



**ARNOLD ECONOMIC
DEVELOPMENT CORPORATION**

**APPLICATION
FOR
ECONOMIC DEVELOPMENT FUNDS**

Application Instructions for Economic Development Funds

PART 1—GENERAL INFORMATION

Enter applicant name and contact information, federal tax ID number or Social Security number, application type, and amount of funds requested. *Must also provide a current credit report with a FICO score for each applicant. ALL information is required to consider application.

PART 2—PROJECT SUMMARY

Provide a brief description of the project for which funds are requested.

PART 3—BUSINESS IDENTIFICATION

Provide name of business, owners/partners, type and classification of business, proposed location, affiliated companies, and other business interests held by all owners.

PART 4—EMPLOYMENT

List number of current and proposed full-time and part-time employees. Provide type of positions with either an hourly wage or annual wage.

PART 5—PROJECT FINANCING

Designate if funds requested are in the form of a loan or grant. Separate out project costs by category, indicate where the requested funds will be used, and the source of funding for each. Total costs at bottom.

PART 6—REFERENCES

Provide current bank information, identify all sources of financial backing for your project, and list at least two business references such as suppliers or clients. Copy this page if necessary.

PART 7—PROJECT DETAILS/PROJECTIONS

You do not need to fill out this section if you attach a business plan (completion of a written business plan is strongly recommended).

Provide a description of the current and/or proposed product line(s) or service(s), and as applicable, a description of: methods of production, product, or service development status; development timetable; long-term development; strategy; performance data/projections; and patents or license agreements.

PART 8—GOVERNMENT MONITORING

The Federal government will be monitoring our revolving loan fund applications to ensure application approvals/denials were not based on discrimination. You do not have to supply this information; however, if you do not, we are required to fill it in for you based upon our observations.

PART 9—CERTIFYING OFFICIAL(S)

By signing this section, the applicant verifies all information to be true and correct and agrees to comply with all application and loan guidelines. You also grant the Arnold Economic Development Corporation to verify your data and credit. All financial information will be held confidential and will not be reviewed by the public. Signature, printed name, and date must be provided by each owner/partner.

****LOAN APPLICATION FEE - \$85.00**

SUBMIT THE ENTIRE APPLICATION AND ANY SUPPORTING DOCUMENTS TO:

Arnold Economic Development Corporation
109 North Walnut Street ■ PO Box 376
Arnold, NE 69120
Phone/Fax: (308) 848-2211
aedc@gpcom.net

APPLICATION FOR ECONOMIC DEVELOPMENT FUNDS

AEDC and LB840 Loan and Grant Program

| AEDC USE ONLY | |
|----------------|--|
| Application ID | |
| Date Received | |

PART 1—GENERAL INFORMATION

Applicant Name:

Mailing Address:

City, State, Zip:

Phone Number:

Fax Number:

E-Mail Address:

Web Address:

Federal Tax ID or SSN:

Contact Person:

Application Type: Individual Joint *(copy this page and fill out Part 1 for each applicant)*

Total Amount/Cost of Project: Amount of Funds Requested:

PART 2—PROJECT SUMMARY *(Brief description of the project for which funds are requested)*

PART 3—BUSINESS IDENTIFICATION

Name of Business:

Mailing Address:

City, State, Zip:

Phone Number:

Fax Number:

Contact Person:

E-Mail Address:

Federal Tax ID or SSN:

Web Address :

Business Organization: Proprietorship Partnership Corporation Other _____

Ownership Identification:

Name _____ Title _____ Ownership % _____

Business Type: Startup Business Buyout Relocation
 Existing/Expansion Spec Bldg Other _____

Business Classification: Tourism Manufacturing Agricultural
 Retail Administrative Service-Related
 Medical Transportation Other _____

Project Location: Within City Limits Outside City Limits _____ Miles Located in Custer Co.

Zoning Action Required? Yes No In a Flood Plain

Affiliated Business:

Does the company have a parent or subsidiary? Yes No

Name: _____

Address: _____

City, State, Zip: _____

Web Address: _____

Other Business Interests:

Do the owners of the company have an ownership interest in any other company? Yes No

Name _____ Relationship _____ Ownership % _____

Name _____ Relationship _____ Ownership % _____

Name _____ Relationship _____ Ownership % _____

PART 4—EMPLOYMENT

Current Number of Employees: Full Time _____ Part Time _____

Proposed Number of Employees: Full Time _____ Part Time _____

Average Wage of Employees: (specify hourly or annually)

Position _____ Wage _____

Employee Benefits: Health Insurance Paid Sick Leave Dental or Vision Insurance
 Retirement Plan Bonus or Commission Other _____
 Paid Vacation Disability Insurance _____

PART 5—PROJECT FINANCING

Form of Funds Requested: Short-Term Loan (up to 2 years) Long-Term Loan (2+ years) Grant

| | Total Cost | Funds Requested | Source of Funds |
|------------------------|------------|-----------------|-----------------|
| Land Purchase/Rent | \$ _____ | \$ _____ | _____ |
| Building Purchase/Rent | \$ _____ | \$ _____ | _____ |
| New Construction | \$ _____ | \$ _____ | _____ |
| Renovation/Remodel | \$ _____ | \$ _____ | _____ |
| Furniture/Equipment | \$ _____ | \$ _____ | _____ |
| Inventory for Resale | \$ _____ | \$ _____ | _____ |
| Employee Training | \$ _____ | \$ _____ | _____ |
| Working Capital | \$ _____ | \$ _____ | _____ |
| Other _____ | \$ _____ | \$ _____ | _____ |
| Total Costs | \$ _____ | \$ _____ | |

PART 6—REFERENCES *(must identify all parties with financial participation in the project)*

Financial Institution #1:

Name: _____ Location: _____

Contact Person: _____ Title: _____

Phone Number: _____ E-Mail: _____

Financial Institution #2:

Name: _____ Location: _____

Contact Person: _____ Title: _____

Phone Number: _____ E-Mail: _____

Other Financing Sources or Investment Capital #1:

Name: _____ Location: _____

Contact Person: _____ Title: _____

Phone Number: _____ E-Mail: _____

Other Financing Sources or Investment Capital #2:

Name: _____ Location: _____

Contact Person: _____ Title: _____

Phone Number: _____ E-Mail: _____

Other Financing Sources or Investment Capital #3:

Name: _____ Location: _____

Contact Person: _____ Title: _____

Phone Number: _____ E-Mail: _____

Business References #1:

Name: _____ Location: _____

Contact Person: _____ Title: _____

Phone Number: _____ E-Mail: _____

Business References #2:

Name: _____ Location: _____

Contact Person: _____ Title: _____

Phone Number: _____ E-Mail: _____

PART 7—PROJECT DETAILS/PROJECTIONS *(or attach business plan)*

Provide a description of the current and/or proposed product line(s) or service(s), and as applicable, a description of: methods of production; product, or service development status; development timetable; long-term development; strategy; performance data/projections; and patents or license agreements.

PART 8—GOVERNMENT MONITORING PURPOSES

The following information is requested by the Federal government in order to monitor the grantee's compliance with equal credit opportunity and nondiscrimination requirements. You are not required to furnish this information but are encouraged to do so. The law provides that a grantee may neither discriminate on the basis of this information or on whether you choose to furnish it. However, if you choose not to furnish it, under Federal regulations, this grantee is required to note race and sex on the basis of visual observation or surname. If you do not wish to furnish the information, please check the box below.

I do not wish to furnish this information

| | | |
|--|--|--------------------------------|
| Race/National Origin: <i>(select one or more)</i> | <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Asian |
| | <input type="checkbox"/> Native Hawaiian or Other Pacific Islander | <input type="checkbox"/> White |
| | <input type="checkbox"/> Black or African American | |

| | |
|------------|---|
| Ethnicity: | <input type="checkbox"/> Hispanic or Latino |
| | <input type="checkbox"/> Not Hispanic or Latino |

| | |
|------|---------------------------------|
| Sex: | <input type="checkbox"/> Male |
| | <input type="checkbox"/> Female |

If applicant did not furnish this information, grantee employee fill in as observed. Employee initials: _____

In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, religion, age, disability, or marital or family status. (Not all prohibited bases apply to all programs.)

To file a complaint of discrimination, contact:

U.S. Department of Agriculture
Director, Office of Civil Rights
1400 Independence Avenue SW
Washington, DC 20250-9410
(800) 795-3272 (voice)
(202) 720-6382 (TDD)

USDA is an Equal Opportunity Provider and Employer.

PART 9—CERTIFYING OFFICIAL(S)

To the best of my knowledge and belief, data and information in this application are true and correct, including any commitment of local or other resources. The applicant(s) agrees to comply with all requirements governing the use of AEDC and/or LB840 tax funds. The applicant(s) grant the Arnold Economic Development Corporation permission to verify my data and credit. The financial status of the business or applicant(s) shall be held confidential by the loan committee and is not subject to review by the public.

Signature of Applicant: _____ Date: _____

Printed Name and Title: _____

IF JOINT APPLICANT(S), PLEASE COMPLETE BELOW

Signature of Joint Applicant: _____ Date: _____

Printed Name and Title: _____

Signature of Joint Applicant: _____ Date: _____

Printed Name and Title: _____

Signature of Joint Applicant: _____ Date: _____

Printed Name and Title: _____

AEDC USE ONLY

Date Application and Supporting Documents Received:

Application Approved by Loan Committee: Yes No Date: _____

Loan/Grant Approved by AEDC Board: Yes No Date: _____

Loan/Grant Approved by Village Board, if applicable: Yes No Date: _____

Loan Approved by USDA, if applicable: Yes No Date: _____

If Not Approved, See Denial Form for Reasons

Approved Amount and Terms: