



P.O. Box 6432 ♦ Austin, TX 78762 ♦ (512) 472-8087 ♦ Fax (512) 472-8191

## PeopleFund Loan Fund Application

**Date:** \_\_\_\_\_ (Please complete the application and return it to the address above)

**Business Name:** \_\_\_\_\_

\_\_\_\_\_  
 (Street address) (City) (State) (Zip code)

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_ Mbl ph: ( ) \_\_\_\_\_ Pager: ( ) \_\_\_\_\_

Email Address: \_\_\_\_\_ Website Address: \_\_\_\_\_

**Applicant(s)/Owner(s):** (if multiple, attach information on all). Home Phone: ( ) \_\_\_\_\_

Name: \_\_\_\_\_ Txdl#: \_\_\_\_\_ SSN#: \_\_\_\_\_ Ownership%: \_\_\_\_\_

Name: \_\_\_\_\_ Txdl#: \_\_\_\_\_ SSN#: \_\_\_\_\_ Ownership%: \_\_\_\_\_

**Business Owner(s):** \_\_\_\_\_ Male \_\_\_\_\_ Female (if more than one, put appropriate amount in ea. blank)

**Ethnicity (optional):** \_\_\_\_\_ Asian \_\_\_\_\_ Anglo \_\_\_\_\_ Black \_\_\_\_\_ Hispanic \_\_\_\_\_ Native American \_\_\_\_\_ Other

**Business Structure:** \_\_\_\_\_ Proprietorship \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation \_\_\_\_\_ S-Corp.

**Have you ever filed Bankruptcy?** \_\_\_\_\_ **If yes, which type?** \_\_\_\_\_ Ch. 7 \_\_\_\_\_ Ch. 11 \_\_\_\_\_ Ch. 13 (Check One)

**Number of Employees:** **Current** \_\_\_\_\_ Full-time \_\_\_\_\_ Part-time **After loan** \_\_\_\_\_ Full-time \_\_\_\_\_ Part-time

**Years of operation under current ownership:** \_\_\_\_\_ years \_\_\_\_\_ new business

**Last year's Sales:** \$ \_\_\_\_\_ **Current Sales:** \$ \_\_\_\_\_

**How did you find out about us?** Name \_\_\_\_\_ Organization \_\_\_\_\_

Phone: ( ) \_\_\_\_\_

<b>Estimated Loan Request:</b>	Working Capital	\$ _____
	Equipment	\$ _____
	Real Estate	\$ _____
	Other	\$ _____
	<b>Total:</b>	\$ _____

**Bank of Business Account:** \_\_\_\_\_ **Contact & phone:** \_\_\_\_\_

I (we) authorize PeopleFund and/or its agents to make any investigations of credit either directly or through any agency which has credit information. I understand there is a \$15.00 owed to the PeopleFund for each credit report ordered and a \$30.00 application fee. I agree to inform the PeopleFund immediately of any matter which will cause significant changes in my financial condition. I allow the PeopleFund staff to share my business information with PeopleFund board and investment committee.

**Applicant(s) Signature:** \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

## PeopleFund Loan Fund Checklist

Dear Applicant:

Before we can begin processing your financing request, please provide the PeopleFund with the following information. ***We will also need \$15.00 to pull your credit report and \$30.00 for the application fee.***

- \_\_\_\_\_ Application and loan request amount (*use the enclosed forms*)
- \_\_\_\_\_ \$15.00 Credit Report Fee for each applicant or guarantor
- \_\_\_\_\_ \$30.00 Application Fee
- \_\_\_\_\_ Personal Financial Statements (*complete the enclosed 3 page form or provide us with your own*)
- \_\_\_\_\_ Debt Schedule (*complete enclosed form*)
- \_\_\_\_\_ 3 years Business financial statements including most current (*if in existence less than three years, then provide years of statements that apply*)
- \_\_\_\_\_ Breakdown of how requested funds will be used
- \_\_\_\_\_ Personal Tax Returns (*last three years including the most current*)
- \_\_\_\_\_ Current Accounts Receivable aging report (*if applicable to your business*)
- \_\_\_\_\_ Current Accounts Payable report
- \_\_\_\_\_ Equipment listing with cost estimate and serial numbers
- \_\_\_\_\_ Resume of management
- \_\_\_\_\_ Financial Projections (*3 years*)
- \_\_\_\_\_ Business plan
- \_\_\_\_\_ 941 Form: Employer's Quarterly Federal Tax Return
- \_\_\_\_\_ Articles of Incorporation (or for Sole Proprietors, Certificate of Assumed Name)
- \_\_\_\_\_ Other items as indicated: \_\_\_\_\_

**\*\*\*Please note all PeopleFund Clients are required to enroll in an auto debit account.**

## PERSONAL FINANCIAL STATEMENT

As of \_\_\_\_\_, 20\_\_\_\_

Complete this form if (1) a sole proprietorship; (2) a partnership by each partner; (3) a corporation by each officer and each stockholder with 20% or more ownership; (4) any other person or entity providing a guaranty on the loan.

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

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

Business name & address (of person submitting Statement) \_\_\_\_\_

<b>ASSETS</b>	<b>LIABILITIES</b>
	<i>Current Balances</i>
Cash on hand in banks	Notes Payable to banks and others
\$ _____	\$ _____
Savings Account in banks	Mortgage on real estate ( <i>Describe - Section 2</i> )
_____	_____
U.S. Government Bonds	Automobile Note
_____	_____
Accounts and Notes Receivable	Student Loans
_____	_____
Life Insurance (Cash Value)	Home Equity
_____	_____
Other Stocks and Bonds ( <i>Describe - Section 1</i> )	Loans on Life Insurance
_____	_____
Real Estate-Residential ( <i>Describe - Section 2</i> )	Unpaid Taxes
_____	_____
Automobile - Present Value	Other Liabilities ( <i>Describe - Section 4</i> )
_____	_____
Real Estate-Investment Properties	
_____	
Other Assets ( <i>Describe - Section 3</i> )	
_____	
<b>Total Assets</b>	<b>Total Liabilities</b>
\$ _____	\$ _____
<b>Net Worth</b>	<i>(total assets minus total liabilities)</i>
\$ _____	_____

**Section 1. Other Stocks and Bonds:** Give listed and unlisted Stocks and Bonds (use separate sheet if necessary)

Market Value Statement Date \_\_\_\_\_

No. of Shares	Name of Securities	Cost	Quotation	Amount
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Section 2. Real Estate owned** (List each parcel separately. Use supplemental sheets if necessary. Each sheet must be identified as a supplement to this statement and signed. Also advise whether property is covered by title insurance, abstract title, or both.)

	Property A	Property B	Property C
Type of property			
Name & address of property			
Date Purchased			
Original Cost			
Present Market Value			
Name & address of Mortgage Co.			
Account Number			
Balance			
Payment per month			
Status of Mortgage (i.e., current or delinquent)			

**Section 3. Other Assets** (Describe)

**Section 4. Other Liabilities** (Describe in detail)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# Estimated Annual Personal Cash Flow

Individual ( )

Joint ( )

## Sources of Cash

2005

2006 (Estimated)

Business Salary

Rental income

Secondary Salary: Name Employer \_\_\_\_\_

Cash distribution from business

Income tax refund

Other sources (i.e. dividends)

## Total Sources of Cash

## Uses of Cash (monthly payment x 12)

Auto note

Auto insurance

Credit card payments

Health insurance

Home Mortgage (PITI)/Rent

Income taxes

Home Equity Payment

Life Insurance

Living expenses (personal, entertainment, grocery)

Social Security taxes

Medical Expenses

Child Support

Day Care

Utilities (Gas, Electric, Cable, Phone)

Other

## Total Uses of Cash

## CASH SURPLUS / (DEFICIT)

I/We certify that the above information is true and correct for the previous and current year estimate.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applicant

\_\_\_\_\_  
Date

Note: The Personal Cash Flow Statement is meant to capture all your income and expenses (including one-time expenses like purchasing a car or home).

**PLEASE LIST ALL EXISTING BUSINESS DEBTS**  
**DEBT SCHEDULE AS OF \_\_\_\_\_**

Creditor Name/Address	Original Amount	Original Date	Present Balance	Interest Rate	Maturity Date	Monthly Payment	Security	Current or Delinquent
<b>TOTAL PRESENT BALANCE</b>				<b>TOTAL MONTHLY PAYMENTS</b>				

\*Should be the same date as current financial statement.  
 \*\*Total must agree with balance shown on current financial statement.