

# DC Certified Business Enterprise Revolving Micro Loan Fund



District of Columbia Department of Small and Local Business Development  
441 4<sup>th</sup> Street, NW Suite 970N  
Washington, DC, 20001  
Phone: 202-727-8104



Washington Area Community Investment Fund  
“A Bridge to Better Communities”

*DC Certified Business Enterprise Revolving Micro Loan Fund*

**APPLICATION**

Individual		Full Address			
Name of Applicant Business				Tax I.D. No. or SSN	
Full Street Address of Business				Tel. No. (inc. area code)	
City	County	State	ZIP	Number of Employees (Including subsidiaries and affiliates)	
Type of Business		Date Business Established		At Time of Application _____	
Describe Business: (Attach additional sheet, as needed)		List Current Employees: (Attach additional sheet, as needed)		If Loan is Approved _____	
				DC jobs created _____ Men _____ Women _____	
Bank of Business Account and Address					

**Credit Request**

<b>Total Loan Requested:</b>	<b>Loan Type:</b>	<b>Term Loan (Not to Exceed 6 years/ 72 months)</b>
\$ _____	Term Loan _____ Loan Guarantee _____	Years _____ or Months _____

**Use of Loan Proceeds**

	Loan Request		Loan Request
Contract Cash Flow Assistance		Working Capital (including Accounts Payable)	
Furniture or fixtures (acquisition/repair)		Inventory (Specify)	
Machinery and Equipment (Acquisition/Repair)		Financial management systems (e.g., Point of Sale, upgrades to meet prime contractor standards)	
Leasehold improvements		Property renovation (property owners only)	

**Please provide a brief description of project/ required purpose (please be specific):**

**BUSINESS INDEBTEDNESS:** Furnish the following information on all installment debts, contract, noted, and mortgages payable. Indicate by an asterisk (\*) items to be paid by loan proceeds and reason for paying them (present balance should agree with the latest balance sheet submitted).

To Whom Payable	Original Amount	Original Date	Present Balance	Rate of Interest	Maturity Date	Monthly Payment	Security	Current or Past Due
Acct. #	\$		\$			\$		
Acct. #	\$		\$			\$		
Acct. #	\$		\$			\$		
Acct. #	\$		\$			\$		

**Management** (Proprietor, partners, officers, directors) Use separate sheet if necessary. \*This information is for statistical purposes only. It has no bearing on the credit decision to approve or decline.

Name and Position Title	Complete Address	*Sex

Race\*: American Indian/Alaska Native  Black/African-Amer.  Asian  Native Hawaiian/Pacific Islander  White  Ethnicity\* Hisp./Latino  Not Hisp./Latino

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**Sources and Uses of Funds**

*(Enter gross dollar amount)*

	CBE-RMLF	Owner's Investment	Other Source (specify):	Other Source (specify):
	\$	\$	\$	\$
<b>TOTAL FROM EACH SOURCE</b>				

How will the use of funds improve the business?

Will the funds expand the operation? If so, how? (i.e. number of new employees, increase inventory, etc)

How will the Micro Loan benefit the business' leverage?



## Personal Financial Statement

Applicant Name:			Co-Applicant Name:		
Employer:			Employer:		
Address of Employer:			Address of Employer:		
Business Phone #:	# of Years with Employer	Title/Position	Business Phone #:	# of Years with Employer	Title/Position
Name of previous employer & position (if with current employer less than 3 years.)		# of Years	Name of previous employer & position (if with current employer less than 3 years.)		# of Years
Home Address:			Home Address:		
Home Phone #:	Social Security #	Date of Birth	Home Phone #:	Social Security #	Date of Birth
Name, Phone # of Accountant:			Name, Phone # of Accountant:		
<b>ASSETS</b> (Omit Cents)			<b>LIABILITIES</b> (omit Cents)		
Cash on hand & in Banks .....	\$ _____		Accounts Payable.....	\$ _____	
Savings Accounts .....	\$ _____		Notes payable to Banks and Others.....	\$ _____	
IRA or other Retirement Account.....	\$ _____		Installment Account (Auto).....	\$ _____	
Accounts & Notes Receivable.....	\$ _____		Mo. Payments \$ _____		
Life Insurance-Cash Surrender Value.....	\$ _____		Installment Account (Other).....	\$ _____	
Stocks and Bonds.....	\$ _____		Mo. Payments \$ _____		
Real Estate.....	\$ _____		Loan on Life insurance.....	\$ _____	
Automobile Present-Value.....	\$ _____		Mortgages on Real Estate .....	\$ _____	
Other Personal Property .....	\$ _____		Unpaid Taxes.....	\$ _____	
Other Assets. ....	\$ _____		Other Liabilities.....	\$ _____	
<b>Total</b>	\$ _____		<b>Total</b>	\$ _____	
<b>Minus Primary Residence</b>	\$ _____		<b>Minus Mortgage Primary Residence</b>	\$ _____	
<b>Total</b>	\$ _____		<b>Total</b>	\$ _____	
<b>Net Worth (Assets minus Liabilities)</b>			_____		

- *Financial Information shall be completed by all parties with greater than 15% ownership*
- *All principals must provide financial statements*

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..... \$ _____
*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted towards total income.	
Description of Other Income in Section 1.	

Section 2. Notes Payable to Banks and Others.					
Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (mthly. etc.)	How Secured Type of Collateral

Section 3. Stocks and Bonds.					
Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total value

Section 4. Real Estate Owned.			
	Property A	Property B	Property C
Type of Property			
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 whom payable, when due, and to what property, if any, attach tax lien).

**Section 7. Other Liabilities.** (Describe in detail.)

**Section 8. Life Insurance Held.** (Give face amount and cash surrender value of policies and -name of insurance company and beneficiaries).

I authorize WACIF to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. I understand FALSE statements may result in forfeiture of benefits and possible prosecution.

Signature:

Date:

Social Security Number:

Signature:

Date:

Social Security Number:

**PLEASE CONTINUE TO NEXT PAGE**

# DC Certified Business Enterprise Revolving Micro Loan Fund

## APPLICATION REQUIREMENTS

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**(Please Note: All application requirements must be  
TABBED and SUBMITTED IN ORDER as outlined below)**

**A completed CBE Revolving Micro Loan Fund (CBE-RMLF) application will include:**

1. Informational Requests

- a. Completed CBE-RMLF Intake Form including Personal Financial Statement for all principals of the business
- b. Completed CBE-RMLF Loan Application
- c. CBE Program Certification Letter
- d. \$150 Application Fee made payable to WACIF

2. Organizational Documents

- a. Articles of Incorporation or Organization
- b. Operating Agreement
- c. Organization's By-laws
- d. Certificate of Incorporation
- e. Copy of Business, Professional, and/or trade license
- f. Certificate of Occupancy
- g. Tax Certification (Clean Hands Certification from the DC Office of Tax and Revenue – OTR)
- h. Most recent Certificate of Good Standing issued by DCRA
- i. Company Profile, including executive summary, operation plan, organizational structure, marketing outline, and resumes of key personnel
- j. Lease or Deed for business site
- k. Most Recent Form UC-30 (Employer's Quarterly Contribution and Wage Report)
- l. Employee Identification Number – IRS Issuance
- m. Dun and Bradstreet (DUNS) Number
- n. Proof of Citizenship of principal owners (e.g. birth certificate, passport, or permanent resident) or legal residency documentation
- o. A copy of driver's license or DMV picture ID
- p. Borrowing Resolution

3. Financial Documents

- a. Profit & Loss for last three fiscal years and year-to-date
- b. Projected Profit & Loss for next three fiscal years
- c. Balance sheet for last three fiscal years ends
- d. Current Balance Sheet
- e. Proposed Project Budget (including Sources and Uses)
- f. Federal Tax Returns for last 3 fiscal years
- g. Personal Tax Returns for last 3 calendar years
- h. Cash flow statement for previous fiscal year
- i. Projected Cash flow statement for next fiscal year
- j. Last 3 months of business bank statements

4. Other

- a. Marketing Plan
- b. Insurance Materials
- c. Recent Appraisal or a copy Current Year Tax Assessment
- d. Environmental Survey (if applicable)
- e. Commitments for other loans/grants for the proposed projects
- f. Business Plan (Must demonstrate how loan resources will impact profitability of the business, create job opportunities, repay the loan, help to expand the business, etc.)

**Signatures (signed individually and on behalf of the business)**

By my signature I agree to comply with the approval of my loan request and to comply, whenever applicable, with the hazard insurance, lead-based paint or other limitations articulated in the loan agreement. I certify that this application and all related tax returns, schedules and other attachments are true and complete; that the loan proceeds will be used exclusively for business related purposes and that they will notify WACIF of any adverse change in their financial condition. I agree to notify WACIF of any material change in the business or the information provided.

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

By: \_\_\_\_\_  
Signature and Title

Date: \_\_\_\_\_

**Guarantors:**

\_\_\_\_\_  
Signature and Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature and Title

\_\_\_\_\_  
Date