

## REQUEST FOR RELIEF ASSISTANCE

Dear Applicant,

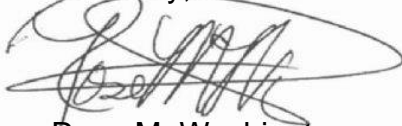
TEDC is a mission-based, community development financial institution formed in 1979 as a catalyst for economic development. We drive success through non-traditional lending programs and development services that help small businesses.

For relief assistance, please submit the items listed below:

- TEDC Authorization and Application
- Personal Financial Statement
- Personal Federal Tax Return for each owner/guarantor for 2018 or 2019
- Business Balance Sheet and Income Statement as of 12/31/2019
- Business Federal Tax Return for 2018 or 2019

The above documents may be submitted electronically to [loans@tedcnet.com](mailto:loans@tedcnet.com); by mail at P.O. Box 3625, Tulsa, OK 74101; in person using the drop box at our office; or online at [www.tedcnet.com](http://www.tedcnet.com).

Sincerely,



Rose M. Washington  
Chief Executive Officer

**\*Additional documents may be requested once TEDC staff review your loan application.**

## Authorization to Release Information and Processing Agreement

I/We hereby authorize the release to TEDC any information they may require at any time for any purpose related to my/our loan request or tenant application. I/We further authorize TEDC to release such information to any entity they deem necessary for any purpose related to my/our request.

I/We hereby authorize TEDC to verify my/our past and present employment earnings records, bank accounts, stockholdings, and other asset balances that are needed to process my/our application. I/We further authorize TEDC to order a consumer credit report and other credit information, including but not limited to, past and present mortgage and landlord references. I/We understand that the information TEDC obtains will be used only to determine my/our credit worthiness in processing this application.

I/We acknowledge that the information in this application is provided to induce TEDC to extend credit to me/us upon my/our guaranty or to others upon my/our guaranty. I/We acknowledge and understand that TEDC will rely on the information provided herein in deciding to grant credit or to secure a guarantee thereof. I/We agree to notify TEDC immediately and in writing of any change in name, address, or employment and to fully disclose any material adverse change (1) in my/our financial condition or (2) in my/our ability to perform my/our obligations to TEDC or any other creditor. I/We understand that these documents as well as any other additional information I/we provide is the property of TEDC.

I/We agree to submit a \$35 fee per guarantor along with this application. (FEE WAIVED)

Regarding financing, I/we further acknowledge and agree that TEDC will charge a processing fee equal to 1.5% of any amount borrowed. Two-thirds of the total processing fee is considered earned and may be collected by TEDC immediately upon loan approval. I/We acknowledge and agree to pay all closing costs including, but not limited to, abstracting, surveying, title insurance, recording fees and attorney fees. I/we further authorize the initiation of such title work and closing immediately if a loan request is approved. In the event that I/we fail to close the loan for any reason after approval, I/we agree that all described fees are due and payable to TEDC at that time.

I/We hereby certify that all application information, attachments and exhibits provided herein or at a later date are valid and correct to the best of my/our knowledge. The validity, effect and interpretation of this Agreement shall be determined by the laws of the State of Oklahoma. Tulsa County, Oklahoma, shall be the forum for any disputes regarding this Agreement.

\_\_\_\_\_  
Printed Name of Applicant/Guarantor

\_\_\_\_\_  
Printed Name of Applicant/Guarantor

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# TEDC APPLICATION

## SECTION A - GENERAL INFORMATION

<b>Business Name</b>		<b>Name of Principal in Charge</b>		<b>Business Phone:</b>	
				<b>Fax:</b>	
				<b>Cell Number:</b>	
<b>Business Address</b>		<b>City</b>	<b>County</b>	<b>Zip Code</b>	<b>Tax I.D. or SSN</b>
<b>Description of Business/Product(s)/Service(s)</b>				<b>E-mail Address</b>	
<b>Type of Business</b>	<b>Legal Structure</b>	<b>Date Established</b>	<b>Business Plan</b>	<b>Have you received government loans in the past?</b>	
			YES    NO	YES	NO
<b>Bank Name</b>		<b>Loan Officer</b>		<b>Phone Number</b>	
				<b>Do you own other businesses? If yes, include number of employees below.</b>	
				YES	NO
<b>Accounting Firm</b>		<b>Contact</b>		<b>Phone Number</b>	
				<b>NUMBER OF EMPLOYEES:</b>	
				Currently	_____
				After Loan	_____

## SECTION B - PROPOSED USE OF LOAN PROCEEDS OR TENANT COSTS

Category	Amount	Category	Amount
Building/Land Acquisition	\$	Payoff SBA Loan(s)	\$
New Construction, Expansion or Repair	\$	Payoff Non-SBA Bank Loan(s)	\$
Acquisition and/or Repair of Machinery and Equipment	\$	Pay Other Business Debt(s)	\$
Inventory Purchase	\$	All Other	\$
Working Capital	\$	<b>TOTAL PROJECT</b>	\$
Acquisition of Existing Business	\$	<b>AMOUNT YOU CAN INVEST</b>	\$

**For building purchase, build-out, new construction, expansion or repair, will you lease space to another business?    YES    NO**

**If YES, what percent of the space will you lease to others? \_\_\_\_\_ %**

**SECTION C – PERSONAL AND BUSINESS INDEBTEDNESS:** Provide the following information on all installment debts, leases, contracts, notes and mortgages payable. Use TEDC Debt Spreadsheet if necessary.

To Whom Payable/ (P) Personal (B)Business	Original Loan Amount	Original Date	Current Loan Balance	Interest Rate	Maturity Date	Monthly Payment	Type of Collateral	Past Due Y or N	To Be Paid Off By New Loan Y or N

**SECTION D – COMPANY OWNERSHIP AND MANAGEMENT:** Include ALL Proprietors, Partners, Officers, Directors, and Stockholders. 100% of ownership must be shown. Attach additional sheet if necessary.

Name and Title	Recent Bankruptcy or Credit Problems?	Home Address, City, Zip Code	% Owned

**SECTION E – PROVIDE OTHER INFORMATION THAT MAY BE USEFUL TO TEDC.**



**PERSONAL FINANCIAL STATEMENT  
7(a) / 504 LOANS AND SURETY BONDS**

**U.S. SMALL BUSINESS ADMINISTRATION**

As of \_\_\_\_\_, \_\_\_\_\_

SBA uses the information required by this Form 413 as one of a number of data sources in analyzing the repayment ability and creditworthiness of an application for an SBA guaranteed 7(a) or 504 loan or, with respect to a surety bond, to assist in recovery in the event that the contractor defaults on the contract. Submission of this information is required as part of your application for assistance. Failure to provide the information would impact the agency's decision on your application.

Complete this form for: (1) each proprietor; (2) general partner; (3) managing member of a limited liability company (LLC); (4) each owner of 20% or more of the equity of the Applicant (including the assets of the owner's spouse and any minor children); and (5) any person providing a guaranty on the loan

**Return completed form to:**

**For 7(a) loans:** the Lender processing the application for SBA guaranty

**For 504 loans:** the Certified Development Company (CDC) processing the application for SBA guaranty

**For Surety Bonds:** the Surety Company or Agent processing the application for surety bond guarantee

<b>Name</b>	<b>Business Phone</b>
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<b>Home Address</b>	<b>Home Phone</b>
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<b>City, State, &amp; Zip Code</b>
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<b>Business Name of Applicant</b>
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ASSETS	(Omit Cents)	LIABILITIES	(Omit Cents)
Cash on Hand & in banks.....	\$ _____	Accounts Payable.....	\$ _____
Savings Accounts.....	\$ _____	Notes Payable to Banks and Others.....	\$ _____
IRA or Other Retirement Account.....	\$ _____	(Describe in Section 2)	
(Describe in Section 5)		Installment Account (Auto).....	\$ _____
Accounts & Notes Receivable.....	\$ _____	Mo. Payments \$ _____	
(Describe in Section 5)		Installment Account (Other).....	\$ _____
Life Insurance – Cash Surrender Value Only.....	\$ _____	Mo. Payments \$ _____	
(Describe in Section 8)		Loan(s) Against Life Insurance.....	\$ _____
Stocks and Bonds.....	\$ _____	Mortgages on Real Estate.....	\$ _____
(Describe in Section 3)		(Describe in Section 4)	
Real Estate.....	\$ _____	Unpaid Taxes.....	\$ _____
(Describe in Section 4)		(Describe in Section 6)	
Automobiles.....	\$ _____	Other Liabilities.....	\$ _____
(Describe in Section 5, and include		(Describe in Section 7)	
Year/Make/Model)		Total Liabilities.....	\$ _____
Other Personal Property.....	\$ _____	Net Worth.....	\$ _____
(Describe in Section 5)			
Other Assets.....	\$ _____		
(Describe in Section 5)		<b>Total</b>	<b>\$ _____</b>
<b>Total</b>	<b>\$ _____</b>	*Must equal total in assets column.	

Section 1. Source 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.....

<b>Description of Other Income in Section 1.</b>

\*Alimony or child support payments should not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

**Section 2. Notes Payable to Banks and Others.** (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)

Names and Addresses of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

**Section 3. Stocks and Bonds.** (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)

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

**Section 4. Real Estate Owned.** (List each parcel separately. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed.)

	Property A	Property B	Property C
Type of Real Estate (e.g. Primary Residence, Other Residence, Rental Property, Land, etc.)			
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Month/Year			
Status of Mortgage			

**Section 5. Other Personal Property and 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.)

**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.)

**Section 7. Other Liabilities.** (Describe in detail.)

**Section 8. Life Insurance Held.** (Give face amount and cash surrender value of policies – name of insurance company and Beneficiaries.)

I authorize the SBA/Lender/Surety Company to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness.

**CERTIFICATION:** (to be completed by each person submitting the information requested on this form and the spouse of any 20% or more owner when spousal assets are included)

By signing this form, I certify under penalty of criminal prosecution that all information on this form and any additional supporting information submitted with this form is true and complete to the best of my knowledge. I understand that SBA or its participating Lenders or Certified Development Companies or Surety Companies will rely on this information when making decisions regarding an application for a loan or a surety bond. I further certify that I have read the attached statements required by law and executive order.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

Social Security No. \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

Social Security No. \_\_\_\_\_

**NOTICE TO LOAN AND SURETY BOND APPLICANTS: CRIMINAL PENALTIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:**

Knowingly making a false statement on this form is a violation of Federal law and could result in criminal prosecution, significant civil penalties, and a denial of your loan or surety bond application. A false statement is punishable under 18 U.S.C. §§ 1001 and 3571 by imprisonment of not more than five years and/or a fine of up to \$250,000; under 15 U.S.C. § 645 by imprisonment of not more than two years and/or a fine of not more than \$5,000; and, if submitted to a Federally-insured institution, a false statement is punishable under 18 U.S.C. § 1014 by imprisonment of not more than thirty years and/or a fine of not more than \$1,000,000. Additionally, false statements can lead to treble damages and civil penalties under the False Claims Act, 31 U.S.C. § 3729, and other administrative remedies including suspension and debarment.

PLEASE NOTE: According to the Paperwork Reduction Act, you are not required to respond to this request for information unless it displays a valid OMB Control Number. The estimated average burden hours for the completion of this form is 1.5 hours per response. If you have questions or comments concerning this estimate or any other aspect of this information collection, please contact: Director, Records Management Division, Small Business Administration, 409 Third Street SW, Washington, D.C. 20416, and SBA Desk Officer, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, D.C. 20503. PLEASE DO NOT SEND COMPLETED FORMS TO OMB.