

LOAN APPLICATION

ORGANIZATION INFORMATION

Exact Legal Name: _____

DBA, if applicable: _____

Ministry website: _____ *TIN #:* _____

Church Phone: _____ *Church Fax:* _____

Street Address: _____

Mailing Address: _____

Pastor's Name: _____ *Date Came as Pastor:* _____

Direct Phone: _____ *Cell Phone:* _____ *Home Phone:* _____

E-Mail: _____ *Fax Number:* _____

Primary Contact: _____ *Title:* _____

Direct Phone: _____ *Cell Phone:* _____ *Home Phone:* _____

E-Mail: _____ *Fax Number:* _____

Other Contact: _____ *Title:* _____

Direct Phone: _____ *Cell Phone:* _____ *Home Phone:* _____

E-Mail: _____ *Fax Number:* _____

How did you hear about us? _____

Has your organization been involved in any litigation within the last ten years? Yes No

If yes, please explain: _____

Has your organization ever defaulted on any previous loans or other obligations? Yes No

If yes, please explain: _____

Expected Closing Date: _____

Please fill out the following table, entering the years at the top and a number or "N/A" below.

<i>Church Attendance and School Enrollment History</i>	<i>Current YTD 20__</i>	<i>Prior Year 20__ to 20__</i>	<i>2 Years Prior 20__ to 20__</i>	<i>3 Years Prior 20__ to 20__</i>
<i>Avg Weekly Church Attendance</i>				
<i>Preschool Enrollment</i>				
<i>Elementary School Enrollment</i>				
<i>Jr. Hi./Middle School Enrollment</i>				
<i>High School Enrollment</i>				

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LOAN REQUEST INFORMATION

NOTE: Please also complete Worksheet B.

Amount of Loan Request: \$ _____

Purpose of the Loan: _____

Do you currently have any other outstanding indebtedness? Yes No

If yes, please complete Worksheet D

Are you currently collecting pledges and/or donations via a formal capital fundraising campaign? Yes No

If yes, please complete Worksheet E

Has your organization ever filled out a loan application with a broker or any internet loan service? Yes No

If yes, list their name(s): _____

PROPERTY INFORMATION

Please list all properties either owned by your organization or to be acquired by your organization as a part of this loan request (attach additional pages if necessary). Include seating capacity in property description, if applicable.

Property Description: _____

Do you currently own this property or will it be purchased with loan funds? Own Purchase

Street Address: _____

City, County, State, Zip: _____

Acres: _____ No. of Buildings: _____ Square Feet of Buildings: _____

APN: _____ Value: _____

Property Description: _____

Do you currently own this property or will it be purchased with loan funds? Own Purchase

Street Address: _____

City, County, State, Zip: _____

Acres: _____ No. of Buildings: _____ Square Feet of Buildings: _____

APN: _____ Value: _____

Property Description: _____

Do you currently own this property or will it be purchased with loan funds? Own Purchase

Street Address: _____

City, County, State, Zip: _____

Acres: _____ No. of Buildings: _____ Square Feet of Buildings: _____

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Property Description: _____

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Street Address: _____

City, County, State, Zip: _____

Acres: _____ No. of Buildings: _____ Square Feet of Buildings: _____

APN: _____ Value: _____

Property Description: _____

Do you currently own this property or will it be purchased with loan funds? Own Purchase

Street Address: _____

City, County, State, Zip: _____

Acres: _____ No. of Buildings: _____ Square Feet of Buildings: _____

APN: _____ Value: _____

LOAN AUTHORIZATION

The authorized corporate officer(s) who have signed below hereby certify on behalf of the organization, that all information provided in connection with this application, including financial statements, is accurate and complete.

The organization authorizes Ministry Partners to obtain credit ratings and/or request pay-off information from the organization's lenders, creditors, loan brokers, and/or landlords. The organization also authorizes Ministry Partners to contact the organization's CPA, accounting service, real estate broker, and/or outside bookkeeper for any additional information that is required for a thorough understanding of the organization's financial statements and/or purchase contract.

Organization Name

By: _____
Authorized Corporate Officer Signature

By: _____
Authorized Corporate Officer Signature
(optional)

Printed Name

Printed Name

Title

Title

Date

Date

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WORKSHEET A LIST OF CURRENT BOARD MEMBERS

Please list all Board members, indicating any familial relationship in the appropriate space. If needed, attach additional sheets.

Name: _____
Board Title: _____
Date Joined Board: _____
Family Relation: _____
Address: _____
City, State, Zip: _____
Phone: _____
E-mail: _____
Occupation: _____

Name: _____
Board Title: _____
Date Joined Board: _____
Family Relation: _____
Address: _____
City, State, Zip: _____
Phone: _____
E-mail: _____
Occupation: _____

Name: _____
Board Title: _____
Date Joined Board: _____
Family Relation: _____
Address: _____
City, State, Zip: _____
Phone: _____
E-mail: _____
Occupation: _____

Name: _____
Board Title: _____
Date Joined Board: _____
Family Relation: _____
Address: _____
City, State, Zip: _____
Phone: _____
E-mail: _____
Occupation: _____

Name: _____
Board Title: _____
Date Joined Board: _____
Family Relation: _____
Address: _____
City, State, Zip: _____
Phone: _____
E-mail: _____
Occupation: _____

Name: _____
Board Title: _____
Date Joined Board: _____
Family Relation: _____
Address: _____
City, State, Zip: _____
Phone: _____
E-mail: _____
Occupation: _____

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WORKSHEET B
USE OF LOAN PROCEEDS

Please describe what the loan funds will be used for:

Please provide an estimate of how loan funds will be used. If "Other," describe in space provided:

<i>Refinance existing debt:</i>	\$	_____
<i>Purchase land:</i>	\$	_____
<i>Purchase building(s):</i>	\$	_____
<i>Renovation to existing building(s):</i>	\$	_____
<i>New construction:</i>	\$	_____
<i>Other</i> _____ :	\$	_____
<i>Other</i> _____ :	\$	_____
<i>Other</i> _____ :	\$	_____
<i>Other</i> _____ :	\$	_____

NOTE: If this loan is for a construction project, submit a copy of the construction contract, a detailed construction budget, the approved detailed working drawings of the project, and a copy of the construction permit.

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WORKSHEET C ENVIRONMENTAL RISK QUESTIONNAIRE

Please answer the following questions in regard to any and all property being offered as collateral for this loan.

Is the collateral property, either currently owned or being purchased, presently being used for manufacturing, packaging, processing, storage, or repair/rehab of any of the following?

Yes No

If yes, indicate by check mark in the space provided:

<input type="checkbox"/> Paint	<input type="checkbox"/> Rubber Products	<input type="checkbox"/> Wood Preservation	<input type="checkbox"/> Jewelry
<input type="checkbox"/> Pulp/Paper	<input type="checkbox"/> Petroleum Products	<input type="checkbox"/> Motor Vehicles/Parts	<input type="checkbox"/> Plastics
<input type="checkbox"/> Chemicals	<input type="checkbox"/> Glass Products	<input type="checkbox"/> Pesticides	<input type="checkbox"/> Explosives
<input type="checkbox"/> Furniture	<input type="checkbox"/> Metal Products	<input type="checkbox"/> Fertilizers	<input type="checkbox"/> Textiles

Has the collateral property, either currently owned or purchased, ever been used for or contained the following services or activities?

Yes No

If yes, indicate by check mark in the space provided:

<input type="checkbox"/> Gas Station	<input type="checkbox"/> Plant Nursery	<input type="checkbox"/> Vehicle Repair	<input type="checkbox"/> Landfill
<input type="checkbox"/> Gas Pumps	<input type="checkbox"/> Printing Facility	<input type="checkbox"/> Vehicle Painting	<input type="checkbox"/> Other Chemical
<input type="checkbox"/> Farming	<input type="checkbox"/> Dry Cleaning	<input type="checkbox"/> Photo Developing	<input type="checkbox"/> Other Industrial
<input type="checkbox"/> Junkyard	<input type="checkbox"/> Mortuary/Cemetery	<input type="checkbox"/> Waste Disposal and/or Treatment	

Has the collateral property, either currently owned or purchased, ever contained any of the following?

Yes No

If yes, indicate by check mark in the space provided:

<input type="checkbox"/> Asbestos	<input type="checkbox"/> Lead	<input type="checkbox"/> Methane Gas	<input type="checkbox"/> Fuel Storage Tanks
<input type="checkbox"/> Radon Gas	<input type="checkbox"/> Mold	<input type="checkbox"/> Other Toxic Material	(above or below ground)
<input type="checkbox"/> Pesticides	<input type="checkbox"/> Paint	<input type="checkbox"/> Herbicides	<input type="checkbox"/> Petroleum Products

Do you have any knowledge of any hazardous or toxic wastes, or of any chemical accidents or spills involving any of the properties that are adjacent to any of the collateral properties?

Yes No

Do any environmental concerns or risks exist related to surface water runoff, the water supply, well or ground water contamination, air pollution, waste disposal or other conditions related to the collateral properties that might be considered hazardous?

Yes No

Do you know of any reason why environmental concerns might affect the insurability of the collateral properties?

Yes No

Are you aware of any hazardous conditions currently or previously existing on the collateral properties and are violations of Local, State, or Federal environmental or public health laws?

Yes No

Are the collateral properties currently the subject of litigation due to environmental or public health issues, by either public agencies or private parties?

Yes No

If you answered "Yes" to any of the preceding questions, please provide on a separate sheet of paper a detailed explanation. Be sure to include the location (including address), a description of the issue, and its resolution (including documentation of resolution), if any.

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WORKSHEET D LIST OF CURRENT LOANS

Please list all mortgages, secured and unsecured notes, bond debt, leases, etc. If needed, attach additional sheets.

Name of Lender: _____
Lender Contact: _____ Phone: _____
Lender Address: _____
Original Amount: \$ _____ Date of Loan: _____ Maturity Date: _____
Current Balance: \$ _____ Interest Rate: _____ As of (date): _____
Type of Loan: _____ Monthly Payment: \$ _____
Does this loan have a pre-payment penalty? Yes No If yes, how much? \$ _____
Will this loan be paid off by the new loan being applied for? Yes No
Collateral Offered: _____

Name of Lender: _____
Lender Contact: _____ Phone: _____
Lender Address: _____
Original Amount: \$ _____ Date of Loan: _____ Maturity Date: _____
Current Balance: \$ _____ Interest Rate: _____ As of (date): _____
Type of Loan: _____ Monthly Payment: \$ _____
Does this loan have a pre-payment penalty? Yes No If yes, how much? \$ _____
Will this loan be paid off by the new loan being applied for? Yes No
Collateral Offered: _____

Name of Lender: _____
Lender Contact: _____ Phone: _____
Lender Address: _____
Original Amount: \$ _____ Date of Loan: _____ Maturity Date: _____
Current Balance: \$ _____ Interest Rate: _____ As of (date): _____
Type of Loan: _____ Monthly Payment: \$ _____
Does this loan have a pre-payment penalty? Yes No If yes, how much? \$ _____
Will this loan be paid off by the new loan being applied for? Yes No
Collateral Offered: _____

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WORKSHEET E CAPITAL CAMPAIGN QUESTIONNAIRE

Please fill out the following information regarding your capital fundraising campaign. In addition, please provide copies of any campaign brochures, pledge cards, bulletin inserts, announcements, or other information used as part of the campaign.

How is your capital campaign managed? Internally managed Managed by an outside firm

If externally managed, name of firm: _____

Campaign Name: _____ Campaign Goal: \$ _____

Date you began collecting pledges: _____ Pledge period end date: _____

What will the campaign funds be used for? _____

Is the use of the campaign funds restricted? Yes No

If yes:

What is/are the restriction(s) on campaign funds? _____

Total amount pledged: \$ _____ As of (date): _____

Total amount collected: \$ _____ As of (date): _____

Total amount spent: \$ _____ As of (date): _____

Are the campaign funds you collect accounted for separately? Yes No

Have you conducted a capital campaign before? Yes No

If yes:

Total amount pledged: \$ _____ As of (date): _____

Total amount collected: \$ _____ As of (date): _____

What are your fundraising plans, if any, after the current capital campaign ends?
