



<b>Business Loan Guidelines</b>
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- Loan applicants must be businesses located in Northeast Ohio that are unable to obtain the money from a conventional lender or other sources
- The maximum loan amount is \$10,000
- Each owner of the company having a 20% or more interest, shall guaranty the loan
- Additional collateral may be requested at the discretion of the loan committee/board (Cost associated with filing a security interest in favor of HFLA is borne by the Borrower)
- The following materials must be provided in order for an application to be considered complete:

Completed Application forms	
Complete Business Plan (if reviewed by SBDC, letter re same)	
Financial Statements—Balance Sheet; Projections (3 years); YTD Income statement; AP/AR Aging; Most recent (2 months) Bank Statements	
Sources and Uses Statement	
Resumes of all Business Owners (owning 20% or more)	
Articles of Incorporation/Organization; Code of Regulations (By-laws)/Operating Agreement	
Most recent tax return	
Lease Agreement/Deed for real estate/business location	
Proof of Insurance for Business	
Information regarding other debt (including UCCs; liens)—may require lien/judgment search; subordination agreement	

- After a complete application is received an interview will be scheduled for the applicant with the loan committee.
- There are no prepayment penalties or fees. All repayments commence in the month following the initial loan disbursement. The repayment schedule for Business Loans is as follows:
  - Loans up to **\$4,000** must be repaid within **12-15 months**
  - Loans up to **\$8,000** must be repaid within **24 months**
  - Loans up to **\$10,000** must be repaid within **36 months**

If you have any questions or would like additional information, please contact the HFLA office at 216-378-9042 or email [team@interestfree.org](mailto:team@interestfree.org)



<b>Business Loan Application</b>		Referred By: _____	
Amount Requested: \$ _____ (max \$10,000)			
Business Name _____			
DBAs _____			
EIN/DUNS # _____		Business Start Date _____	
Address _____		City _____	Postal Code _____
Phone: _____	Fax: _____	Email: _____	
Business Website: _____			
Type of Business Structure _____			
Type of Business _____			
State of Incorporation/Organization _____		(if not Ohio, is business authorized to do business in Ohio: _____)	
State Business ID # _____			
Year Business Established _____			
List of Owners/Shareholders/Partners (with ≥ 20% interest):			
Title	#of Years	% Interest	Name
Is Business a M/WBE? ____ (yes) ____ (no)			
Current No. of Employees _____			
Will this Loan create any additional Jobs? ____ (yes) ____ (no)		If so, how <u>any</u> ? _____	
Lease or Own? _____		If lease, name of Landlord _____	Term of Lease _____
If Own, is there a mortgage? _____		Name of Mortgagee _____	Principal Amt of Loan _____
Maturity _____			
How long at this Address? _____		If less than 2 years, previous address _____	
Name of Financial Institution _____			
Name of Attorney: _____		Phone: _____	
Name of Accountant: _____		Phone: _____	

**LOAN REQUEST INFORMATION**

Dollar Amount	Specific Purpose (Cost)
\$ _____	_____
\$ _____	_____
\$ _____	_____
\$ _____	_____

**BUSINESS DESCRIPTION (2 or 3 sentences):**

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**WHY ARE YOU ASKING FOR A LOAN? (1 or 2 sentences):**

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**SUMMARY COMPANY FINANCIAL INFORMATION (include 3 or 4 sentences briefly discussing the historical results and the key assumptions for the projections):**

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	2018 Actual	2019 Actual	2020 Projected	2020 (to date) Actual	2021 Projected	2022 Projected
Sales						
COGS						
Gross Profit						
SG&A						
Operating Profit						
Interest Exp						
Pre Tax Profit						
Principal Pmts						
Pre Tax Cash Flow						

**MANUFACTURING FACILITY (2 or 3 sentences on the production process. If applicable):**

**PRODUCTS AND SERVICES (2 or 3 sentences describing key products and/or services):**

**KEY SUPPLIERS (2 or 3 sentences on relationship. If applicable):**

**MARKETING PLANS (include 2 or 3 sentences detailing how you advertise):**

**MISCELLANEOUS INFORMATION**

Are business 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?  Yes  No

If yes, what is the contingent liability?

Has the business or principal owner ever declared bankruptcy?  Yes  No  
If yes, provide details on a separate sheet.

Is the business a defendant in any lawsuit?  Yes  No  
If yes, provide details on a separate sheet.

Are any of the business assets encumbered by liens or attachments of any type?  Yes  No

What _____	By whom _____	Amount \$ _____
What _____	By whom _____	Amount \$ _____
What _____	By whom _____	Amount \$ _____

**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. The undersigned agrees to notify HFLA of Northeast Ohio immediately of any material changes in this information.

The undersigned authorizes HFLA to contact, obtain and verify the accuracy of the information contained in this application form, including from any financial institutions, trade creditors or employers it deems necessary. \_\_\_\_\_ also hereby releases HFLA and its representatives, officers, directors and agents from any liability for seeking, gathering and utilizing any such information to make decisions relating to this application.

Further, \_\_\_\_\_, by its authorized officer, acknowledges and agrees that any misrepresentation or material omission made on this application will be sufficient cause for denial of this application or default of any loan documents entered into with HFLA pursuant to this application.

HFLA of Northeast Ohio is authorized to retain this application whether or not credit is approved. This application does not obligate HFLA of Northeast Ohio to make any loan even if you meet the normal standards HFLA of Northeast Ohio considers in determining whether to approve or deny the application.

Business Name \_\_\_\_\_

By: \_\_\_\_\_

Its: \_\_\_\_\_

Date: \_\_\_\_\_



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Business Owner Information				
Business Name: _____		Percentage of Ownership: _____ %		
Applicant's Last Name	First Name	Date of Birth (MM/DD/YY)	Social Security #	Driver's License #
Previous Name(s) if Applicable	Primary Phone Number	Secondary Phone Number	Email Address	
Address		City	Postal (Zip) Code	# of years at this address
				# of years in Ohio
Previous Address		City	Postal (Zip) Code	# of years at previous address
Current Employer		Occupation/Title		Employer Phone Number
Employer Address				# of years at this job
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widow/Widower <input type="checkbox"/> Spouse/partner Household Type: <input type="checkbox"/> 2 Parent Household <input type="checkbox"/> Single Parent Household <input type="checkbox"/> Single Adult <input type="checkbox"/> 2 or more adults (no dependents in home)				
Dependents ( <i>write-in age &amp; circle gender</i> )    _____ M/F    _____ M/F    _____ M/F    _____ M/F    _____ M/F				
Spouse/Partner's Last Name	First Name	Date of Birth (MM/DD/YY)	Social Security #	Primary Phone Number
Spouse's Current Employer		Spouse's Occupation/Title		Spouse's Employer's Phone Number

**Applicant Name:**

<b>MONTHLY INCOME</b>	<b>BORROWER</b>	<b>SPOUSE/PARTNER</b>
Salary / Commission	\$	\$
Soc Sec / Disability / Workers Comp	\$	\$
Retirement / Pension Benefits	\$	\$
Child Support / Alimony	\$	\$
Other Income	\$	\$
<b>TOTAL MONTHLY HOUSEHOLD INCOME</b>	\$	<input type="checkbox"/> Gross <input type="checkbox"/> Net

**Housing Expenses**

Rent/Mortgage		
2nd Mortgage/Home Equity Loan		
Property Taxes (if not included in mortgage)		
Homeowner's Insurance (if not included in mtg.)		
Homeowner's Association Fees		
Utilities (electric, gas, water, sewer)		
Cell Phone/Home Phone		
Internet/Cable		

**Personal Expenses**

Food (Groceries)		
Toiletries/Clothing		
Pet Care		
Recurring donations/tithes		

**Transportation**

Car Payment		
Gasoline		
Public Transportation		

**Insurance**

Auto Insurance		
Healthcare Premium (if not taken out of pay)		
Life Insurance		

**Medical**

Prescriptions		
Medical/Dental Bill Pymt. Plan		

**Childcare**

Daycare/Babysitter (monthly)		
Before/Aftercare (monthly)		

**Educational Expenses**

Tuition		
School Supplies		
Extra curricular lessons (swim, dance, sports...)		

**Debts**

Total minimum monthly credit card payments		
Total minimum monthly student loan payments		
Total minimum monthly personal loan payments		
Other		

**Taxes**

Income Taxes		
Business Taxes/Addtl Real Estate Taxes (ex: rental prop.)		

**For Office Use:**

Monthly Net Income	
Monthly Expenses	
Proposed HFLA Payment	
Remainder	

**Other Income Sources**

Check any of the following income sources that you receive:  Social Security/Disability (SELF)  Social Security/Disability (DEPENDENTS)

Child Support/Alimony  Pension/Retirement  OWF (Cash Assistance)  Unemployment  Other

Please enter the amount received for any income sources checked: \_\_\_\_\_

Frequency of Payment (weekly, biweekly, monthly, etc.): \_\_\_\_\_

**Debt/Asset Information:**

Student Loan(s) Amount Owed: \_\_\_\_\_  Line of Credit Amount Owed: \_\_\_\_\_  Credit Card 1 Amount Owed: \_\_\_\_\_

Credit Card 2 Amount Owed: \_\_\_\_\_  Other (Please describe) \_\_\_\_\_

Do you have any payday loans outstanding?  Yes  No If yes, amount owed: \$ \_\_\_\_\_

**Available Assets**

Cash & Investment Assets (e.g. stocks, cash, investments) \_\_\_\_\_

Other Assets (e.g. vacation property) \_\_\_\_\_

**Additional Information**

Did you apply to a bank or other sources for a loan?  Yes  No If not, why not? \_\_\_\_\_

If you were declined for a loan, **please provide a copy of the decline letter** and state the reason for the decline: \_\_\_\_\_

How did you hear about HFLA?  Friend/Family Member  Website  Synagogue/Religious Institution  Social Services Agency/Caseworker  
 Other, please specify: \_\_\_\_\_



**TAX ISSUES**

Do you or your spouse/partner have any un-filed tax returns? Yes  No  If Yes, please explain below

Do you or your spouse/partner owe any amounts for taxes? Yes  No  If Yes, for which year(s)? \_\_\_\_\_

Amount(s) owed: \$ \_\_\_\_\_ Have you established a payment plan? Yes  No

Please explain: \_\_\_\_\_

\_\_\_\_\_

**LEGAL ISSUES**

Are you or your spouse/partner being sued by anyone? Yes  No  If Yes, please explain below

Amount: \$ \_\_\_\_\_ Reason: \_\_\_\_\_

Are you in the process of or planning to file for divorce? Yes  No

Please explain: \_\_\_\_\_

\_\_\_\_\_

**Optional Information (not used for loan consideration)**

Ethnicity: \_\_\_\_\_ Religious Affiliation: \_\_\_\_\_



**Privacy and Disclosures**

The information in this application is for the purpose of obtaining credit and you are warranting and representing that it is true and correct. In signing this document, any borrower, cosigner, or guarantor agrees to pay all bills upon receipt or statement or as otherwise expressly agreed.

By submitting this application, you authorize HFLA of Northeast Ohio (HFLA) to obtain credit reports in connection with this application, modification of any loan received, or as needed, by HFLA. Upon request, we will advise you of the name and address of any agency furnishing the report. You, the borrower and any co-borrower, also authorize anyone named in this application or referenced on any credit report (including any co-signers, guarantors, employers or references) to verify any information given in this application or on the credit report.

HFLA collects nonpublic personal information about you, the borrower and any co-borrower, co-signer(s), or guarantor(s). We restrict access to your personal information to process the loan application and collect loan payments. We maintain procedural, physical and electronic safeguards to guard your nonpublic personal information. We do not disclose any nonpublic personal information about you to anyone, except as permitted or required by law. We will continue to adhere to the privacy policies and practices as described in this notice even after you satisfy your loan obligation to us. Your confidence in us is important and we want you to know that your personal information is protected. If you have any questions or concerns, please contact us.

Through Credit Builder’s Alliance, HFLA is able assist its borrowers build a positive credit history, by offering you the option of having your loan payments reported to the credit bureaus. We can also provide referrals to various nonprofits that offer free credit counseling. It is important to note that if you default on your loan, it will be reported as a delinquent account on your, your co-borrower’s, and guarantor(s)/cosigner(s)’ credit reports, regardless of your participation in the credit building program.

By signing this form, you certify that the information you provide in the application is true, and that you agree with HFLA’s aforementioned policies.

Borrower Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Borrower Signature: \_\_\_\_\_ Date: \_\_\_\_\_