



**Revolving
Loan Fund**

Revolving Loan Fund - IRP Application

Provided by the City of Olney
for all of Richland County.



DUNS number: _____

Type of Business: _____ Corporation _____ Partnership _____ Proprietorship

Type of Operation: _____ Manufacturer _____ R&D _____ Agri-Business
_____ Industrial _____ Service _____ Retail
_____ Warehouse/ _____ Other
Terminal

Number of Years in Business: _____

If Individual:

Name of Applicant: _____ Phone: _____

Social Security No: ____ - ____ - ____ Date of Birth: _____

Address of Applicant: _____

If Corporation or Partnership:

Name of Business: _____ Phone: _____

Address of Business: _____

Principal Owners: (List Individuals Owning 20% or More of Business.)

_____ % / _____ %

_____ % / _____ %

Purpose of Project: (Please Check)

To renovate existing building To expand existing business
 To acquire existing business To expand at a new location
 To construct a new facility To acquire new equipment
 Other / Explanation: _____

Location of site/building: _____

Size (Acres): _____ Building (Sq. Ft.): _____

Property Information:

Applicant owns business property Applicant Leases Business Property

If leased, Owners name: _____

Address of leased property: _____

Terms of Lease: _____ (Attach copy of lease)

Property Size: _____ (Sq. Footage/Acreage)

Existing Buildings: Total Square Footage Occupied: _____

Approximate Year Constructed: _____

Proposed Buildings / Expansion: _____ (Sq. Ft.)

Assessed Valuation of Property: \$ _____ (Most Recent Year)

Real Estate Taxes Paid: \$ _____ 20__

Employment Information:

Present No. of Employees: Full Time Part Time

Anticipated Number of Employees: 1 Yr. Full Time 1 Yr. Part Time
 2 Yrs. Full Time 2 Yrs. Part Time

(Provide list of job classifications, salary range, and number of positions.)

Estimated Project Costs:

Site Acquisition \$ _____
Site Improvements \$ _____
New Construction \$ _____
Building Renovations \$ _____
Capital Equipment \$ _____
Inventory / Working Capital \$ _____
Other Project Costs \$ _____
Total \$ _____

Estimated Target Date to Begin Improvements: _____

Complete Improvements: _____ Occupancy / Start-Up: _____

Method of Financing Summary:

First Mortgage _____% Participation

- a. Amount _____
- b. Name of Mortgagor _____
- c. Interest Rate _____
- d. Terms _____
- e. Contact Person: _____
Phone Number: _____

City Mortgage _____% Participation

- a. Amount _____
- b. Interest Rate _____
- c. Terms _____
- d. Type of Loan: _____ EDA _____ IRP
_____ CDAP _____ UDAG

Other Participation _____%

- a. Amount _____
- b. Interest Rate _____
- c. Terms _____
- d. Contact Person: _____
Phone Number: _____

Other Participation _____%

- a. Amount _____
- b. Interest Rate _____
- c. Terms _____
- d. Contact Person: _____
Phone Number: _____

Existing Debts on Property / Collateral:

Name & Address of Lender	Loan Amt.	Maturity Date	Collateral for Loan
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____

AGREEMENT: The undersigned applied for the loan indicated in this application to be used in Connection with the property described herein, and represents that the property will not be used for any illegal or restricted purpose, and that all statements made in this application are true and are made for the purpose of obtaining the loan. Verification may be obtained from any source named in this application. The applicant agrees to furnish any additional information to the city as needed to review and consider this loan request.

If Applicant is a Proprietor (Individual) or General Partner, Sign Below:

By: _____ Date: _____
Title: _____

If Applicant is a Corporation, Have an Officer Sign Below:

Name of Corporation: _____

By: _____ Date: _____
Title: _____

Return Applications and Supportive Information to: *Richland County Development Corporation*
Attn: RCDC Director
315 West Main Street
Olney, Illinois 62450

“The following information is requested by the Federal Government in order to monitor compliance with Federal Laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race/national origin of individual applicants on the basis of visual observation or surname.”

I do not wish to furnish this information

Ethnicity:

- Hispanic or Latino
 Not Hispanic or Latino

Race: (Mark one or more)

- White
 Black or African American
 American Indian/Alaskan Native
 Asian
 Native Hawaiian or Other Pacific Islander

Gender:

- Male
 Female

Non-Discrimination Statement:

In accordance with Federal Law and U.S. Department of Agriculture (USDA) policy, this institution the City of Olney is prohibited from discriminating on the basis of race, color, national origin, age, disability, religion, sex, and familial status. (Not all prohibited bases apply to all programs.) To file a complaint of discrimination, write to:
USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, DC 20250-9410 or call 800-795-3272 (voice) or (202) 720-6382 (TDD).