



Dear Prospective Borrower,

Thank you for your interest in applying for a small business loan with TEDC. We are a mission-based, non-profit, community development financial institution formed in 1979 as a catalyst for economic development. We drive success through diverse loan options for small businesses to help entrepreneurs start or expand a company.

To conduct a preliminary review of your request, please submit the items listed below:

- TEDC Authorization and Application (attached)
- Personal History Statement (attached)
- Personal Financial Statement (attached)
- Personal Resume for each owner/guarantor
- For Start-ups: Detailed Business Plan with 3 years of financial projections (1st year detailed by month)
- Personal Federal Tax Returns of each owner/guarantor for 3 years
- Business Balance Sheet and Income Statement dated within 60 days of application
- Business Balance Sheet and Income Statement for last 3 years
- Business Federal Tax Returns for last 3 years
- \$35 Credit Report/Application Fee for each 20% owner or guarantor

The above documents may be submitted electronically to: loans@tedcnet.com; by mail to: TEDC, P.O. Box 3625, Tulsa, OK 74101; or in person at the TEDC offices. Office hours are Monday-Friday 9am-5pm or call (918) 585-8332 to schedule an appointment. You can also visit our website (www.tedcnet.com) for additional information.

Sincerely,

Rose M. Washington
TEDC Chief Executive Officer

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

TEDC Creative Capital is a service of Tulsa Economic Development Corporation.

125 W 3rd St, 2nd Floor • Tulsa, OK 74103-3427 • (918) 585-8332 • Page 1 of 1

www.TEDCnet.com

info@TEDCnet.com

TEDC is an equal opportunity lender and service provider.

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.

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

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

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.



United States of America
SMALL BUSINESS ADMINISTRATION
STATEMENT OF PERSONAL HISTORY

Please Read Carefully and Fully Complete: SBA uses Form 912 as one part of its assessment of program eligibility. Please reference SBA Regulations and Standard Operating Procedures if you have any questions about who must submit this form and where to submit it. For further information, please call SBA's Answer Desk at 1-800-U-ASK-SBA (1-800-827-5722), or check SBA's website at www.sba.gov. **DO NOT SEND COMPLETED FORMS TO OMB as this will delay the processing of your application; send forms to the address provided by your lender or SBA representative.**

1a. Name and Address of Applicant (Firm Name)(Street, City, State, ZIP Code and E-mail)	SBA District/Disaster Area Office	
	Amount Applied for (when applicable)	File No. (if known)
1b. Personal Statement of: (State name in full, if no middle name, state (NMN), or if initial only, indicate initial.) List all former names used, and dates each name was used. Use separate sheet if necessary. First _____ Middle _____ Last _____	2. Give the percentage of ownership in the small business	Social Security No.
	3. Date of Birth (Month, day, and year)	
	4. Place of Birth: (City & State or Foreign Country)	

If applicable, Name and Address of participating lender or surety co.	5. U.S. Citizen? <input type="checkbox"/> YES <input type="checkbox"/> NO INITIALS: _____ If no, are you a Lawful Permanent resident alien? <input type="checkbox"/> YES <input type="checkbox"/> NO Alien Registration number _____ If no, country of citizenship: _____
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6. Present residence address: From: To: Address: Home Telephone No. (Include Area Code): Business Telephone No. (Include Area Code):	Most recent prior address (omit if over 10 years ago): From: To: Address:
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PLEASE SEE REVERSE SIDE FOR EXPLANATION REGARDING DISCLOSURE OF INFORMATION AND THE USES OF SUCH INFORMATION.

YOU MUST INITIAL YOUR RESPONSES TO QUESTIONS 5,7,8 AND 9.

IF YOU ANSWER "YES" TO 7, 8, OR 9, YOU MUST FURNISH DETAILS ON A SEPARATE SHEET. INCLUDE DATES, LOCATION, FINES, SENTENCES, MISDEMEANOR OR FELONY, DATES OF PAROLE/PROBATION, UNPAID FINES OR PENALTIES, NAME(S) UNDER WHICH CHARGED, AND ANY OTHER PERTINENT INFORMATION. AN ARREST OR CONVICTION RECORD WILL NOT NECESSARILY DISQUALIFY YOU; HOWEVER, AN UNTRUTHFUL ANSWER WILL CAUSE YOUR APPLICATION TO BE DENIED AND SUBJECT YOU TO OTHER PENALTIES AS NOTED BELOW.

7. Are you presently subject to an indictment, criminal information, arraignment, or other means by which formal criminal charges are brought in any jurisdiction? <input type="checkbox"/> Yes <input type="checkbox"/> No INITIALS: _____

8. Have you <u>been</u> arrested in the past six months for any criminal offense? <input type="checkbox"/> Yes <input type="checkbox"/> No INITIALS: _____
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9. For any <u>criminal</u> offense – other than a minor vehicle violation – have you ever: 1) been convicted; 2) pleaded guilty; 3) pleaded nolo contendere; 4) been placed on pretrial diversion or 5) been placed on any form of parole or probation (including probation before judgment). <input type="checkbox"/> Yes <input type="checkbox"/> No INITIALS: _____
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10. I authorize the Small Business Administration to request criminal record information about me from criminal justice agencies for the purpose of determining my eligibility for programs authorized by the Small Business Act and the Small Business Investment Act.

CAUTION - PENALTIES 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, surety bond, or other program participation. A false statement is punishable under 18 USC 1001 and 3571 by imprisonment of not more than five years and/or a fine of up to \$250,000; under 15 USC 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, under 18 USC 1014 by imprisonment of not more than thirty years and/or a fine of not more than \$1,000,000.

Signature	Title	Date
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Agency Use Only 11. <input type="checkbox"/> Fingerprints Waived _____ Date _____ Approving Authority _____ <input type="checkbox"/> Fingerprints Required _____ Date _____ Approving Authority _____ Date Sent to OPS _____		12. <input type="checkbox"/> Cleared for Processing _____ Date _____ Approving Authority _____ 13. <input type="checkbox"/> Request a Character Evaluation _____ Date _____ Approving Authority _____ (Required whenever 7, 8 or 9 are answered "yes" even if cleared for processing.)
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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 guaranty

Name		Business Phone	
Home Address		Home Phone	
City, State, & Zip Code			
Business Name of Applicant			
ASSETS		LIABILITIES	
(Omit Cents)		(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 Year/Make/Model)		(Describe in Section 7)	
Other Personal Property.....	\$ _____	Total Liabilities.....	\$ _____
(Describe in Section 5)		Net Worth.....	\$ _____
Other Assets.....	\$ _____		
(Describe in Section 5)		Total	\$ _____
Total		*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.....	\$ _____
Description of Other Income in Section 1.			

*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.