



SBA 504 Loan Program Checklist

Business Information (as applicable)

<input type="checkbox"/> Business Information and Project Form
<input type="checkbox"/> Detailed Business Description: products, services, customers, competition, project benefits, industry trends, etc.
<input type="checkbox"/> Business Plan for startups, expansions, and business restructures
<input type="checkbox"/> Financial Statements for the past 3 years
<input type="checkbox"/> Federal Tax Returns for the past 3 years
<input type="checkbox"/> Interim Financial Statements dated within 90 days
<input type="checkbox"/> Interim Balance Sheet's Aging of Accounts Receivable and Payable
<input type="checkbox"/> Detailed Schedule of Debts for Operating Company, Borrower, and any Corporate Guarantors
<input type="checkbox"/> Monthly Cashflow Analysis for first 24 months for startups, expansion, or restructures
<input type="checkbox"/> Sale and Expense Projections with Assumptions for 2 years on startups, expansion, or restructure projects
<input type="checkbox"/> Affiliate Businesses Federal Tax Returns for the past 2 years (affiliation - 51% ownership, same management, industry, etc.)

Personal Information

<input type="checkbox"/> Guarantor and Key Management Information Form
<input type="checkbox"/> Federal Tax Returns for the past 2 years from guarantors (typically 20% or more ownership)
<input type="checkbox"/> Personal Financial Statement dated within 60 days from guarantors (spouse's signature required)
<input type="checkbox"/> Resume from each guarantor and key manager(s) (use own resume or included form)

Project Information (as applicable)

<input type="checkbox"/> Purchase Agreement (partially executed) with separate amounts for real estate, personal property, inventory, etc.
<input type="checkbox"/> Sworn Construction Statement or Construction Bid (signed)
<input type="checkbox"/> Furniture, fixtures, and equipment quotes
<input type="checkbox"/> Refinance documents—note, collateral documents, guaranties, and 12 month payment transcript

Items Needed Later

<input type="checkbox"/> Appraisal on projects over \$500,000. Required with SBA application on projects that contain expansion of existing RE owned 2 years or more, seller financing, participating bank OREO property, or related party transactions. (see appraisal requirements for details)
<input type="checkbox"/> Environmental (Questionnaire, RSRA report, Phase I, etc. per SBA requirements)
<input type="checkbox"/> Life insurance may be required from key owners. Amount is roughly 30% to 40% of SBA loan and required at time of SBA loan closing.
<input type="checkbox"/> Legal Entity Documents (bylaws, operating and membership agreements, stock certificates, etc.)



BUSINESS INFORMATION AND PROJECT FORM

CONTACT INFORMATION:

Name of Borrower: _____

Name of Business (if different): _____

Contact Person: _____ Phone: _____

Email Address of Contact Person: _____

Address of Project: _____

BORROWER INFORMATION:

Owner Name	Title	Ownership %
1.		
2.		
3.		
4.		

BUSINESS INFORMATION (if different than borrower):

Owner Name	Title	Ownership %
1.		
2.		
3.		
4.		

PROJECT INFORMATION:

Purchase Vacant Land \$ _____

Purchase Land & Building \$ _____

Construction or Renovations \$ _____

Furniture, Fixtures, Equipment \$ _____

Debt Refinance \$ _____

Soft Costs (appraisal, bank closing costs,
interim interest, etc.) \$ _____

Total Project Costs \$ _____

ADDITIONAL INFORMATION:

- Requested SBA Loan Term: 10 year 20 year 25 year
- Number of Current Full-Time Equivalent (FTE) Employees _____ Projected FTE after 2 years _____
- If applicable, which entity will own the furniture and equipment? _____
- Will you be leasing any real estate space to a 3rd party? _____ If so, how much sq. ft.? _____
- Source and amount of down payment (i.e. personal or business cash, seller financing, stock sale, line of credit, etc.) _____



GUARANTOR AND KEY MANAGEMENT INFORMATION

Legal Name: _____				
First	Middle	Last	Social Security # _____	
Current Home Address: _____				
Address	City	State	Zip Code	
From: _____ to Present _____				
Month/Year	Home Phone	Business Phone	Email	
Past Address (omit if over 10 years): _____				
Address	City	State	Zip Code	
From: _____ to _____				
Month/Year	Month/Year			
Date of Birth	City and State of Birth	Race	U.S. Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No	

Yes No

- 1. Are you presently subject to an indictment, criminal information, arraignment, or other means by which formal criminal charges are brought in any jurisdiction?
- 2. Have you been arrested in the past six months for any criminal offense?
- 3. For any criminal offense i.e. DUI, underage, watercraft violations, etc. have you ever: 1) been convicted; 2) plead guilty; 3) plead nolo contendere (no contest); 4) been placed on pre-trial diversion; 5) been placed on any form of parole or probation?
- 4. Are you, any of your children, your parents, or your spouse employed by, directors of, Officers of or stockholders of the participating bank, SBA, SCORE, or any other Federal Agency?
- 5. Have you ever filed for any type of bankruptcy or been involved in insolvency proceedings?
- 6. Are you or your business involved in any pending lawsuits?
- 7. Do you have ownership in any other businesses? Provide name and ownership %.
- 8. Do you or any of your affiliated businesses have any existing debt with SBA guarantees?
- 9. Have you or any of your affiliated businesses ever caused a loss to the Government from prior federal assistance?

If you answered yes to any of above questions, please supply details on a separate sheet.

I hereby authorize the release to 504 Corporation of any information they may require at any time for any purpose related to my/our credit transactions with them.

Signature _____

Date _____

Resume

Your Name: _____
 First Middle Maiden Last

Home Address: _____
 Street City State Zip

Education

College, Technical, or Training Name and Location	Dates Attended From	To	Major	Degree or Certificate
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Work Experience

List Chronologically, beginning with present employment

Company: _____ % of business owned: _____

Address: _____

From: _____ To: Present Title: _____

Duties: _____

Company: _____ % of business owned: _____

Address: _____

From: _____ To: _____ Title: _____

Duties: _____

Company: _____ % of business owned: _____

Address: _____

From: _____ To: _____ Title: _____

Duties: _____

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Honorable? [] Yes [] No

Job Description: _____