

REVOLVING LOAN FUND LOAN APPLICATION



Please answer all questions completely, and provide all supporting documentation with the application form. If a question does not apply, please write "N/A." If an answer is unknown, please write "unknown." Do **NOT** leave any spaces blank. All information is required and **must be submitted** before the loan application is processed.

Borrower Information

| | | | |
|-------------------------|------------|--|--------------|
| Applicant Business Name | | Trade Name (Registered DBA): | |
| | | | |
| Address | | City | State |
| | | | |
| Primary Contact | | Phone | Email |
| | | | |
| Secondary Contact | | Phone | Email |
| | | | |
| Tax ID (EIN) | NAICS Code | State of Formation | # of owners: |
| | | | |
| Website | | Type of Business | |
| | | <input type="checkbox"/> LLC <input type="checkbox"/> S-Corp <input type="checkbox"/> C-Corp <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Other | |

List all owners of the business. Ownership % must equal 100%. Add additional pages as needed.

| Name | Title | Email | Ownership % |
|------|-------|-------|-------------|
| | | | |
| | | | |
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Project Address

| | | | |
|----------------------|--------------------------|----------------------|-----------------------|
| Address | | City | State |
| | | | |
| Total Square Footage | SF Occupied by Applicant | Land Area (in acres) | Lease or Owned? |
| | | | |
| Lease Start Date | Lease Maturity Date | Date Purchased | Monthly Rent/Mortgage |
| | | | |

Project Costs & Financing

Project Description: Explain, in detail, the use of proceeds and benefits to the company, including specific use of working capital. Attach additional pages as necessary.

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Project costs must match cost documents submitted with the application. The total project costs and financing must be the same dollar amount. Loan request must be a minimum of \$30,000 and a maximum of \$150,000.

| PROJECT COSTS | | PROJECT FINANCING | |
|---|--|------------------------|--|
| Real Estate | | Loan Request | |
| Equipment | | Other Financing | |
| Furniture & Fixtures | | Source | |
| Inventory | | Term (in months) | |
| Working Capital | | Interest Rate | |
| Other (Describe in Project Description above) | | Borrower Contribution | |
| TOTAL COSTS | | TOTAL FINANCING | |

Source of Borrower Contribution Business funds Personal funds Other

| | | | |
|---------------------------|--------------|-------|-------|
| Participating Bank/Lender | Contact Name | Phone | Email |
| | | | |

Collateral information: The Loan requested must be collateralized to the fullest extent possible. Please describe the collateral that is proposed for this request, including estimated value, how the value is determined, any prior liens, and current ownership of the asset.

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Job Information

Part-time jobs should be converted to full-time equivalents (FTE) based on an 8 hour day and 40 hour work week.

| | |
|--|--|
| Current number of FTE permanent jobs at business: | |
| Number of permanent FTE jobs expected to be created in the next 2 years: | |
| Number of current or contracted FTE jobs at risk of being lost if loan assistance is not received: | |

If any jobs are at risk of being lost, please provide a detailed explanation below. Attach additional pages as necessary.

| |
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Affiliate Business Information

Please list all affiliate businesses. An affiliate business is a business owned by the borrower or any owners of the borrower. If there are no affiliates, write "N/A".

| Business Name | Tax ID (EIN) | NAICS Code |
|---------------|--------------|------------|
| | | |
| | | |
| | | |
| | | |

Provide a brief description of all affiliate businesses, including ownership, operations, management, and relation to the borrower. Provide the information on a separate attachment, if necessary.

Business Profile

Please answer the questions below or provide the information on a separate attachment.

Business Description: Describe the nature and operations of the business. Include information on products, service area, major clients, competition, marketing, challenges & opportunities, and any other relevant information.

History: Describe the history of the business. Include the year founded, the history of ownership, any changes in ownership, any succession plans, and any other relevant information.

Management: Describe the management roles of the owners and any key employees. Include title, responsibilities, years with the company, years in the industry, and any other relevant information.

Eligibility Questionnaire

| | |
|---|--|
| 1. Is the business involved in any pending lawsuits? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. Has the business ever filed for bankruptcy? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3. Has the business ever settled a debt for less than owed? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4. Does the business have any delinquent unpaid federal or local taxes or unresolved liens from taxes owed? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 5. Has the business ever been delinquent on any government loan? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

If you answered "Yes" to any of the questions above, please provide a detailed explanation below. Attach additional pages as necessary.

Applicant understands that additional information may be requested in connection with this Application, as needed

Applicant and owners of Applicant authorize The St. Louis Local Development Company and its representatives and agents, including the St. Louis Economic Development Partnership, to obtain credit reports on Applicant, its affiliates, and all persons who will guarantee the loan, if approved

Applicant acknowledges that Applicant's loan must be approved by the Board of Directors of The St. Louis Local Development Company. Applicant agrees that the name of the Applicant and the Real Estate Holding Company, the amount of the loan requested, the current or proposed location of the Operating Company's business operations, the nature of the Operating Company's business, the name of any lender participating in the project, and the names of those who will be guaranteeing the loan, if the loan is approved, may be disclosed and discussed at The St. Louis Local Development Company's Board of Directors' meeting, which is open to the public and the media.

| Signature | Name | Title | Date |
|-----------|------|-------|------|
| | | | |

Completed applications and supporting documents may be submitted to an LDC loan officer listed below via the secure file upload link listed below, email, or mail. All applications must include a non-refundable loan application fee of \$100 made payable to "The St. Louis Local Development Company" and mailed to 120 S. Central Ave., Suite 200, St. Louis, MO, 63105.

| | | |
|---|--|--|
| Darrell Scott - VP 314.518.7143 dscott@stlpartnership.com | Zachary Folk - BDO 314.276.4203 zfolk@stlpartnership.com | Roger Schlueter - BDO 314.504.6034 rschlueter@stlpartnership.com |
|---|--|--|

<https://sendnow.gatewayportal.com/stlpartnership/LDC>

REVOLVING LOAN FUND APPLICATION CHECKLIST



General Information

- | | |
|--------------------------|---|
| <input type="checkbox"/> | 1. Complete Application (Attached) |
| <input type="checkbox"/> | 2. \$100 Application Fee (Non-refundable) - Make payable to "The St. Louis Local Development Company", <u>Required</u> before loan is processed |
| <input type="checkbox"/> | 3. Bank Commitment Letter or Turndown Letter |
| <input type="checkbox"/> | 4. Cost Documents (Real Estate Purchase Agreement, Estimates, etc.) - Cost documents <u>must</u> equal project costs |

Business Information

Include the following information for the applicant business and any affiliate business.

- | | |
|--------------------------|--|
| <input type="checkbox"/> | 5. Business Tax Returns for prior 3 years (If on extension, please provide extension & prior 3 years) |
| <input type="checkbox"/> | 6. Interim Balance Sheet and Profit & Loss Statement - <u>Must</u> be less than 60 days old |
| <input type="checkbox"/> | 7. Accounts Receivable & Accounts Payable Aging - <u>Must</u> match interim balance sheet |
| <input type="checkbox"/> | 8. Business Debt Schedule (attached) - <u>Must</u> match interim balance sheet |
| <input type="checkbox"/> | 9. Entity Documents (Articles of Organization and Operating Agreement, if an LLC; Articles of Incorporation and Bylaws, if a corporation; Partnership Agreement, if a Partnership) |
| <input type="checkbox"/> | 10. Fictitious Name Registration (if applicable) |
| <input type="checkbox"/> | 11. Copy of current or proposed Lease Agreement (if applicable) |
| <input type="checkbox"/> | 12. Copies of current business license(s) |

If the business is either a start-up entity or historic cash flow cannot support the request, include the following:

- | | |
|--------------------------|---|
| <input type="checkbox"/> | 13. Financial Projections (2 years with first year broken out month by month with detailed assumptions) |
| <input type="checkbox"/> | 14. Business Plan (Include a marketing plan, area demographics, relevant experience, and factors for success) |

Personal Information

Include the following information for all persons owning 20% or more of the applicant business or anyone who will guarantee the loan.

- | | |
|--------------------------|---|
| <input type="checkbox"/> | 15. Personal Tax Return for last 2 years (if on extension, please provide extension & prior year) |
| <input type="checkbox"/> | 16. Personal Financial Statement (attached) - <u>Must</u> be dated within 30 days of application |
| <input type="checkbox"/> | 17. Personal History Statement (attached) - <u>Must</u> be dated within 30 days of application |
| <input type="checkbox"/> | 18. Scanned copy of Driver's License or government issued ID |

Business Debt Schedule

List all business debt. Separate schedules must be submitted for the applicant business and all affiliate entities, even if the entity does not have any debt. Attach additional pages as necessary.

| | | | | | |
|---|-----------------|---------------|------------------------|---------------|--------------------------|
| <input type="checkbox"/> This business does not have any debt obligations | Business Name: | | | | |
| Debt #1 | | | | | |
| Creditor | Loan # | Interest Rate | Date Approved | Maturity Date | Collateral Securing Loan |
| | | | | | |
| Original Debt Amount | Present Balance | | Monthly Payment Amount | | Government Loan? (Y/N) |
| | | | | | |
| Debt #2 | | | | | |
| Creditor | Loan # | Interest Rate | Date Approved | Maturity Date | Collateral Securing Loan |
| | | | | | |
| Original Debt Amount | Present Balance | | Monthly Payment Amount | | Government Loan? (Y/N) |
| | | | | | |
| Debt #3 | | | | | |
| Creditor | Loan # | Interest Rate | Date Approved | Maturity Date | Collateral Securing Loan |
| | | | | | |
| Original Debt Amount | Present Balance | | Monthly Payment Amount | | Government Loan? (Y/N) |
| | | | | | |
| Debt #4 | | | | | |
| Creditor | Loan # | Interest Rate | Date Approved | Maturity Date | Collateral Securing Loan |
| | | | | | |
| Original Debt Amount | Present Balance | | Monthly Payment Amount | | Government Loan? (Y/N) |
| | | | | | |
| Debt #5 | | | | | |
| Creditor | Loan # | Interest Rate | Date Approved | Maturity Date | Collateral Securing Loan |
| | | | | | |
| Original Debt Amount | Present Balance | | Monthly Payment Amount | | Government Loan? (Y/N) |
| | | | | | |
| Debt #6 | | | | | |
| Creditor | Loan # | Interest Rate | Date Approved | Maturity Date | Collateral Securing Loan |
| | | | | | |
| Original Debt Amount | Present Balance | | Monthly Payment Amount | | Government Loan? (Y/N) |
| | | | | | |
| Signature | | Name | | Title | Date |
| | | | | | |

Personal History Statement

This form must be completed by each person owning 20% or more of the applicant business along with any other guarantors.

| | | | |
|----------------------------|----------------|---------------|---------------------------|
| Name of Business Applicant | | Title | Ownership % |
| | | | |
| Business Address | | City | State |
| | | | |
| First Name | Middle Initial | Last Name | Former Names & Dates Used |
| | | | |
| Social Security Number | Date of Birth | Primary Phone | Email |
| | | | |
| Present Residence Address | | City | State |
| | | | |
| Most Recent Prior Address | | City | State |
| | | | |

Are you a U.S. Citizen? Yes No If No, are you a lawful permanent resident? Yes No

Eligibility Questionnaire

| | |
|--|--|
| 1. Are you involved any pending lawsuits (including divorce)? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. Have you ever filed for bankruptcy? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3. Have you ever settled a debt for less than owed? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4. Do you have any delinquent unpaid federal or local taxes or unresolved liens from taxes owed? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 5. Are you presently under indictment, or on parole or probation? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 6. Have you ever been convicted, placed on pretrial diversion, or placed on any form of probation, including adjudication withheld pending probation, for any criminal offense other than a minor vehicle violation? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 7. Has any business owned by you ever received a loan or grant from the St. Louis Economic Development Partnership, STL Partnership CDC, St. Louis Development Corporation, or The St. Louis Local Development Company? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 8. Are you or your immediate family members by blood, marriage, or adoption related to a board member or staff member of the St. Louis Economic Development Partnership, STL Partnership CDC, St. Louis Development Corporation, or The St. Louis Local Development Company? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 9. Are you or your immediate family members by blood, marriage, or adoption related to an elected or appointed official or employee of the City of St. Louis or St. Louis County? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

If you answer yes to any of the above questions, please explain below or in an attachment.

| | | |
|-----------|------|------|
| | | |
| Signature | Name | Date |
| | | |

Personal Financial Statement

This form must be completed by each person owning 20% or more of the borrowing company along with any other guarantors. Use attachment if necessary, labelling each attachment identifying as part of this statement along with the specific section.

| | | |
|----------------------------|-------|-------------|
| Name of Business Applicant | Title | Ownership % |
| | | |

| | | |
|------|-------|-------|
| Name | Phone | Email |
| | | |

| Assets | | Liabilities | |
|---|--|---|--|
| Cash on Hand & In Banks | | Accounts Payable | |
| Savings Accounts | | Notes Payable to Banks and Others (Describe in Section 2) | |
| IRA or Other Retirement Accounts (Describe in Section 5) | | Installment Account (Auto) | |
| Accounts & Notes Receivable (Describe in Section 5) | | Monthly Payments: | |
| Life Insurance Cash Surrender Value (Describe in Section 8) | | Installment Account (Other) | |
| Stocks and Bonds (Describe in Section 3) | | Monthly Payments: | |
| Real Estate (Describe in Section 4) | | Loan(s) Against Life Insurance | |
| Automobiles (Describe in Section 5) | | Mortgages on Real Estate (Describe in Section 4) | |
| Other Personal Property (Describe in Section 5) | | Unpaid Taxes (Describe in Section 6) | |
| Other Assets (Describe in Section 5) | | Other Liabilities (Describe in Section 7) | |
| TOTAL ASSETS | | TOTAL LIABILITIES | |

| Section 1. Sources of Income | | Contingent Liabilities | |
|-------------------------------|--|----------------------------------|--|
| Salary | | As Endorser or Co-Maker | |
| Net Investment Income | | Legal Claims & Judgments | |
| Real Estate Income | | Provision for Federal Income Tax | |
| Other Income (Describe below) | | Other Special Debt | |

Description of Other Income in Section 1.

Section 2. Notes Payable to Banks and Others

| Name of Noteholder(s) | Original Balance | Current Balance | Payment Amount (Monthly) | Collateral Securing Loan |
|-----------------------|------------------|-----------------|--------------------------|--------------------------|
| | | | | |
| | | | | |
| | | | | |

Section 3. Stocks & Bonds

| Number of Shares | Name of Securities | Cost | Market Value Quotation/ Exchange | Date of Quote/ Exchange | Total Value |
|------------------|--------------------|------|----------------------------------|-------------------------|-------------|
| | | | | | |
| | | | | | |
| | | | | | |

Section 4. Real Estate Owned

| | Property A | Property B | Property C |
|--|------------|------------|------------|
| Type of Real Estate (e.g. Primary, Rental, Land, etc.) | | | |
| Address (Include City, State, & Zip) | | | |
| Date Purchased (mm/dd/yy) | | | |
| Original Cost | | | |
| Present Market Value | | | |
| Name & Address of Mortgage Holder | | | |
| Mortgage Account Number | | | |
| Mortgage Balance | | | |
| Monthly Payment | | | |
| Status of Mortgage | | | |
| Rent amount (if rental) | | | |

Section 5. Other Personal Property & Other Assets

Describe, and, if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment, and, if delinquent, describe delinquency.

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Section 6. Unpaid Taxes

Describe in detail as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.

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Section 7. Other Liabilities

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Section 8. Life Insurance Held

Give face amount and cash surrender value of policies, name of insurance company, and Beneficiaries.

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I authorize the release of any information that may be required at any time for any purpose related to the loan request and credit transaction associated with it to The St. Louis Local Development Company ("LDC") and its representatives and agents, including the St. Louis Economic Development Partnership.

I authorize LDC to obtain a credit report on me through the credit reporting agency of its choice and to make any inquiries it deems necessary to verify the accuracy of the statements made and to determine my creditworthiness. I also authorize LDC to release any information to any person or entity it deems necessary for purposes related to the loan request and credit transaction.

I certify that the information provided in this Personal Financial Statement, including all attachments and financial statements submitted along with it or at a later date, are true to the best of my knowledge. I understand that this information is being provided for the purpose of either obtaining a loan or guaranteeing a loan. I agree to update the information provided if any significant changes occur prior to the funding on the loan request.

| | | |
|--------------------|----------------|------|
| Signature | Name (Printed) | Date |
| | | |
| Spouse's Signature | Name (Printed) | Date |
| | | |