

TOTAL

NORTH DAKOTA DEVELOPMENT FUND/NEW VENTURE CAPITAL PROGRAM APPLICATION

NORTH DAKOTA DEPARTMENT OF COMMERCE SEN 59676 (5-2016)

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Applicant Name				Social Security Number/Federal Tax ID Number				
Primary Contact	Title		Telephone Number					
Address	City		State	ZIP Code				
Email Address				Date of Application		Date Business Established		
Legal Structure	☐ Sub Chapter S (☐ Non-Profit	Corporation	☐ New Business ☐ Existing Business ☐ Purchase Existing Business					
Purpose of Request						1		
Current Number of Emplo	Current Average W	ages Plus Benefits	Projected Average Wage Plus Benefits within 24 Months					
Financial Institution/Devel	opment Agency			Primary Contact		Telephone Number		
Address				City		State	ZIP Code	
							1	
Sources of Funds Amount				Sources of Funds		Amount		
A. Owner Equity		\$	\$		D. Other			
B. ND Development Fund		\$	\$		E. Other		\$	
C. Matching Funds \$			TOTAL		\$			
Use of Funds	Source A	Source B	Source C	Source D	Source E	То	tal Cost	
Land Acquisition								
Building Construction								
Building Purchase								
Site Improvement								
Machinery/Equipment								
Inventory								
Working Capital								
Other								

Note: Attach a complete description of the use of the North Dakota Development Fund (NDDF) funds (i.e. list of Machinery & Equipment to

be purchased, description of building to be purchased or erected and inventory purchased).

Summary or C	ollateral	Present	Present Market Value		Present Mortgage Balance			Collateral Position	
A. Land and Building		\$		\$					
. Machinery & Equipm	ent	\$		\$					
Furniture & Fixtures		\$		\$					
. Accounts Receivable		\$		\$					
E. Inventory		\$		\$					
F. Other		\$		\$					
TOTAL COLLATERAL		\$		\$					
rimary Source of Repayr	nent (Describe)			•					
resent Indebtedness: B	usiness Debts, Co	ntracts, Notes ar	nd Mortgages payab	les					
Owed To	Original Amount	Original Date (MM/DD/YYYY)	Present Balance	Rate of Interest	Maturity Date (MM/DD/YYYY)	Monthly Payment	Security	Status (Current/ Delinquent)	

Present Banking References

Financial Institution	City/State	Type of Account	Account Number(s)	Contact Person	Telephone Number

Trade References

Trade Supplier	Address	Materials and Products Supplied

Management (Officers, Directors, Owners, etc.)

Name and Title	Address	Percentage Ownership	

Key Advisors

Name		Firm/Company	Address
Attorney			
Accountant			
Insurance Agent			

NOTE: THE FOLLOWING EXHIBITS MUST BE COMPLETED WHERE APPLICABLE. ALL QUESTIONS ANSWERED BECOME PART OF THE APPLICATION.

1.	If your collateral consists of (A) Land and Building, (B) Machinery and Equipment, (C) Furniture and Fixtures, (D) Accounts Receivable, (E) Inventory, (F) Other, please provide and itemized list labeled Exhibit A that contains serial and identification numbers of all articles that have a value greater than \$500. Include a legal description of Real Estate offered as collateral. Furnish a signed current personal balance sheet and three years of tax returns for each stockholder (with 20% or greater ownership),	7. 8.	Does your business, its owners or majority stockholders own or have a controlling interest in other businesses? Yes No If yes, please provide their names and the relationship with your company along with a current balance sheet and operating statement for each. Label as Exhibit G . Do you buy from, sell to or use the services of any concern in which someone in your company has a significant financial interest?			
	partner, officer and owner. Social Security number should be included on personal financial statement. It should be as of the same date as the most recent business financial statements. Label as Exhibit B.	9.	Yes No If yes, provide details on a separate page. Label as Exhibit H. Attach a copy of funding commitments from each source of funding.			
3.	Do you have any co-signers and/or guarantors for this loan?	10.	Label as Exhibit I. Are any current business loans delinquent?			
	☐ Yes ☐ No If yes, please submit their names, addresses, tax ID numbers, three years of tax returns and a current personal balance sheet(s). Label as Exhibit C.		☐ Yes ☐ No If yes, describe on separate page. Label as Exhibit J.			
4.	Are you buying machinery or equipment with the proceeds?	11.	Are any of the company's principals related to or doing business with any NDDF staff or Board member?			
	Yes No If yes, you must include a list of equipment and cost as quoted by the seller and a purchase invoice. Label as		Yes No If yes, describe on separate page. Label as Exhibit K .			
5.	Exhibit D. Have you, or has any officer of your company ever been involved in	12.	Are there any judgments against you?			
	bankruptcy or insolvency proceedings?		Yes No If yes, list separately. Label as Exhibit L .			
	Yes No If yes, please provide details. Label as Exhibit E.	13.	Attach a full business plan. Label as Exhibit M.			
6.	Are you, or is your business involved in any pending lawsuits?					
	Yes No If yes, please provide details. Label as Exhibit F.					
The undersigned specifically acknowledge(s) that: (1) verification or re-verification of any information contained in the application may be made at any time by the Lender, its agents, successors, and assigns; either directly or through a credit reporting agency from any source named in this application and the original copy of this application will be retained by the Lender, even if the request is not approved; (2) the Lender, its agents, successors and assigns will rely on the information contained in the application and I/We have a continuing obligation to amend and/or supplement the information provided in this application, if any of the material facts which I/We have represented herein should change prior to closing; (3) in the event my/our payments indicated in this application become delinquent, the Lender, its agents and assigns may, in addition to all their other right and remedies, report my/our name(s) and account information to a credit reporting agency. I/We authorize the North Dakota Development Fund to make all inquiries deemed necessary to verify the accuracy of the information contained herein and to determine the credit worthiness of the undersigned. I/We certify that the information provided in this application is true and correct as of this date and that I/We understand the conditions set forth in this						
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Арр	icant (please print)	Financia	al Institution/Developer (please print)			
Auth	orized Signature	Authoriz	zed Signature			
Date	3	Date				
Inctri	noterrations for Applicants					

Instructions for Applicant:

Submit the supporting documentation and the completed application to:

North Dakota Development Fund PO Box 2057 Bismarck, ND 58502-2057

For more information on the North Dakota Development Fund, including additional requirements, please visit: http://www.legis.nd.gov/cencode/t10c30-5.pdf (see § 10-30.5-12).

If you have any questions...

Call: 701-328-5310

Write to: North Dakota Development Fund

PO Box 2057

Bismarck, ND 58502-2057

Visit: www.NDDevelopmentFund.com