



Loan Application

The information you provide in this application will be held strictly confidential. This application will expire 60 days after submission. Please fill out the application completely; incomplete applications will not be considered.

****This application must be submitted with a copy of your Drivers License or State-Issued ID in order to be processed.**

1 - Contact Information

Legal Name of Business/DBA _____

Name(s) of Partners who own 20% or more interest _____

Business Phone # _____ Fax # _____

Business Address _____

City _____ State _____ Zip Code _____ Web Address _____

Borrower's Name _____ Home Phone # _____

Home Address _____ Apt. # _____

City _____ State _____ Zip Code _____ E-Mail _____

Work Phone # _____ Cell Phone # _____

Drivers License # _____ Marital Status: Married Unmarried Separated

License Plate # _____ License Plate # _____ License Plate # _____

Social Security # _____ Date of Birth _____ / _____ / _____

Previous Address (if less than 1 year at current address): _____

2 - Business Information

What is the structure of your business? Individual / Partnership / Corporation / Non-Profit/ Unknown

Description of business activity _____

How long have you been in business? Yrs: _____ Months: _____ Years of experience _____

If in business longer than 6 months: Sales in best month: \$ _____ Month: _____

Sales in worst month: \$ _____ Month: _____

Is your business seasonal? Yes No

Where does the business get its raw materials or supplies? _____

How do you pay for them? Credit Cash Net 30/ 60/ 90 Other (explain): _____

Business Location: Storefront / Home / Office / Street / Other Status: Rent Own Other

3 - Loan Request Information

Approximate monthly payment you would feel comfortable with: \$ _____

Purpose of Loan (please break down purpose of loan by cost)	Dollar Amount
	\$
	\$
	\$
TOTAL LOAN REQUEST	\$

What is the minimum loan amount you can work with and what will the purpose be?

Purpose of Minimum Loan (please break down purpose of loan by cost)	Dollar Amount
	\$
	\$
	\$
	\$
TOTAL MINIMUM LOAN REQUEST	\$

4 – Landlord Information

Housing Status: Rent Own Other (describe): _____

Home Landlord's Name: _____ Landlord phone # _____

Time at current residence: Years: _____ Months: _____ Landlord fax # _____

Business Location Status: Rent Own Other (describe): _____

Business Landlord's Name: _____ Landlord phone # _____

Time at current location: Years: _____ Months: _____ Landlord fax # _____

5 – Employment Information

If employed, Name of Employer _____

Address _____ City _____ State _____ Zip code _____

Your position _____ How long have you worked there? _____

Who is your supervisor? _____ Supervisor's phone # _____

6 – Financial Information

Business Assets (materials, inventory, machinery, accounts receivable, furniture, fixtures, vehicles, etc.)			
Item and Description	Purchase Date	Estimated Value	Own Free and Clear
		\$	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
		\$	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
		\$	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
		\$	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
		\$	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
		\$	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
TOTAL		\$	<input type="checkbox"/> Yes/ <input type="checkbox"/> No

Business Liabilities	Creditor Name	Monthly Payment	Total Balance
Loan Payment		\$	\$
Supplier Credit		\$	\$
Business Vehicle		\$	\$
Auto/Equipment Lease		\$	\$
Loans from Family/Friends		\$	\$
Credit Card/ Other		\$	\$
TOTAL			\$

What collateral will be used to secure this loan?

Chicago Neighborhood Initiatives Micro Finance Group requires 125% collateral OR 50% collateral and a qualified cosigner on all loans. Eligible collateral includes: equity in personal or commercial real estate, personal or business vehicles owned free and clear, and business assets.

Item and Description	Resale Value	Own Free and Clear
	\$	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
	\$	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
	\$	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
	\$	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
	\$	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
	\$	<input type="checkbox"/> Yes/ <input type="checkbox"/> No

Household Financial Information

MONTHLY INCOME		MONTHLY EXPENSES	
Applicant's employment income	\$	Home mortgage/ rent	\$
Take home pay from business	\$	Food & clothing	\$
Spouse/ family income	\$	Utilities	\$
Social Security	\$	Telephone/ cell/ internet	\$
Public Assistance	\$	Insurance (life, health, property)	\$
Disability	\$	Alimony/ child support/ Education/ child care	\$
Alimony/ child support	\$	Personal Credit Card Payments	\$
Rental income	\$	Insurance, gasoline, miscellaneous	\$
Other income (specify)	\$	Vehicle and other loan payments	\$
TOTAL INCOME	\$	TOTAL EXPENSES	\$
TOTAL HOUSEHOLD NET INCOME (Total Income minus Total Expenses) =			\$

Business Financial Information

Actual Projected*

MONTHLY INCOME		MONTHLY EXPENSES	
Gross monthly sales	\$	COGS - Raw materials/ merchandise	\$
Any other income	\$	Marketing/ advertising	\$
	\$	Owner's salary	\$
	\$	Employee's salaries/ labor	\$
	\$	Business mortgage/ rent	\$
	\$	Utilities	\$
	\$	Telephone/ cell/ internet	\$
	\$	Insurance, gasoline, miscellaneous	\$
	\$	Equipment purchase/ maintenance	\$
	\$	Taxes (sales, payroll, income, other)	\$
	\$	Business credit card payments	\$
		Vehicle and other loan payments	\$
TOTAL BUSINESS INCOME	\$	TOTAL BUSINESS EXPENSES	\$
TOTAL BUSINESS NET INCOME (Total Income minus Total Expenses) =			\$

7 – Co-Borrower's Information

All business partners that own at least 20% of the business are required to sign as co-borrowers. Spouses may also be considered co-borrowers.

Co-Borrower's Name _____ Home Phone # _____
 Home Address _____ Apt. # _____
 City _____ State _____ Zip Code _____ E-Mail _____
 Work Phone # _____ Cell Phone # _____
 Drivers License # _____ Names credit could be under _____
 Social Security # _____ Date of Birth _____ / _____ / _____
 Previous Address (if less than 1 year at current address): _____

8 – Bank Account Information

Do you have a bank account? Yes No If yes, Personal Business Both
 Type of account: Checking Savings Both

9 – Credit Information

If you presently have an active bankruptcy you do not qualify for a loan under our program's guidelines. If you have successfully completed your bankruptcy plan, please provide us with your discharge papers. Thank you.

Have you ever filed for bankruptcy? Yes No Is it active? Yes No

If you presently show past due or slow pay in child support accounts OR federal or state taxes you do not qualify for a loan under our program's guidelines. If you are under a payment plan and in compliance with it, please provide us with proof of payments. Thank you.

Are you showing slow pay in child support? Yes No Can you prove that you are current? Yes No
 Are you currently past due for any taxes? Yes No Can you prove that you are current? Yes No

If you presently past-due on your mortgage, rent or vehicle account you do not qualify for a loan under our program's guidelines. If you have proof that these accounts are current, please provide supporting information. Thank you.

Are you past-due on your mortgage, rent, or vehicle accounts? Yes No

10 – Socio-Economic Information

How many years of total education do you have? _____

Veteran: Yes No Number in household including yourself: _____

Please indicate the ethnicity that best describes you. Information is for statistical use only and will not influence a loan decision. Your response is voluntary.

<input type="checkbox"/>	Alaskan Native or American Indian	<input type="checkbox"/>	African American or Black
<input type="checkbox"/>	Native Hawaiian or other Pacific Islander	<input type="checkbox"/>	Other Multi Racial
<input type="checkbox"/>	Alaskan Native or American Indian or White	<input type="checkbox"/>	Asian and White
<input type="checkbox"/>	African American or Black and White	<input type="checkbox"/>	Asian
<input type="checkbox"/>	Alaskan Native or American Indian and Black	<input type="checkbox"/>	White
<input type="checkbox"/>	Hispanic or Latino	<input type="checkbox"/>	

Please check the following box if the field best describes your status in your current household. Information is for statistical use only and will not influence a loan decision. Your response is voluntary.

Female Headed Household

11 – Referral Information

How did you hear about Chicago Neighborhood Initiatives Micro Finance Group?

12 – Business References:

1. Supplier/Customer/Other (circle one): _____

Contact Name _____ Phone # _____

Address _____

2. Supplier/Customer/ Other (circle one): _____

Contact Name _____ Phone # _____

Address _____

I attest that all of the information on this application is true. I authorize Chicago Neighborhood Initiatives Micro Finance Group to investigate and verify the above information, and contact any references regarding this application. I also authorize Chicago Neighborhood Initiatives Micro Finance Group to perform a credit check, which may include obtaining consumer and/or commercial credit reports and to exchange information about credit experience with other creditors from time to time, as authorized by law. The release of all information by Chicago Neighborhood Initiatives Micro Finance Group, in any manner, is hereby authorized whether such information is of record or not and I hereby release all persons, agencies, firms, companies, etc., from any damages resulting from such information. I understand that Chicago Neighborhood Initiatives Micro Finance Group will retain this application whether the loan is approved or denied and that I can appeal Chicago Neighborhood Initiatives Micro Finance Group decision if the loan is denied. I understand that this application will expire 60 days after submission.

Signature of Borrower: _____ Date: _____

Signature of Co-borrower: _____ Date: _____

EQUAL CREDIT OPPORTUNITY ACT

The Federal Equal Opportunity Act prohibits creditors from discriminating against applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided that the applicant has the capacity to enter into a bidding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal agency that administrates compliance with this law concerning this creditor is the Federal Trade Commission, Equal Credit Opportunity, Room 500, 633 Indiana Avenue, N.W., Washington, DC.