



Community Development Project Summary Application

I. Organization Information

Contact Person and Title: _____

Organization Address: _____

Telephone: _____ Fax: _____

Type of Organization: _____ County Government
 _____ Local Government
 _____ School District
 _____ Municipal Authority
 _____ Non-Profit Organization

If non-profit, what is organization's taxable status? 501 _____

Description of Principal Activity: _____

Date Organization Established: _____

Brief Description of Organizational Structures, including identification of governing bodies, subsidiaries, and affiliations: _____

Principal Commercial Bank: _____

Telephone: _____

Organization Solicitor/Attorney: _____

Telephone: _____

II. Project Description

Type of Project: _____ Business Incubator
_____ Industrial Park/Site Development
_____ Education/Job Training
_____ Health Care
_____ Other Community Facility (describe) _____

Project Location: _____

Project Description: _____

Purpose of Project: Please check appropriate line(s):

- _____ To construct new building
- _____ To expand existing building
- _____ To acquire existing building
- _____ Construction of new infrastructure facilities
- _____ Expansion of existing infrastructure facilities
- _____ To purchase equipment
- _____ Other _____

Please provide detailed list of costs for Project: _____

III. Financing

| Sources of Funds | | Application of Funds | |
|----------------------|-----------------------------------|----------------------|----------|
| | | Zero-interest loan | Total |
| Equity \$ _____ | Land | \$ _____ | \$ _____ |
| Bank _____ | Building acquisition or expansion | \$ _____ | \$ _____ |
| Zero-int. loan _____ | Machinery or equipment | \$ _____ | \$ _____ |
| Other _____ | Other | \$ _____ | \$ _____ |

Method of financing (Please fill out all that apply):

1. Organization contribution _____ %
 - a. Amount _____
 - b. Type (cash, loan) _____
2. Private Financing _____ %
 - a. Amount _____
 - b. Name of Mortgagee _____
 - c. Interest Rate _____
 - d. Person to Person Contact _____
3. Zero-interest Loan Financing _____ %
 - a. Amount _____
 - b. Terms _____
4. Other Participation _____ %
 - a. Amount _____
 - b. Interest Rate _____
 - c. Terms _____
5. Other Participation _____ %
 - a. Amount _____
 - b. Interest Rate _____
 - c. Terms _____

IV. Project Benefits

Identify geographic area to benefit from Project: _____

Projected Financial Benefit from Project: _____

Estimate of permanent, full-time jobs to be created by Project First Year _____

In 3 Years _____

Please describe any other benefits from the Project: _____

V. Existing Assets of the Organization

| | Present Market Value | Present Mortgage Balance & Remaining Years | Mortgage Holder Lien Position |
|----------------------------|----------------------|--|-------------------------------|
| A. Land and Buildings | _____ | _____ | _____ |
| B. Investments | _____ | _____ | _____ |
| C. Accounts Receivable | _____ | _____ | _____ |
| D. Machinery and Equipment | _____ | _____ | _____ |
| E. Other | _____ | _____ | _____ |

VI. Organizational Financial Reports

Please include the past three (3) years of organization's audited financial statements. (This is to include the organization's Income Statements and Balance Sheets.) Please attach extra pages as necessary.
