

The Harlem Entrepreneurial Fund

Loan Application Checklist

Documents Required for Initial Review	
	Completed Loan Application with check for \$ _____ payable to HEF
	Copy of Certificate of Incorporation/Articles of Organization/Partnership Agreement/DBA Certificate
	Copy of Lease
	Copy of liability insurance for leased premises
	Business Plan
	Two year projection of Income and Expenses
	Copy of Business Bank Statements – last 12 months
	Last two years Business Tax returns (Federal, State, Local) and Financial Statements
	Financials – 1) Balance Sheet, 2) Profit and Loss Statement (Income Statement) and 3) Statement of Cash Flow
	Last three years Personal Tax returns of Principals of Business (Federal, State, Local)
	Completed Personal Financial Statements of Principals of Business (dated within 30 days)
	Completed Principal Owner and Management Personnel Forms
	Copy of Recent Personal Credit Report of Principal Owner(s)

Small Business Loan Application

With Harlem Entrepreneurial Fund

361 West 125th Street, New York, N.Y. 10027 Tel: (212) 749-0900 Fax: (212) 749-1042

INFORMATION ABOUT YOUR BUSINESS

Section 1. Applicant Information

Type of Business: <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> C Corporation <input type="checkbox"/> LLC	Date Business Established
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For Sole Proprietors or Business Individuals (Only List Individual's Name)

Name:	DBA	SSN:	-	-
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Name:	DBA	SSN:	-	-
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For Business Entities, Legal Business Name	Federal Taxpayer Identification No.
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Other Names Used By Business (dba)

Street Address	City	County	State	Zip Code
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Mailing Address (if different from Street Address)	City	County	State	Zip Code
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Business Telephone Number	Fax Number	Email Address	Primary Business Contact
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Description of Business (Product/Service Provided)	# of Employees
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Section 2. Business Bank References

Type of Account	Name of Bank/Institution/Address	Account Number	Average Monthly Balance	Age of Account/ Date Opened

Please attach copies of last three months of bank statements or other supporting documentation to evidence balances indicated in Section 2 accounts. This application will not be considered complete without supporting documentation.

Section 3. Business Debt

Please provide information on ALL BUSINESS DEBTS:

To Whom Payable	Credit Line/Term Loan	Interest Rate	Original Amount	Balance Due	Monthly Payment	Purpose

Section 4. Business Financial Statement (Most Recent Year End as of ____/____/____)

ASSETS		LIABILITIES	
Cash on Hand & in Banks	\$ _____	Accounts Payable	\$ _____
All Equipment Assets	\$ _____	Notes Payable to Banks/Others	\$ _____
Accounts & Notes Receivable	\$ _____	Installment Account (Auto) (Mo. Payments: \$ _____)	\$ _____
Stocks & Bonds	\$ _____	Installment Account (Other) (Mo. Payments: \$ _____)	\$ _____
Real Estate	\$ _____	Loan on Life Insurance	\$ _____
Vehicle(s) - Present Value <input type="checkbox"/> New <input type="checkbox"/> Used	\$ _____	Mortgages on Real Estate <input type="checkbox"/> Yes <input type="checkbox"/> No (Mo. Payments: \$ _____)	\$ _____
Other Assets (Describe in separate attached sheet)	\$ _____	Unpaid Taxes	\$ _____
Total Assets:	\$ _____	Other Liabilities	\$ _____
		Total Liabilities:	\$ _____
		Net Worth:	\$ _____

Section 5. Key Personnel and Management Team (Principal owner(s), managers, etc. Use attachments if necessary.)

Name	Home Address	Social Security Number

Are any of the above individuals (1) presently on parole or probation, or have they ever been (2) charged for any criminal offense other than a minor vehicle violation or (3) convicted, placed on pretrial diversion, or placed on any form of probation including adjudication withheld pending probation for any criminal offense other than a minor vehicle violation? Yes _____ No _____
If yes, please provide details on a separate attachment page.

Section. 6 Loan Request

Amount of Loan Request : \$ _____

What will the loan be used for:

I hereby authorize The Harlem Entrepreneurial Fund 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 obtaining a loan.

Signature: _____ Date: _____

Name (*Print*): _____

Principal Owner(s)

This form must be completed by each principal owner involved in the operation of the Applicant business entity.

Date: _____

Name:	Business Phone:
Residential Address:	Residence Phone:
City, State & Zip Code:	Social Security No.:
Business Name of Applicant:	Applicant TIN:

Previous residential address (if less than three years at current address). Please also indicate dates of residency: _____

Spouse's Name: _____ SSN: _____

Are you a United States citizen? Yes _____ No _____ if not, give your alien registration number _____

Have you ever been involved in any lawsuit? If so, please explain nature of lawsuit and its present status _____

Have you, your spouse or any member of your management team ever been involved in bankruptcy or insolvency proceedings?
 Yes _____ No _____ If yes, please furnish details in a separate attachment.

Education			
Name/Location of College, Technical or Vocational Training	Dates of Attendance	Major	Degree/Certificate Received

Work Experience

List work experience in reverse chronological order, beginning with present employment

Company Name/Location _____

Dates of Employment: _____ Title _____

Duties _____

Company Name/Location _____

Dates of Employment: _____ Title _____

Duties _____

Company Name/Location _____

Dates of Employment: _____ Title _____

Duties _____

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Signature: _____ Date: _____

Name (*Print*): _____

Key Management Personnel

This form should be completed by each manager or key personnel involved in the operation of the Applicant business entity.

Date: _____

Name:	Business Phone:
Residential Address:	Residence Phone:
City, State & Zip Code:	Social Security No.:
Business Name of Applicant:	Applicant TIN:

Previous residential address (if less than three years at current address). Please also indicate dates of residency: _____

Spouse's Name: _____ SSN: _____

Are you a United States citizen? Yes No if not, give your alien registration number _____

Have you ever been involved in any lawsuit? If so, please explain nature of lawsuit and its present status _____

Have you or your spouse ever been involved in bankruptcy or insolvency proceedings?
 Yes No If yes, please furnish details in a separate attachment.

Education			
Name/Location of College, Technical or Vocational Training	Dates of Attendance	Major	Degree/Certificate Received

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Dates of Employment: _____ Title _____
Duties _____

Company Name/Location _____

Dates of Employment: _____ Title _____

Duties _____

Company Name/Location _____

Dates of Employment: _____ Title _____

Duties _____

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Signature: _____ Date: _____

Name (*Print*): _____

Section 2. Notes Payable to Bank and Others (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)

Name and Address of Note holder(s)	Original Balance	Current Balance	Payment Amount	Frequency (Monthly?)	Security or Collateral?

Section 3. Stocks and Bonds (Use attachments if necessary.)

Name of Brokerage Firm:

Account Number:

Address:

Number of Shares/Bonds	Name of Securities	Total Cost	Total Market Value	Date of Quotation

Section 4. Real Estate Owned

	Property 1	Property 2	Property 3
Type of Property			
Address	Street	Street	Street
	City/State/Zip Code	City/State/Zip Code	City/State/Zip Code
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder	Name	Name	Name
	Street	Street	Street
	City/State/Zip Code	City/State/Zip Code	City/State/Zip Code
Mortgage Account No.			
Mortgage Balance			
Monthly Payment			
Mortgage Current? (Y/N)			

Section 5. Other Personal Property and Other Assets

Property Type:	Lien Holder:	Lien Holder Address:	\$ Amt of Lien

Section 6. Unpaid Taxes (Describe in detail as to type, to whom payable, when due, amount due and

Section 7. Other Liabilities (Describe in detail.)

Section 8. Life Insurance Held (Give face amount and cash surrender value of policies)

Name of Insurance Company:	
Policy No.:	
Address of Insurance Company:	
Beneficiaries:	
Face Amount: \$	Cash Surrender Value: \$

Section 9. Bank Accounts (Describe in detail.)

Name of Bank	Bank Address	Account Balance	Account No.	Type of Account

I authorize HEF to make inquiries as necessary to verify the accuracy of the statements made to determine my creditworthiness. I certify the above information and the statements contained in attachments are true and accurate as of the date indicated. This information is being made available for the purpose of obtaining a business loan.

Signature:	Spouse Signature:
Social Security Number:	Social Security Number:
Date:	Date: