



Loan Application
Form

Personal Information of Applicant(s)

(Complete this section for each application as applicable)

Last Name:		First Name:		Middle Name:
Home Address:				
Town/Region:			Postal Code:	
Home Phone:	Business Phone:		Cell:	
Email:	SIN:		Driver's License #:	
Date of Birth:	MM	DD	YY	
Do you rent or own your home? <input type="radio"/> Rent <input type="radio"/> Own			How long at the above address?	
Please provide previous address if current address is less than 3 years:				
Previous Address:				
Town/Region:			Postal Code:	
Are You: (check all that apply)	<input type="radio"/> A Canadian Citizen		<input type="radio"/> Aboriginal	
	<input type="radio"/> On a Disability Subsidy		<input type="radio"/> Disabled	
	<input type="radio"/> Immigrant/Permanent Resident		<input type="radio"/> On Employment Insurance	
Are You: (check all that apply)	<input type="radio"/> Single		<input type="radio"/> Divorced	
	<input type="radio"/> Married		<input type="radio"/> Separated	
	<input type="radio"/> Dependants: (Describe)			

Employment & Education History for Applicant

Current/most recent Employers Name:		
Employer's Phone:	Annual Income: \$	
Position:	Length of time employed:	
Previous Employer (if less then 2 years at current):		
Employer's Phone:	Annual Income: \$	
Position:	Length of time employed:	
Education:	<input type="radio"/> Some Secondary	<input type="radio"/> Post Secondary and Degree
	<input type="radio"/> Post Secondary and Diploma	<input type="radio"/> Some Post Secondary
	<input type="radio"/> Complete Secondary	<input type="radio"/> Other (described below)
Comments:		

Spouse/Common Law Information

Last Name:	First Name:	Middle Name:
Date of Birth: MM DD YY	SIN:	Driver's License #:
Current/most recent Employers Name:		
Employer's Phone:	Annual Income: \$	
Position:	Length of time employed:	

Loan Information

The APPLICANT HEREBY Applies to Community Futures (the "Corporation") for financing of

\$ _____

Financing Requirements

Land \$ _____
 Building/Leasehold \$ _____
 Equipment \$ _____
 Working Capital \$ _____
 _____ \$ _____
 Other (specify) _____
TOTAL \$ _____

Financing Sources

CFDC Loan \$ _____
 Investment by Owner \$ _____
 Chartered Bank \$ _____
 Friends/Family \$ _____
 _____ \$ _____
 Other (specify) _____
TOTAL \$ _____

Business Information

List the name(s) and percentage of shares of all Principal owner(s) of the business:

First Name	Last Name:	% of Shares	Telephone #:

Type of Business (please check all that apply)

<input type="checkbox"/> Home Based	<input type="checkbox"/> Start-up	<input type="checkbox"/> Retail	<input type="checkbox"/> Tourism
<input type="checkbox"/> Proprietorship	<input type="checkbox"/> Existing	<input type="checkbox"/> Service	<input type="checkbox"/> Construction
<input type="checkbox"/> Incorporation	<input type="checkbox"/> Full Time	<input type="checkbox"/> Oil & Gas	
<input type="checkbox"/> Non-Profit	<input type="checkbox"/> Part Time	<input type="checkbox"/> Manufacturing	
<input type="checkbox"/> Partnership		<input type="checkbox"/> Forestry	
<input type="checkbox"/> Co-op		<input type="checkbox"/> Agriculture	

Business has been operating since:

Business Fiscal year end is/will be:

Business Contact Information

Legal Business Name:		
Business Number:	WCB #:	Incorporation #:
Physical Address:	Town:	Postal Code:
Telephone:	Fax:	Email:
Mailing address if different from above:		
This Business will create/maintain:		
#Full Time Employees		#Part Time Employees

Has a partnership agreement been completed?

Yes

No

If yes, please attach a copy of the agreement.

Personal Financial Information

Statement of Personal Income & Expenditures

MONTHLY INCOME	
Your monthly household income (after taxes) from employment	\$
Other income sources to the household including:	
Rental Income	\$
Child Support	\$
Alimony	\$
Other (specify) _____	\$
TOTAL monthly income to the household from all sources:	\$

MONTHLY EXPENSES	
Mortgage or rent payment (include insurance and property taxes)	\$
Grocery Expenses	\$
Utilities (telephone, heat, electricity, etc.)	\$
Transportation (gas, insurance, etc.)	\$
Insurance (life, disability, critical illness, etc.)	\$
Education and Child Care Expenses	\$
Entertainment/Hobbies	\$
Debt Payments (bank loans, credit cards, family loans, etc.)	\$
Other: _____	\$
TOTAL monthly expenses:	\$
Total Monthly Savings per month (Total Income less Total Expenses)	\$

Comments:

Statement of Net Worth

ASSETS (PERSONAL)

Cash Holdings	Bank	Branch	Amount
			\$
			\$
			\$

Real Estate Owned	Address/Legal Description	Registered Owners	Year Purchased	Purchase Price	Present Value
				\$	\$
				\$	\$
				\$	\$

ASSETS	Year, Make, Model	Purchase Price	Owner's on Title	Present Value
Automobile				\$
Automobile				\$
Other (Boat, RV)				\$

OTHER ASSETS	Amount
RRSP's	\$
Stocks, Bonds, etc.	\$
Life Insurance (cash surrender value)	\$
Household Effects	\$
Other Assets (specify type)	\$
TOTAL VALUE OF ASSETS	\$

LIABILITIES (PERSONAL)

	Name of Bank	Security Held By Bank	Monthly Payment	Int Rate	Balance Owing
Bank Loans			\$	%	\$
			\$	%	\$
			\$	%	\$
	Name of Bank	Security Held By Bank	Monthly Payment	Int Rate	Balance Owing
Mortgage etc.			\$	%	\$
			\$	%	\$
			\$	%	\$
Credit Cards	Specify Type				Balance Owing
					\$
					\$
					\$
Other Liabilities	Specify Type (Personal Guarantees, Co-Signer, etc.)				Balance Owing
					\$
					\$
					\$
TOTAL LIABILITIES					\$
NET WORTH (Assets minus Liabilities)					\$

Are All payments current including property and incomes taxes? Yes No

Have any of the applicants ever had an asset repossessed? Yes No

Are you party to any claims or lawsuits? Yes No

Litigation/proceedings involving the applicant or any closely related individuals or corporation should be mentioned.

Have you ever filed bankruptcy or been associated with a business which has filed for bankruptcy? Yes No

If yes, please list date discharged.

The Applicant Understands and Agrees:

a) That the Applicant will be responsible for payment of all charges relative to preparation, execution and registration of such documents as may be required by the corporation or its solicitors;

b) That a \$ _____ non-refundable application fee must accompany this application;

c) That the Applicant will be responsible for payment of a _____ % administration charge (this charge can be paid, or deducted from loan proceeds);

d) That the terms and conditions of any financing which may be authorized will be set forth in a Letter of Offer, for agreement and acceptance by the Applicant;

e) That neither he/she nor any partner(s), shareholder(s) or officer(s) is the father, mother, stepmother, stepfather, foster parent, brother, sister, stepbrother, stepsister, spouse, common-law spouse, child, child of a common-law spouse, stepchild, ward, father-in-law, mother-in-law or, not in any way, related to an employee for member of the Board of Directors of the Community Futures;

f) That he/she warrants that no member of the House of Commons and no member of the Legislature of Saskatchewan will have any share or part of any contract, agreement, or benefit that may arise as a result of his/her application;

g) That he/she warrants no member of the Community Futures Board of Directors will have any share or part of any contract, agreement, or benefit that may arise as a result of his/her application;

Disclosure, Release and Waiver of Liability

a) The Applicant acknowledges that he/she approached the Corporation to obtain information about business and has, or is preparing a business plan;

b) The Applicant acknowledges that he/she is solely responsible for the success or failure of his/her business, and that any information which is provided to the Applicant by representatives of the Corporation, is for the Applicant's understanding only. It is the Applicant's responsibility to verify the accuracy of such information or to seek additional information concerning any aspects of the Applicant's proposed business;

c) The Applicant further agrees to hold the Corporation harmless and hereby releases and discharges the Corporation from any actions, damages, claims or demands which may arise, directly or indirectly, as a result of any act or omission by the Corporation in providing information to the Applicant, and to indemnify the Corporation from any such actions, damages, claims or demands which might be suffered by the Applicant's business or any guarantor in connection with any such information;

Applicant and Guarantor Declaration

That the statements made herein are for the purpose of obtaining financing from the Corporation and are to the best of the Applicant's knowledge and belief true and correct. The Applicant understands that additional information in support of this application must be supplied to the Corporation, if requested, before adequate consideration can be given to this application. The Applicant realizes that any present or future indebtedness of the Applicant, or the Applicant's business, to the Corporation may become due and payable if any information provided by the Applicant to the Corporation proves to be inaccurate or incomplete.

Dated, at _____, this _____ day of _____, 20 _____

(Name of Witness - if Applicant not a Corporation)

(Name of Applicant)

(Signature)

(Signature)
I have authority to bind the Corporation

PRIVACY CONSENT

By signing this form you are granting Community Futures access to personal information under the **PERSONAL INFORMATION PROTECTION AND ELECTRONIC DOCUMENTS ACT (PIPEDA)**.

The information being gathered will be placed on a database and maintained with your name, address, email address, business history and financial information. Sharing of this personal/business information may include sharing it with other lending institutions that may participate in your loan financing or any other persons from which Community Futures requires information or services with respect to the loan application or loan administration should the loan be granted.

The applicant(s) and the guarantor(s) agree and authorize Community Futures to, from time to time, conduct a Credit Bureau or reporting agency search, a personal property registry search, SGI registration inquiry and any other searches required to assess credit history, and if any loan is granted, to assess compliance with terms of the loan, assess the loan security, or for purposes related to the loan. The applicant(s) and/or guarantor(s) agree and authorize any other lending institution who may be evaluating the possibility of participating in financing, or that does participate in the loan if granted, to conduct the same enquiries and/or searches if required by that institution.

The applicant(s) and/or guarantor(s) agree and understand that this is a continuing authorization with no expiry date and that may be acted upon by Community Futures and/or any other lending institution that may be evaluating the possibility of participating in financing, or that does participate in the loan, if granted at anytime and for the purpose required to assess the applicant(s) and/or guarantor(s) credit history, assess compliance with the terms of the loan. assess the loan security in the event of default of the terms of the loan granted.

The applicant(s) and the guarantor(s) agree and understand that under Federal Privacy Law, the applicant(s) and the guarantor(s) have access to the information held by Community Futures and know to refer to the Community Futures Privacy Policy or contact the Chief Privacy Officer if a question or concern arises about the handling of personal/business information.

The applicant(s) and the guarantor(s) agree that Community Futures has the right to publicize or promote in various forms of media if the venture is successful in obtaining financing from Community Futures, which may or may not include personal/business information such as name.

*** The applicant(s) and the guarantor(s) understand that the specific personal/business information sharing arrangements will benefit the applicant(s) and the guarantor(s) through expediting communication and that only information relating to and pertinent to the applicant(s) and the guarantor(s) loan application, loan administration, or loan realization will be the subject of the sharing agreement.**

The applicant(s) and the guarantor(s) acknowledge that, as the operation of the corporation is financially supported by the Government of Canada, representatives of Industry Canada are permitted access to the files of the Corporation for monitoring and evaluation purposes and the the Applicant may be contacted by the representatives of Industry Canada and that, such information as is acquired by the Ministry will be treated as confidential.

By signing this application, the applicant confirms that he/she has made best efforts to access funds from other sources.

Dated, at _____, this _____ day of _____, 20 _____

(Name of Witness - if Applicant not a Corporation)

(Name of Applicant)

(Signature)

(Signature)
I have authority to bind the Corporation