

X

CREDIT APPLICATION

Individual Credit		Amount Requested	Employee loan		Proceeds of loan will be used for:
Joint Credit			Emergency loan		
Payment Date Desired		Credit Terms	Business loan		
			Tribal loan		

Individual Application

NAME (last, first, middle)

BIRTHDATE	TELEPHONE NO.	DRIVER'S LICENSE	SOCIAL SECURITY NO.	NO. OF DEPENDANTS	AGES OF DEPENDANTS
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ADDRESS (street, city, state, zip)	COUNTY	OWN	HOW LONG
		RENT	

ADDRESS (street, city, state, zip)	COUNTY	OWN	HOW LONG
		RENT	

EMPLOYER (Company name and address)	HOW LONG
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BUSINESS PHONE	POSITION OR TITLE	SALARY PER MONTH
		Gross \$ <input type="text"/> Net \$ <input type="text"/>

PREVIOUS EMPLOYER (Company name, address, phone no.)	HOW LONG
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NAME AND ADDRESS OF NEAREST RELATIVE (that lives outside the home)	RELATIONSHIP	TELEPHONE NO. (include area code)
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ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT WISH TO HAVE IT CONSIDERED AS A BASIS FOR REPAYING THIS OBLIGATION

ALIMONY, CHILD SUPPORT, SEPARATE MAINTENANCE INCOME RECEIVED UNDER Court Order Written Agreement Oral Understanding

SOURCES OF OTHER INCOME	AMOUNT PER MONTH
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IS ANY INCOME LISTED IN THIS SECTION LIKELY TO BE REDUCED BEFORE THE CREDIT REQUEST IS PAID OFF?	HAVE YOU PREVIOUSLY RECEIVED CREDIT FROM US?
<input type="checkbox"/> NO <input type="checkbox"/> YES (Explain)	<input type="checkbox"/> No <input type="checkbox"/> Yes - When?

MARITAL STATUS

Complete only if for joint or secured credit or applicant resides in a community property state or is relying on property located in such a state as a basis for repayment of the credit requested.

MARRIED	SEPARATED	UNMARRIED (including single, divorced and widowed)
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REFERENCES

	NAME AND ADDRESS	TELEPHONE NO.	RELATIONSHIP
1.			
2.			
3.			
4.			

Check Here	"I do not wish to furnish this information." "The following information is requested by the Federal Government for certain types of loans, in order to monitor the lender's compliance with equal credit opportunity. You are not required to furnish this information, but are encouraged to do so. The law requires that a lender may neither discriminate on the basis of this information nor on whether you choose to furnish it. However, if you choose not to furnish it, under Federal regulations, this lender is required to note race/ethnicity on the basis of visual observation or surname. If you do not wish to furnish the above information, please check the box below." "This is an Equal Opportunity Program, Discrimination is prohibited by Federal Law. Complaints of discrimination may be filed with the USDA, Director, Office of Civil Rights, Washington, D.C. 20250."
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Racial/Ethnic information

<input type="checkbox"/> Anglo	<input type="checkbox"/> African American
<input type="checkbox"/> Hispanic	<input type="checkbox"/> Native American (Tribe: _____)

ASSETS

DESCRIPTION OF ASSETS	NAME IN WHICH ACCOUNT IS CARRIED	SUBJECT TO DEBT?	VALUE \$
CHECKING ACCOUNT NUMBER(S) (where)			
SAVINGS ACCOUNT NUMBER(S) (where)			
CERTIFICATE OF DEPOSIT(S) (where)			
MARKETABLE SECURITIES (Issuer, type, no. of shares)			
REAL ESTATE (location, date acquired)			
LIFE INSURANCE (Issuer, face value)			
AUTOMOBILES (make, model, year)			
OTHER (list)			
TOTAL ASSETS			

OUTSTANDING DEBTS	(Including charge accounts, installment contracts, credit cards, rent, mortgage and other obligations. Use separate sheet if necessary.)				
CREDITOR	ACCOUNT NUMBER	NAME IN WHICH THE ACCOUNT IS CARRIED	ORIGINAL AMOUNT	PRESENT BALANCE	MONTHLY PAYMENTS
Landlord or Mortgage Holder	<input type="checkbox"/> Rent Payment <input type="checkbox"/> Mortgage		\$ (Omit Rent)	\$ (Omit Rent)	\$
Automobiles (describe)					
TOTAL DEBTS			\$	\$	\$

Complete the following information about both the Applicant and Joint Applicant or Other Person (if applicable)

Are you obligated to make Alimony, Support or Maintenance Payments? No Yes

If yes, to whom & address _____ Amt per month \$ _____

Are you a co-maker, endorser or guarantor on any loan or contract? No Yes If yes, for whom? _____ To whom? _____

Are there any unsatisfied judgments against you? No Yes, If yes, to whom owed? _____ Amount \$ _____

Have you been declared bankrupt in the last 10 years? No Yes. If yes, where? _____

SECURED CREDIT Complete only if credit is to be secured. Briefly describe the property to be given as security.

PROPERTY DESCRIPTION

NAMES & ADDRESSES OF ALL CO-OWNERS OF THE PROPERTY

IF THE SECURITY IS REAL ESTATE, GIVE THE FULL NAME OF YOUR SPOUSE (if any)

SIGNATURES: I certify that everything I have stated in this application and on any attachments is correct. You may keep this application whether or not it is approved. By signing below I authorize you to check my credit and employment history and to answer questions others may ask you about my credit record with you. I understand that I must update credit information at your request if my financial condition changes.

Applicant's Signature _____

Date _____

Other Signature (Where Applicable) _____

Date _____



Catawba Indian Nation
USDA Microenterprise Loan Fund
Traditional Loan Application
(more than \$15,000)

Personal contact information

Name(s): _____

Home Address: _____

Phone Number: _____

Email Address: _____

Name of Business: _____

Type of Business: _____

Financial Information

Total Amount of Money Needed: _____

Amount of Personal Funds Used (at least 10%): _____

Amount of Loan Requested (no more than 90%): _____

Intended use of loan funds: _____

Applicable Interest Rate (Wall Street Journal prime interest rate for this month): _____

Term of this loan (no less than 1 year, not more than 7 years or 84 months): _____

Collateral Pledged (must be 100% of requested amount): _____

Personal References

Name: _____

Title: _____

Name of Business: _____

Home Address: _____

Phone Number: _____

Email Address: _____

How acquainted: _____ Length of time acquainted: _____

Name: _____

Title: _____

Name of Business: _____

Home Address: _____

Phone Number: _____

Email Address: _____

How acquainted: _____ Length of time acquainted: _____

Name: _____

Title: _____

Name of Business: _____

Home Address: _____

Phone Number: _____

Email Address: _____

How acquainted: _____

Length of time acquainted: _____

Certifications (please read carefully and initial on each line

1. I understand that this is a loan which must be paid back whether the business venture succeeds or fails. _____
2. In the event that I cannot or will not pay it back, I understand that the Tribe has authority to take ownership of the property listed as collateral (see above). _____
3. I certify that this business is owned at least 51% by me as a member of the Catawba Indian Nation. _____
4. I certify that this business meets the definition of a “small and emerging private business enterprise” as defined in RD Instruction 1942-G, 1942.304. (Definition – Any private business which will employ 50 or fewer employees and has less than \$1 million in projected gross revenues). _____
5. I certify that this business is located in a rural area, as defined by 1942-G, 1942.304. _____
6. I certify that I do not owe money to any tribal entity (ISWA Development, Head Start, after school program, water bill, day care, etc.) and I give permission for you to verify this. _____
7. I grant permission for the Economic Development Board of Directors to review my application and / or business plan, and I understand that they have authority to decide whether to forward it on to USDA for final approval. _____
8. I understand that there is a closing fee equal to 1% of the total loan amount, which is payable upon receipt of the loan funds. _____
9. I understand that there will be a yearly servicing fee equal to 1% of the total loan balance on the first day of the year for each year of the loan. _____
10. I understand that this business must undergo an applicable environmental review and receive appropriate intergovernmental review clearance. _____
11. I understand that USDA will make annual site visits to all loan recipients. _____
12. I understand that the purpose of this loan is for starting or expanding a business and that the operation and continuance of the business is a condition for the Catawba Indian Nation to carry this loan. _____
13. I understand that physical collateral, such as real estate, vehicles, equipment, etc. must be covered by property insurance. I also understand that failure to provide and maintain property insurance and liability insurance throughout the term of the loan is a default on the loan and can result in repossession of the assets pledged as collateral for the loan, and other recourse against the borrower as specified in the loan documents. _____

Please attach copies of:

- 1 current driver's license
- 2 social security card
- 3 credit report
- 4 tribal card or letter from Roll Administrator
- 5 a business plan with three-year financial projections, completed with the assistance of a Small Business Development Center or with the assistance of the Small Business Coordinator of the Catawba Indian Nation.
- 6 current resume
- 7 personal and business tax returns for three years

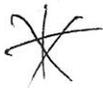
I hereby certify to the Catawba Indian Nation that the above information is true. I also certify that I have read and understand the information contained herein, including information regarding repayment and collateral.

Signature of Applicant

Date



Catawba Indian Nation



996 Avenue of the Nation
Rock Hill, SC 29733
(803) 366-4773
Fax: (803) 327-4811

Consumer Credit Information and Authorization

Each participant must complete this form.

Name: _____
First Name Middle Name Maiden Name Last Name

Social Security Number: _____

Date of Birth: _____

Place of Birth: _____

If not a U.S. Citizen, please provide alien registration #: _____

Race: _____

Home Address: _____
From: _____ to: Present

Street City State Zip Code

Home Phone: _____ Business Phone: _____

Email: _____ Fax Number: _____

Immediate Past Address: _____
From: _____ to: Present

Street City State Zip Code

Marital Status: _____ Date Married: _____

Spouse's Name: _____
First Name Middle Name Maiden Name Last Name

Spouse's Social Security Number: _____ Number of Children: _____

When you sign this form, you are authorizing Catawba Indian Nation to secure an up-to-date credit history and searches into other public records, as we deem appropriate, to aid in the evaluation of your application.

Authorized Signature: _____ Date: _____

Please Print Name: _____