships, please attach articles of incorporation/bylaws or partnership agreement describing legal operations.	
15. If your business is a franchise, include a copy of the Franchise Agreement and the Franchiser's FTC Disclosure Statement.	

#### SECTION 2 - AUTHORIZED SIGNERS FOR THIS APPLICANT

16. List below names of: Individual Borrowers; Partners (if partnership); or Officers (if corporation). Under title, indicate "individual", "partner", "president", "vice-president", etc., as appropriate.

Name	Title	Ownership	Soc. Sec.#	Home Address (with Zip Code)
		%		
		%		
		%		
		%		

#### SECTION 3 - EMPLOYEE INFORMATION

	# Existing Employees	# New Employees	Job Type (Use additional sheet, if needed.)
17. Total Employees			

#### SECTION 4 - TERMS OF REQUESTED LOAN

18. Total Amount Applied for:                    \$ _____	19. Annual Interest Rate (Fixed): <b>3%</b>
20. Repayment Terms Desired (# of months):	21. Monthly Payment Amount Requested: \$ _____

#### SECTION 5 - COLLATERAL

22. Real Estate?                    If yes, list address: \_\_\_\_\_                    Value: \$ \_\_\_\_\_

23. Equipment or Other?                    If yes, attach an itemized list with item description and item values.                    Value: \$ \_\_\_\_\_

#### SECTION 6 - BUSINESS PLAN & FINANCIAL STATEMENTS

24. Please attach the appropriate business plan, income tax returns, and financial statements. Please refer to the attached "Loan Application Packet Checklist" to identify applicable documents to be submitted.

**SECTION 7 - PURPOSE OF THE LOAN**

25. Description of Project & Reason for the Loan:	26. Project Cost	Loan	Applicant	Useful Life
	Land Acquisition	\$	\$	
	Land Improvements	\$	\$	
	Building Purchase	\$	\$	
	Repairs/Renovations:			
	Interior	\$	\$	
	Exterior	\$	\$	
	Equipment	\$	\$	
	Furniture & Fixtures	\$	\$	
	Inventory	\$	\$	
30. For building or equipment purchase, estimated acquisition date:	Other Costs (Itemize)	\$	\$	
31. Date which facility/business will be fully operational:	TOTAL COST	\$	\$	
32. Is the loan applicant the proposed occupant of the facility?				

**SECTION 8 - BUSINESS INDEBTEDNESS**

33. Furnish the following information on all installment debts, contracts, notes, and/or mortgage payable.

To Whom Payable	Original Amount	Original Date	Present Balance	Maturity Date	How Payable	If secured, describe collateral
	\$		\$		\$ /per	
	\$		\$		\$ /per	

34. Have you been through bankruptcy in the past 10 years? If yes, provide date and explain.

35. Any previous government financing, including SBA or ACCION, by any principal owners? If so, describe.

**SECTION 9 - APPLICANT CERTIFICATIONS & SIGNATURES**

- I/We hereby request the loan request described in this application on behalf of the applicant business.
- I/We certify that I/We made no misrepresentation in this loan application or in any related documents, that all the information is true and complete, and that I/we did not omit any important information.
- I/We understand that this information is being submitted to the City of El Paso, Empowerment Zone Loan Program (EZ); and, that the City of El Paso EZ Program is relying on this information to make a loan decision.
- I/We have not paid anyone employed by the Federal Government for help in obtaining this loan. I/We understand that I/we do not need to pay any other third-party for assistance in locating a lender or preparing this Application or Exhibits.
- I/We agree that any property securing the loan or credit will not be used for any illegal or restricted purpose.
- Lender is authorized to file a financing statement for the collateral pledged on this loan.
- Lender is authorized to verify with other parties and to make any investigation of my/our credit, either directly or through any agency employed by the Lender for that purpose.
- Lender may disclose to any other interested parties information as to Lender's experience or transactions with my/our account.
- I/We understand that Lender will retain this application and any other credit information Lender receives, even if the loan request is not granted.
- I/We attest that no business applicant owner, owner's spouse or household member works for HUD or the City of El Paso. I/We attest no relation to City staff or City Council members directly involved in the loan award process.

Signature:	Date:	Signature:	Date:
Print Name:		Print Name:	

**Questions? Call:** Isela Robison, EZ Coordinator  
**915-212-1675**  
 Se habla español

**Submit application to:** Isela Robison, EZ Coordinator  
**915-212-1675**  
 Call for Appointment

To:

(Office Use Only: Loan App # \_\_\_\_\_)



El Paso Empowerment Zone

### PERSONAL FINANCIAL STATEMENT



Statement Date (Today's Date) \_\_\_\_\_

Name \_\_\_\_\_

Soc. Sec. No. \_\_\_\_\_ Date of Birth \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Telephone \_\_\_\_\_ Business Phone \_\_\_\_\_

Spouse Name \_\_\_\_\_ No. of Dependents \_\_\_\_\_

Business or Occupation \_\_\_\_\_

Name of venture(s) of which you are Partner or Officer \_\_\_\_\_

Have you been through bankruptcy in the past 10 years? If Yes, Explain \_\_\_\_\_

Are any assets pledged?  Yes  No

#### SECTION 1

Helpful Note: Complete Section 2 **Before** Section 1

ASSETS		LIABILITIES AND NET WORTH	
Cash On Hand (Schedule A)	\$	Debts Payable (Schedule E)	\$
Cash Value of Life Insurance (Schedule B)		Loans on Life Insurance (Schedule B)	
Marketable Securities (Schedule C)		Real Estate Debt (Schedule F)	
Accounts & Notes Receivable (Schedule D)		Unpaid Income Taxes Due	
IRA / Retirement Accounts		Other Term Notes Payable	
Real Estate Owned (Schedule F)		Other Debt - Itemize	
Non-Marketable Securities			
Automobiles			
Household Goods			
Other Personal Property			
Other Assets - Itemize			
		TOTAL LIABILITIES	\$
		NET WORTH	\$
TOTAL ASSETS	\$	TOTAL LIABILITIES & NET WORTH	\$

MONTHLY INCOME AND EXPENSES			
Salary	\$	Rent or Home Payment	\$
Bonus and Commissions		Food	
Dividends and Interest Incidentals		Utilities	
Real Estate Income		Avg. Amount Paid on Open Accounts	
Retirement Income		Insurance payments	
Other Income		Other payments	
TOTAL INCOME	\$	TOTAL EXPENSES	\$

#### CONTINGENT LIABILITIES

Please provide the following information regarding your contingent liabilities. A contingent liability is any debt you are or may be required to pay as a guarantor, endorser or co-maker, legal claims or judgements, or special expenses such as child support, alimony, etc.

Loan In Name Of	Amount	Financed By	Limited %
	\$		

For the purpose of procuring and maintaining credit from time to time in any form whatsoever with the above named El Paso Empowerment Zone Program, for claims and demands against the undersigned, the undersigned submits the following as being a true and accurate statement of its financial condition on the following date, and agree that if any change occurs that materially reduces the means or ability of the undersigned to pay all claims or demands against it, the undersigned will immediately and without delay notify the said El Paso Empowerment Zone Program.

I authorize Lender or its agents to verify the information obtained in this statement & obtain additional information concerning my financial condition.

Note: Any willful misrepresentation could result in a violation of Federal Law (Sec. 18 U.S.C. 1014)

Date \_\_\_\_\_

Signature \_\_\_\_\_

**SECTION 2**

Note: **Complete** this section **first**

**Schedule A - CASH IN CREDIT UNION & OTHER BANKS**

Name of Credit Union/Bank	Type of Account	Balance	Account in Name of
1			
2			
3			
4			
5			
6			
Total		\$	<b>A - Cash</b>

**Schedule B - LIFE INSURANCE**

Company	Face of Policy	Cash Value	Policy Loans	Beneficiary
1				
2				
3				
4				
Total		\$	<b>B - Life Insurance</b>	

**Schedule C - SECURITIES OWNED**

Description of Stock	No. of Shares	Original Cost	Market Value	If Pledged, to whom
1				
2				
3				
4				
5				
Total		\$	<b>C - Securities</b>	

**Schedule D - ACCOUNTS AND NOTES RECEIVABLE**

Owed to You by	Original Amount	Present Balance	Payments	Maturity	Collateral (if any)
1					
2					
3					
4					
5					
Total		\$	<b>D- Receivables</b>		

**Schedule E- DEBTS PAYABLE (Non-mortgage debt)**

Lender	Original Amount	Present Balance	Payments	Maturity	Collateral (if any)
1					
2					
3					
4					
5					
6					
7					
Total		\$	<b>E- Debts</b>		

**Schedule F - REAL ESTATE OWNED**

Title in Name of	Description/Address	Market Value	Balance Due	Payments	Lienholder
1					
2					
3					
4					
5					
6					
7					
8					
9					
Total		\$	<b>F- Real Estate</b>		