



**SBA 504 Application Checklist (Not all items below are applicable to every applicant; provide only items that are applicable):**

- \_\_\_\_\_ (FORM) **All principals must complete and execute the attached SBA-504 Information and Certifications Form. Information and Certifications Form required of ALL owners. (FORM ATTACHED)**
- \_\_\_\_\_ **History and description of business** (Business Plan required for all start-ups).
- \_\_\_\_\_ **Bids and quotes on all project costs** (site prep, construction, renovations, equipment, sign, furniture, etc.). SBA requires that bids and quotes be from contractors, vendors, or other project-related thirdparties.
- \_\_\_\_\_ **Copy of real estate purchase contract.** If property has already been acquired: copy of signed Settlement Statement. If property has already been financed: copies of signed Loan Note and recorded Mortgage/Deed to Secure Debt. If property was acquired more than 2 years ago, please contact us concerning pre-application appraisal requirements for bank.
- \_\_\_\_\_ **Corporate documents for entities involved in transaction.** Articles of Incorporation and Bylaws for corporations and Articles of Organization and Operating Agreement for LLC's. If newly formed we will need the Tax ID number. Please also provide a list of owners (including the percentage of the company that is owned by each) and officers (President, Secretary, etc.).
- \_\_\_\_\_ **If a Franchise:** copy of Franchise Agreement.
- \_\_\_\_\_ **Last 3 years business tax returns.** If current tax return is not available, please provide copy of IRS Extension. If applicable, please also provide Balance Sheets and Income Statements if available.
- \_\_\_\_\_ **Current year-to-date Balance Sheet and Income Statement.** Financials must be current within 90 days.
- \_\_\_\_\_ **If applicable, Aging of Receivables and Payables** that matches Balance Sheet date
- \_\_\_\_\_ **If applicable, Projected Profit and Loss for next two years.** If start-up, must also provide month-by-month projections for the first 12-months. Projections must be supported by detailed assumptions per SBA policy.
- \_\_\_\_\_ (FORM) **Debt listing showing all existing business loans** (including original amounts, current balances, payment amounts, dates originated, maturity dates, collateral, bank names and loan numbers). **(FORM ATTACHED)**
- \_\_\_\_\_ **If you own any other business:** last 2 years business tax returns, including all schedules.
- \_\_\_\_\_ **Copy of driver's license** for each borrower and each guarantor. If not a US Citizen, please also provide copies of front and back of Resident Alien Card.
- \_\_\_\_\_ (FORM) **Personal Financial Statement** (must be on SBA form or bank form). Must be current within 60 days. Must be signed and dated. If married, spouse must also sign and date Personal Financial Statement. **(FORM ATTACHED)**
- \_\_\_\_\_ **Last 2 years personal tax returns,** including all schedules and W2's.
- \_\_\_\_\_ **Current number of Full Time Employees:** \_\_\_\_\_ **Current number of Part Time Employees:** \_\_\_\_\_
- \_\_\_\_\_ **Number of additional employees you expect to hire within the next 2 years:** FT \_\_\_\_\_ PT \_\_\_\_\_

**Provide the below items only if applicable:**

- \_\_\_\_\_ **If you currently have (or previously had) any other SBA financing:** Borrower name, Lender name, SBA loan number, Date originated, Collateral, Current balance. *Please Note: Any applicant or owner who has had a previous default on an SBA or other federal loan is ineligible from applying. SBA verifies all tax ID's to verify eligibility.*
- \_\_\_\_\_ **If you or your business is involved in any pending lawsuit,** please explain and attach copies of the suit.
- \_\_\_\_\_ **If the applicant or any owner has a previous bankruptcy,** please provide an explanation, when it occurred, and evidence of the discharge of that case.
- \_\_\_\_\_ **If the applicant or any owner has a tax lien or judgement against it,** please provide details and an explanation.
- \_\_\_\_\_ **If a Hotel:** Copy of Star Report.
- \_\_\_\_\_ **If debt refinance (for eligible fixed assets) will be included in this project,** SBA will require a copy of the signed Settlement Statement from the acquisition of the property, and copies of the original Loan Note and recorded Mortgage/Deed to Secure Debt from the acquisition of the property. If applicable, please also provide copies of all signed loan notes and copies of all recorded Mortgages/Deeds to Secure Debt for all refinances and renewals. Please also provide a loan history transcript printout from the current lender that includes the current balance and the payment history for past 12 months. Please contact us concerning pre-application appraisal requirements for bank.
- \_\_\_\_\_ **Additional questions/items:** \_\_\_\_\_

**For More Information Contact:**

**Randy Griffin , President ([rgriffin@csrardc.org](mailto:rgriffin@csrardc.org)) - 706-210-2010 (Phone)**  
**Cody Shepherd, Executive Vice President ([cshpherd@csrardc.org](mailto:cshpherd@csrardc.org)) – 762-333-8045 (Phone)**  
**Kim Walton, Loan Officer ([kwatson@csrardc.org](mailto:kwatson@csrardc.org))- 706-651-7306 (Phone)**



# SBA-504 INFORMATION AND CERTIFICATIONS FORM

MUST BE COMPLETED BY EACH PRINCIPAL INVOLVED IN THE LOAN.  
PLEASE MAKE COPIES AS NEEDED FOR EACH INDIVIDUAL

Name \_\_\_\_\_  
FIRST MIDDLE MAIDEN LAST

Date of birth \_\_\_\_\_ Place of birth \_\_\_\_\_ Race \_\_\_\_\_ Social Security No. \_\_\_\_\_

U.S. Citizen Yes  No  If not, please provide alien registration number \_\_\_\_\_

Home address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Phone # \_\_\_\_\_ Email \_\_\_\_\_

Immediate past address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

Are you employed by the U.S. Government? \_\_\_\_\_ If so, give the name of the agency and position \_\_\_\_\_

Spouse's Name \_\_\_\_\_  
FIRST MIDDLE MAIDEN LAST

Date of birth \_\_\_\_\_ Place of birth \_\_\_\_\_ Race \_\_\_\_\_ Social Security No. \_\_\_\_\_

U.S. Citizen Yes  No  If not, please provide alien registration number \_\_\_\_\_

### Personal information

*Be sure to answer the next three questions correctly because they are important. The fact that you have an arrest or conviction record will not necessarily disqualify you; an incorrect answer will probably cause your application to be turned down.*

Are you presently under indictment, on parole or probation? Yes  No

Have you ever been charged with and/or arrested for any criminal offense other than a minor vehicle violation? Include offenses which have been dismissed, discharged, or not prosecuted. (All arrests and charges must be disclosed and explained on an attached sheet) Yes  No

Have you ever been 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 motor vehicle violation? Yes  No

**If yes, to any of the above, furnish details in a separate exhibit.**

### Miscellaneous questions

Have you or any officer of your company ever been involved in bankruptcy or insolvency proceedings? Yes  No

Do you or your business have any active judgements or tax liens currently against you? Yes  No  If yes, please provide details on a separate sheet.

Are you or your business involved in any pending or current lawsuits? Yes  No  If yes, please provide details on a separate sheet.

Have you ever received an SBA loan? Yes  No

If yes, please provide a copy of the SBA Loan Authorization Document and the following:

Original Amount		Date of the loan	
Current Balance		Status	

**Military service background**

Branch \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
 Rank at discharge \_\_\_\_\_ Honorable? \_\_\_\_\_  
 Job description \_\_\_\_\_

**Work experience**

List chronologically, beginning with present employment

Employer _____	City _____	State _____	Zip _____
Address _____			
From _____ To _____	Title _____	Duties _____	
Employer _____	City _____	State _____	Zip _____
Address _____			
From _____ To _____	Title _____	Duties _____	
Employer _____	City _____	State _____	Zip _____
Address _____			
From _____ To _____	Title _____	Duties _____	

**Education (College or Technical Training)**

Name and Location	Dates Attended	Major	Degree or Certificate
1. _____	_____	_____	_____

Comments \_\_\_\_\_

**Credit Report Authorization**

I declare that the information provided in this application is true and correct. I hereby authorize the release of any and all credit report and other information required in the processing of my loan application and as required in the servicing and/or during the term of my loan. I further authorize CSRA Local Development Corporation to release such information to any entity as required in the processing of my loan application.

I/We hereby certify that the enclosed information, including any attachments or exhibits provided here within or at a later date, is valid and correct to the best of my/our knowledge.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Spouse Signature \_\_\_\_\_ Date \_\_\_\_\_



**EXISTING BUSINESS DEBT SCHEDULE**  
 (Use Separate Form for Each Related Company)

**Name of Company:** \_\_\_\_\_

**DEBT SCHEDULE**

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

CREDITOR NAME/ADDRESS	ORIGINAL AMOUNT	ORIGINAL DATE	PRESENT BALANCE	INT. RATE	MATURITY DATE	MONTHLY PAYMENT	SECURITY	CURRENT OR DELINQUENT
TOTAL PRESENT BALANCE				TOTAL MONTHLY PAYMENT				

\*Should be the same date as current financial statement  
 \*\*Total must agree with balance shown on current financial statement.

**SIGNATURE:** \_\_\_\_\_ **TITLE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_



## PERSONAL FINANCIAL STATEMENT

### U.S. SMALL BUSINESS ADMINISTRATION

The purpose of this form is to collect information about the Business Applicant and its owners' financial condition. SBA uses the information required by this Form 413 as one of a number of data sources in analyzing the repayment ability and creditworthiness of an applicant for an SBA loan or, with respect to a surety bond, to assist in recovery in the event that the contractor defaults on the contract. SBA also uses the information to assess whether an individual meets the economic disadvantage threshold for the Women-Owned Small Business (WOSB) Program and the 8(a) Business Development (BD) Program. Submission of this information is required as part of your application for assistance. Failure to provide the information would impact the agency's decision on your application.

To complete this form

- 1) Check all that apply.
- 2) Complete the form in its entirety (attached a separate sheet, if necessary)
- 3) Review the applicable certifications and sign (spousal signature, if required)

<input type="checkbox"/> <b>7(a) loan / 504 loan / Surety Bonds</b> Complete this form for: (1) each proprietor; (2) general partner; (3) managing member of a limited liability company (LLC); (4) each owner of 20% or more of the equity of the Applicant; and (5) any person providing a guaranty on the loan (including the assets and liabilities of the owner's spouse and any minor children).  <b>Return completed form to:</b> <b>For 7(a) loans:</b> the Lender processing the application for SBA guaranty <b>For 504 loans:</b> the Certified Development Company (CDC) processing the application for SBA guaranty <b>For Surety Bonds:</b> the Surety Company or Agent processing the application for surety bond guarantee
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<input type="checkbox"/> <b>Disaster Business Loan Application (Excluding Sole Proprietorships)</b> Complete this form for: (1) each applicant; (2) each general partner; (3) each managing member of a limited liability company (LLC); (4) each owner of 20% or more of the equity of the Applicant business; and (5) any person providing an unlimited guaranty on the loan.  <b>Return completed form to: Disaster Processing and Disbursement Center at 14925 Kingsport Road, Fort Worth, TX 76155-2243 or FAX to 1-202-481-1505 or <a href="mailto:disasterloans@sba.gov">disasterloans@sba.gov</a></b>
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<input type="checkbox"/> <b>Women Owned Small Business (WOSB) Federal Contracting Program</b> This form must be completed by each individual claiming economic disadvantage in connection with the SBA's Women-Owned Small Business (WOSB) Federal Contracting Program. A separate form must be completed by the individual's spouse, unless the individual and the spouse are legally separated. Use attachments if necessary. Each attachment must be identified as a part of this statement and signed. In addition, each individual claiming economic disadvantage must update the form as changes arise, but at least annually, to ensure the information is current, accurate and complete.  SBA's regulations state that to be considered economically disadvantaged for purposes of the WOSB Program, a woman must have an adjusted gross income averaged over the three prior fiscal years of \$350,000 or less; less than \$6 million in the fair market value of all her assets (to include her primary residence and value of the business concern); and less than \$750,000 in personal net worth (excluding equity interest in her personal residence and ownership interest in the business, and funds invested in a retirement account that are unavailable until retirement age). 13 C.F.R. §127.203. The information contained in this form must be submitted and certified through <a href="http://beta.certify.sba.gov">beta.certify.sba.gov</a>
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<input type="checkbox"/> <b>8(a) Business Development Program</b> 8(a) applicants must show that 51% of the firm is owned by one or more individuals determined by the SBA to be socially and economically disadvantaged. The information contained in this form must be submitted by each socially and economically disadvantaged individual using their one time 8(a) eligibility to qualify this firm for 8(a) certification. If married, the spouse must complete a separate SBA Form 413, except when the individual and the spouse are legally separated. If separated, provide copy of separation document.  SBA's regulations state that to be considered economically disadvantaged for purposes of the 8(a) Business Development Program, an individual must have an adjusted gross income averaged over the three prior fiscal years of \$350,000 or less; less than \$6 million in the fair market value of all assets (to include primary residence and value of the business concern); and less than \$750,000 in personal net worth (excluding equity interest in the personal residence and ownership interest in the business, and funds invested in a retirement account that are unavailable until retirement age). 13 C.F.R. §124.104.  <b>Note:</b> Please complete this form with Personal Information not Business Information and divide all jointly owned assets and liabilities, as appropriate with spouse or others. The information contained in this form must be submitted and certified through <a href="http://certify.sba.gov">certify.sba.gov</a> . For additional information go to: <a href="http://www.sba.gov/8abd">http://www.sba.gov/8abd</a>
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<b>Name</b>	<b>Business Phone</b> (xxx-xxx-xxxx)
<b>Home Address</b>	<b>Home Phone</b> (xxx-xxx-xxxx)
<b>City, State, &amp; Zip Code</b>	
<b>Business Name of Applicant/Borrower</b>	
<b>Business Address</b> (if different than home address)	
<b>Business Type:</b> ___ Corporation ___ S-Corp. ___ LLC ___ Partnership ___ Sole Proprietor (does not apply to ODA applicant)	

**This information is current as of [month/day/year]**  
*(within 90 days of submission for 7(a)/504/SBG/ODA/WOSB or within 30 days of submission for 8(a) BD)*

**WOSB applicant only, Married** \_\_\_ Yes \_\_\_ No

<b>ASSETS</b>	<b>LIABILITIES</b>
(Omit Cents)	(Omit Cents)
Cash on Hand & in banks..... _____	Accounts Payable..... _____
Savings Accounts..... _____	Notes Payable to Banks and Others..... _____
IRA or Other Retirement Account..... _____	(Describe in Section 2)
(Describe in Section 5)	Installment Account (Auto)..... _____
Accounts & Notes Receivable..... _____	Mo. Payments _____
(Describe in Section 5)	Installment Account (Other)..... _____
Life Insurance – Cash Surrender Value Only..... _____	Mo. Payments _____
(Describe in Section 8)	Loan(s) Against Life Insurance..... _____
Stocks and Bonds..... _____	Mortgages on Real Estate..... _____
(Describe in Section 3)	(Describe in Section 4)
Real Estate..... _____	Unpaid Taxes..... _____
(Describe in Section 4)	(Describe in Section 6)
Automobiles..... _____	Other Liabilities..... _____
(Describe in Section 5, and include Year/Make/Model)	(Describe in Section 7)
Other Personal Property..... _____	Total Liabilities..... _____
(Describe in Section 5)	Net Worth..... _____
Other Assets..... _____	
(Describe in Section 5)	
<b>Total</b> _____	<b>Total</b> _____
	Must equal total in assets column.

<b>Section 1. Source of Income.</b>	<b>Contingent Liabilities</b>
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..... _____

**Description of Other Income in Section 1** (Alimony or child support payments should not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income)

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

Names and Addresses of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

**Section 3. Stocks and Bonds.** (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)

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

**Section 4. Real Estate Owned.** (List each parcel separately. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed.)

	Property A	Property B	Property C
Type of Real Estate (e.g. Primary Residence, Other Residence, Rental Property, Land, etc.)			
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 type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

**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 and Beneficiaries.)

I authorize the SBA/Lender/Surety Company to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness.

**CERTIFICATION:** (to be completed by each person submitting the information requested on this form and the spouse of any 20% or more owner when spousal assets are included)

By signing this form, I certify under penalty of criminal prosecution that all information on this form and any additional supporting information submitted with this form is true and complete to the best of my knowledge. I understand that SBA or its participating Lenders or Certified Development Companies or Surety Companies will rely on this information when making decisions regarding an application for a loan, surety bond, or participation in the WOSB or 8(a) BD program. I further certify that I have read the attached statements required by law and executive order.-

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

Social Security No. \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

Social Security No. \_\_\_\_\_