



YOUNGSTOWN NEIGHBORHOOD DEVELOPMENT CORPORATION

820 Canfield Road
Youngstown, Ohio 44511
Phone: 330.480.0423
Fax: 330.259.7575
Email: info@yndc.org
Website: www.yndc.org

Thank you for your interest in the YNDC Microenterprise Loan Program. The mission of the program is to promote self-employment, small-scale business creation and economic independence in city neighborhoods. The YNDC offers equipment-only loans from \$1,000 to a maximum of \$10,000 with favorable and flexible repayment terms (2% annual interest). Loans can be used for startup or existing businesses with 5 or fewer full-time employees, including the owner.

*****APPLICATIONS ARE DUE TO THE YNDC OFFICE ON OR BEFORE OCTOBER 15, 2014*****

ELIGIBILITY

- You reside in and operate your business in Youngstown, and are at least 18 years of age.
- Your credit shows a successful repayment history. We use a credit score of 550 or above as a guideline. We will pull your full credit report as part of the loan review process. Financial counselling is available if you need to address issues on your credit report.
- You have a plan to repay your equipment loan, regardless of the success of your business venture.

DIRECTIONS FOR COMPLETING APPLICATION

Make sure that you take the time to submit the most current and accurate information. Please feel free to include any additional information that will help the credit committee make an informed decision regarding your request (e.g. photos, documents, news stories, explanations of past credit woes). NOTE: Any information submitted becomes the property of YNDC and will not be returned.

Application Sections:

- Signed Application and Co-Applicant form (by all co-applicants, if applicable)
- 12-month cash flow projection (Excel file or hard copy)
- Copy of most recent personal tax return and copy of income documentation (2 recent paycheck stubs)
- CED Client Form
- Copy of Sole Proprietorship, Partnership, LLC or Articles of Incorporation filing
- Business Plan Outline/Executive Summary (5 pages maximum)
- Resume(s) of key management (include co-applicant as well, if applicable)
- Copy of space lease agreement and/or insurance policy (if applicable)

LMI INCOME LIMITS

51% or more of retained or added jobs should benefit families at or below this income level, including the owner. Please state how your business will meet this requirement:

2014 LMI Income Guidelines

Number in Family:	1	2	3	4	5	6
Household Income:	\$30,450	\$34,800	\$39,150	\$43,450	\$46,950	\$50,450

Please contact YNDC for income levels for larger household sizes

PERSONAL INFORMATION

Name of Applicant: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Social Security Number: _____ Date of Birth _____

Primary Phone: _____ Secondary Phone: _____

Driver's License Number: _____

Email Address: _____

Is there a co-applicant? Yes No

Co-applicant's Name(s): _____

Note: Co-applicants must fill out a separate Co-applicant Form.*EMPLOYMENT INFORMATION**

Are you currently employed? _____

Employer: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

May we contact this employer to verify loan information? _____

Dates of employment: Start Date _____ End Date _____

How many hours do you work per week? _____ What is your job title? _____

Do you plan to keep this job while operating your business? Yes No

YOUR BUSINESS

Business Name: _____

Business Address: _____

City: _____ State: _____ Zip: _____ County: _____

When did you or when will you start your business? _____

Describe in detail the type of product or service your business offers/will offer.

If you have an existing business, what were last year's gross revenues? _____

Number of Employees (if existing) Full Time _____ Part Time _____ Contract _____

Do you have any other credit secured for this business? If so, please detail your business credit on a separate page.

What is the legal structure? *Include copies of all legal documents filed with county Register of Deeds or the Ohio Secretary of State.*

Please list any state and/or federal licenses your business is required to have in order to operate.

Do you currently have this license? _____

******Please attach the Cash Flow Spreadsheet for your business. If you have any questions about completing the cash flow, please contact Liberty Merrill at YNDC (330.480.0423). Please make sure to differentiate between your business cash flow and personal finances. Document any money you intend to put into the business from your personal assets and what income you expect to take out of the business for your personal finances in the first year. An electronic copy of the spreadsheet is available.******

PERSONAL LOAN INFORMATION

Please provide information for any mortgage, student, auto, or personal loans you may have. Also provide information any credit cards you have open.

Loan Type (description)	Lender Name	Original Balance/Limit	Current Balance	Monthly Payments
<i>Ex: Mortgage</i>	<i>ABC Bank</i>	<i>\$100,000</i>	<i>\$50,000</i>	<i>\$1,000</i>
Total:				

INTENDED USE OF LOAN FUNDS

YNDC Microenterprise Loan Funds can only be used for equipment purchases. Please list all of the equipment you intend to purchase with loan funds and a total amount of the loan request.

Item	Description	Cost
	Total:	

ALTERNATE CONTACT INFORMATION

Please provide names of two relatives or close friends not living with you as alternate contacts in the event we're unable to reach you.

Alternate Contact 1	Alternate Contact 2
Name: _____	Name: _____
Relationship: _____	Relationship: _____
Address: _____	Address: _____
City, State, Zip: _____	City, State, Zip: _____
Telephone: _____	Telephone: _____
Email: _____	Email: _____

SIGNATURE

The undersigned hereby certifies that the enclosed application information is valid, accurate and complete. The undersigned hereby further certifies that the proceeds of any loan made as a result of this application will be used for equipment purchases for current business needs only and will not be used to cover debt, fees related to the preparation of this document, or personal or consumer purchases.

Name: _____

Signature: _____

Date: _____

CREDIT REPORT AUTHORIZATION

The undersigned hereby authorizes YNDC to make all inquiries with credit bureaus and others it deems necessary –including business counselors, consultants and partnering agencies—to verify the accuracy of the information provided herein and to determine credit worthiness. All information collected will be kept confidential in accordance with the YNDC Privacy Policy.

Name: _____

Signature: _____

Date: _____

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Date: _____

JOB CREATION/ECONOMIC DEVELOPMENT CLIENT FORM

This application will collect basic data on new hires and entrepreneurs that will be used to track job creation and economic development in food based businesses for federal grants. All information collected will be kept strictly confidential, and will only be used for internal grant tracking purposes. We will never share this information without your express permission. This form should be filled out by the owner/entrepreneur and all new hires in the business, or by direct hires of Common Wealth and the YNDC related to CED projects.

Contact Information

Name _____

Business Name _____

Personal Address _____

Business Address _____

Preferred Mailing Address _____

Email Address _____

Phone Number _____

Employment/Income Information (before hire)

Employer: _____

Job Title: _____ Date Hired: _____

Hours/Week: _____ Hourly Rate: _____

Number of People Living in Your Household _____

Monthly Household Income from all sources (Before Taxes) _____

Do you currently receive income from your business?

Estimated Monthly Income (personal income - after business expenses): _____

Was this income reported above? _____

Do currently receive assistance from any of these programs?

Food Stamps/SNAP: Yes No

Disability: Yes No

TANF: Yes No

Unemployment: Yes No

Other Public Assistance: Yes No

Demographic Information (optional)

Gender: Male Female

Race: American Indian or Alaska Native Asian Black or African American

Native Hawaiian or Other Pacific Islander White Other _____

Ethnicity: Hispanic or Latino Not Hispanic or Latino Foreign Born:

Veteran: Active Military:

Disabled: Disabled Dependent(s):

Education: College High School/GED Vocational Primary None

I certify that the above information is correct to the best of my knowledge.

Signature _____ Date _____



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NOTE: If you have an impairment, disability, language barrier, or otherwise require an alternative means of completing this form or accessing information about housing counseling, please talk to your housing counselor about arranging alternative accommodations.

The Youngstown Neighborhood Development Corporation (YNDC) is committed to assuring the privacy of individuals and/or families who have contacted us for assistance. We realize that the concerns you bring to us are highly personal in nature. We assure you that all personal information shared orally and/or in writing will be managed within ethical and legal considerations. Additionally, we want you to understand how we use the personal information we collect about you. Please carefully review this notice as it describes our policy regarding the collection and disclosure of your nonpublic, personal information.

What is nonpublic, personal information?

- Information that identifies an individual personally and is not otherwise publically available information, such as your Social Security Number or demographic data such as your race and ethnicity
- Includes personal financial information such as credit history, income, employment history, financial assets, bank account information and financial debts

What personal information does YNDC collect about you?

We collect personal information about you from the following sources:

- Information that you provide on applications, forms, email, or verbally
- Information about your transactions with us, our partners, or others
- Information we receive from your creditors or employment references
- Credit Reports

What categories of information do we disclose and to whom?

We may disclose the following personal information to financial service providers (such as companies providing home mortgages); Federal, State, and nonprofit partners for program review, monitoring, auditing, research, and/or oversight purposes; and/or any other pre-authorized individual and/or organization. The types of information we disclose are as follows:

- Information you provide on applications/forms or other forms of communication. This information may include your name, address, Social Security Number, employer, occupation, account numbers, assets, expenses, and income.
- Information about your transactions with us, our affiliates, or others, such as your account balance, monthly payment, payment history, and method of payment.
- Information we receive from a consumer credit reporting agency, such as your credit bureau reports, your credit and payment history, your credit scores, and/or your creditworthiness.
- We do not sell or rent your personal information to any outside entity.
- We may share anonymous, aggregated case file information; but this information may not be disclosed in a manner that would personally identify you in any way. This is done in order to evaluate our program, gather valuable research information, and/or design future programs.
- We may also disclose personal information about you to third parties as permitted by law.



Part H: Monthly Cash Flow Projections

Applicant Name: _____

Date: _____

* Show only future number, not past

* Show only cash, not the value of other items

* Round off number to the nearest dollar (for example: \$232, not \$231.69)

	Startup	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12	Total
1 Beginning Cash ¹														
INCOME														
2 Sales														
3 Other Revenue														
4 Microenterprise Loan ²														
5 Total Income (add lines 2-4)														
EXPENSES														
6 Inventory/Materials														
7 Equipment														
8 Office space/equipment rentals														
9 Employees' Salaries														
10 Other ³														
11 Owners' Salaries														
12 Total Expenses														
13 Profit														
14 Loan Payments ⁴														
15 NET CASH ⁵														
16 Loan Payment ⁶														
17 CASH FLOW (Net) ⁶														

Footnotes:

- 1 Beginning Cash for Month 1 is the cash you have right now to put into the business PLUS the NET CASH (line 15) from Startup column.
- 2 Include the amount of the Microenterprise loan for which you are applying.
- 3 Includes other operating expenses such as office supplies, utilities, telephone, etc.
- 4 Do NOT include the monthly payment amount for the Microenterprise loan.
- 5 To calculate NET CASH, add Beginning Cash (line 1) and Total Income (line 5), then subtract Total Expenses (line 12).
- 6 FOR OFFICE USE ONLY - Do NOT complete.

Calculation of loan payment ⁶	
Loan amt.:	2,000%
Int. rate:	
Amort. (Yrs.):	
Payments	\$0.00
I/O (mo.):	#NUM!
P + I (mo.):	