



**RESOURCE:** The Support Center

**TYPE:** CDFI Loan

## FUNDING RESOURCE

**WEBSITE:** [Thesupportcenter-nc.org](http://Thesupportcenter-nc.org)

**CONTACT:** Edward Timberlake, Jr. [etimberlake@thesupportcenter-nc.org](mailto:etimberlake@thesupportcenter-nc.org)  
3120 Highwoods Blvd. Suite 350  
Raleigh, NC 27604  
Tel: 919.803.1437 ext.228 Fax: 919.896.8612

**OVERVIEW:** **Direct Small Business Lending**

As job creators and generators of local economic development, small businesses are the economic engines of communities across the state. However, many entrepreneurs face barriers in accessing affordable capital, particularly in recent years. Our Small Business Revolving Loan program helps to bridge this gap. Since 2010 we have funded 43 small businesses, totaling \$2.6 million, which have supported over 600 jobs. Our loan program is unique among nonprofit lenders in the state because we:

- Serve both existing and start-up businesses.
- Have the flexibility to fund smaller (\$5,000) or larger (up to \$250,000) loans
- Provide gap financing.
- Underwrite and service our loans in-house.
- Require a 10% equity injection, where most lenders require 20-30%.
- Are the only CDFI in the nation that is an approved Department of Transportation (DOT) lender, providing loans for transportation-related contracts funded by DOT.
- Are the only CDFI in the southeast that is an approved Farm Service Agency lender, providing loans for small farmers to innovate, diversify, and grow their operations.
- Offer a loan product designed specifically for Veteran Owned and Service Disabled Veteran Owned businesses.

**APPLICATION  
PROCESS:**

Fill out loan application packet and email ([sbl@thesupportcenter-nc.org](mailto:sbl@thesupportcenter-nc.org)), fax to (919) 896-8612 or mail to address listed above. Please include everything in check list.

Will take 7-10 business days for review.

Prefer credit score around 600's.

Loans from \$5,000-250,000



# The SUPPORT CENTER

Serving | Strengthening | Sustaining Our Communities

## Dear Small Business Applicant:

Thank you for contacting The Support Center regarding a loan for your small business. We look forward to working with you to find financing that best meets your needs. To make this process easier, please take time to read the following information about the application process.

### What forms do I submit to apply for a loan?

A checklist of items you need to submit to us is on page 2 of this package. Most of the forms you need to submit to us are in the pages attached to this letter. A few items we will need, such as your tax returns, are not forms in this package. Just follow the checklist and you'll stay organized.

### What do I do when I have my application package completed?

Please mail or deliver electronically your completed application package to The Support Center.

| Mailing Address:  | Via E-mail:                 |
|---|-----------------------------|
| The Support Center<br>Attn: Small Business Loans<br>3120 Highwoods Blvd<br>Suite 350<br>Raleigh, NC 27604 | SBL@TheSupportCenter-nc.org |

### What should I make sure not to forget?

Sign all forms where indicated. The items requiring your signature include the personal financial statement, the commercial loan application form, and your tax returns. Also, before you mail your completed loan application package to us, make a copy for the application package to keep for yourself. We keep all application materials sent to us and cannot return submitted forms.

### What if I have questions about the loan application package?

If you have any questions about this package, the forms or the application process, please feel free to contact the Small Business Lending Manager at 919-803-1437, ext. 228 or via e-mail at: SBL@TheSupportCenter-nc.org.

### Where can I find more information about The Support Center's loan programs?

You can visit our website at [www.thesupportcenter-nc.org](http://www.thesupportcenter-nc.org) to learn even more about our loan products and the other aspects of our non-profit organization.

## SMALL BUSINESS LOAN APPLICATION CHECKLIST

To provide you with the most efficient service, we ask that you please submit a complete application package. If you have questions concerning application forms or materials, feel free to call the Small Business Lending Manager at 919-803-1437, ext. 228. Please send your completed package to [SBL@TheSupportCenter-nc.org](mailto:SBL@TheSupportCenter-nc.org) or mail it to: **The Support Center, Attn.: Small Business Lending Manager, 3120 Highwoods Blvd, Suite 350, Raleigh, NC 27604.**

Make a check in the appropriate box after you have included the item in your loan package. Please be aware that the Small Business Lending Manager may request additional items after receiving your loan application package.

| Include these Items with your loan application package   | Check off when completed |
|--|--------------------------|
| Signed Commercial Loan Application (enclosed)  | <input type="checkbox"/> |
| Signed Personal Financial Statement (enclosed)<br>If married, submit a joint statement with your spouse.   | <input type="checkbox"/> |
| Copy of Personal Federal Tax Returns for Most Recent 3 Years   | <input type="checkbox"/> |
| Copy of Business Federal Tax Returns for Most Recent 3 Years   | <input type="checkbox"/> |
| Copy of Business Financial Statements, including balance sheets and income statements, for Most Recent 3 Years (for existing businesses only)                  | <input type="checkbox"/> |
| Current Year Internal Financial Statements Within the Last 60 Days<br>(for existing businesses only)   | <input type="checkbox"/> |
| 12-Month Income and Expense Projections<br><i>A form is enclosed as a guide. You do not need to use it as long as you provide us with similar information.</i> | <input type="checkbox"/> |
| Business Notes Payable Schedule (enclosed)   | <input type="checkbox"/> |
| Resume(s) of Key Management  | <input type="checkbox"/> |
| Signed Disclosure Statement (enclosed)   | <input type="checkbox"/> |
| Business Plan (for new businesses only)<br><i>A form is enclosed as a guide. You do not need to use it as long as you provide us with similar information.</i> | <input type="checkbox"/> |

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## COMMERCIAL LOAN APPLICATION

Business or Organization Name: \_\_\_\_\_ Who referred you to us? \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_ Federal Tax ID #  
(if incorporated): \_\_\_\_\_

Type of Business: \_\_\_\_\_ Date Started: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Legal Structure (check one):  C Corporation  Non-profit Corporation  Legal Partnership  
 S Corporation  Limited Liability Corp  Sole Proprietorship

Contact Person: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Veteran Status:  Veteran  Service-Disabled Veteran  Non Veteran

|   |  |
|---|--|
| Number of Full-Time Employees Now: _____<br>(Full time is at least 35 hours/week)<br>Number of Part-Time Employees Now: _____<br>How many jobs will this loan retain?<br>Full-Time: _____<br>Part-Time: _____ | How many jobs will this loan create?<br>Full-Time: _____<br>Part-Time: _____<br>Average number of hours'r gt'y ggm _____<br>Seasonal/Temporary: _____<br>Average number of hours'r gt'y ggm _____<br>Average number of months'r gt' gct: _____ |
|---|--|

Briefly describe your business or organization and what you plan to do with this loan: \_\_\_\_\_

**PROJECT INFORMATION:**

| <b>Use of Funds</b>            | <i>Total uses should equal total sources</i> | <b>Sources of Funds</b>      | <i>Total sources should equal total uses</i> |
|--------------------------------|--|------------------------------|--|
| Land and/or Building Purchases | \$ _____                                     | Loan Requested               | \$ _____                                     |
| Building Improvements          | \$ _____                                     | Owner's Investment           | \$ _____                                     |
| Machinery & Equipment          | \$ _____                                     | Other Funding Sources        | \$ _____                                     |
| Inventory                      | \$ _____                                     | Specify: _____               |  |
| Working Capital                | \$ _____                                     |                              |  |
| Other: _____                   | \$ _____                                     |                              |  |
| Other: _____                   | \$ _____                                     |                              |  |
| <b>Total Project Uses</b>      | <b>\$ _____</b>                              | <b>Total Project Sources</b> | <b>\$ _____</b>                              |

**COLLATERAL INFORMATION:**

| Assets available to secure this loan | Value of Asset | Loans on Asset | Location of Asset (Address) |
|--------------------------------------|----------------|----------------|-----------------------------|
| Property (specify):                  | \$             | \$             |                             |
| Property (specify):                  | \$             | \$             |                             |
| Inventory                            | \$             | \$             |                             |
| Equipment                            | \$             | \$             |                             |
| Accounts Receivable                  | \$             | \$             |                             |
| Other (specify):                     | \$             | \$             |                             |
| Other (specify):                     | \$             | \$             |                             |

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## MANAGEMENT INFORMATION AND ACKNOWLEDGEMENTS

Please read the following and complete the information below:

The undersigned hereby certifies that the information contained in this application and related materials are true and correct. The undersigned hereby further certifies that the proceeds of any loan made as a result of this application will be used for business and organizational purposes only, and will not be used for personal or consumer purposes. The undersigned hereby affirms that he or she does not discriminate on the basis of race, color, religion, national origin, gender, marital status, or age. The undersigned hereby acknowledges that any loan commitment must be in writing and signed by an authorized representative of The Support Center (TSC). The undersigned hereby authorizes TSC to make all inquiries it deems necessary to verify the accuracy of this statement and to determine the creditworthiness of the business or organization. The undersigned also authorizes TSC to answer questions and inquiries from others seeking credit experience information about the business or organization.

Each individual owner of 20% of more of this business must sign below and fill in the information requested. For non-profit organizations, please provide this information for the Executive Director, Treasurer and/or Board Chairperson.

|                                  |                                  |                                  |
|----------------------------------|----------------------------------|----------------------------------|
| Name (print) _____               | Name (print) _____               | Name (print) _____               |
| Address: _____                   | Address: _____                   | Address: _____                   |
| SSN or TIN _____ / _____ / _____ | SSN or TIN _____ / _____ / _____ | SSN or TIN _____ / _____ / _____ |
| Date of Birth _____              | Date of Birth _____              | Date of Birth _____              |
| % Ownership _____                | % Ownership _____                | % Ownership _____                |
| Title/<br>Function _____         | Title/<br>Function _____         | Title<br>/Function _____         |
| Signature _____                  | Signature _____                  | Signature _____                  |
| Date _____                       | Date _____                       | Date _____                       |

Please send this application form and the other items listed on the application checklist to the Small Business Lending Manager. Your application cannot be processed until we receive all required materials. Remember to make a copy of the materials for yourself since we will not be able to return them to you. Questions? Call or e-mail the Small Business Lending Manager at:

**Small Business Lending Manager**  
**Phone: 919-803-1437, ext. 228**  
**Email: SBL@TheSupportCenter-nc.org**

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## PERSONAL FINANCIAL STATEMENT

Indicate which this is; **Individual Financial Statement** \_\_ OR **Joint Financial Statement** \_\_ As of Date \_\_\_\_\_

Complete this form for: (1) each proprietor OR (2) each limited partner who owns 20% or more interest and each general partner OR (3) each stockholder owning 20% or more of voting stock OR (4) any other person or entity providing a guaranty on the loan.

| Name of First Individual   |                  | Name of Second Individual  |                  |   |         |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |   |  |
|--|------------------|--|------------------|---|---------|--|--|--|----|--|--|--|----|--|--|--|----|--|--|--|----|--|--|--|----|---|--|
| Social Security Number or Taxpayer Identification Number   |                  | Social Security Number or Taxpayer Identification Number   |                  |   |         |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |   |  |
| Address  | Yrs at Address   | Address  | Yrs at Address   |   |         |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |   |  |
| City, State, Zip   | Birth Date       | City, State, Zip   | Birth Date       |   |         |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |   |  |
| Employer   | Yrs at Employer  | Employer   | Yrs. at Employer |   |         |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |   |  |
| Home Phone   | Work Phone       | Home Phone   | Work Phone       |   |         |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |   |  |
| <b>ASSETS</b> (Omit cents.)<br>Cash (Complete in Section 1) \$ _____<br><br>Savings Accounts (Complete in Section 1) \$ _____<br>IRA or Other Retirement Account \$ _____<br>Accounts and Notes Receivables \$ _____<br>Life Insurance – Cash Surrender Value Only (Complete in Section 7) \$ _____<br>Stocks and Bonds (Describe in Section 4) \$ _____<br>Real Estate (Describe in Section 5) \$ _____<br>Automobile(s) – Present Value \$ _____<br>Other Assets \$ _____<br><b>TOTAL ASSETS</b> \$ _____  |                  | <b>LIABILITIES</b> (Show total balances due. Omit cents.)<br>Accounts Payable \$ _____<br>Installment and Revolving Credit Accounts (Describe in Section 3) \$ _____<br>Loan on Life Insurance \$ _____<br>Mortgages on Real Estate \$ _____<br>Unpaid Taxes (Describe in Section 6) \$ _____<br>Other Liabilities (Describe in Section 6) \$ _____<br><b>TOTAL LIABILITIES</b> \$ _____<br><br><b>NET WORTH</b> (Assets minus Liabilities) \$ _____ |                  |   |         |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |   |  |
| <b>Section 1. Deposit Accounts</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Financial Institution</th> <th style="width: 25%;">Acct. Number</th> <th style="width: 25%;">Acct. Type</th> <th style="width: 25%;">Balance</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td style="text-align: right;">\$</td></tr> <tr><td> </td><td> </td><td> </td><td style="text-align: right;">\$</td></tr> <tr><td> </td><td> </td><td> </td><td style="text-align: right;">\$</td></tr> <tr><td> </td><td> </td><td> </td><td style="text-align: right;">\$</td></tr> <tr><td> </td><td> </td><td> </td><td style="text-align: right;">\$</td></tr> </tbody> </table> |                  | Financial Institution  | Acct. Number     | Acct. Type                                | Balance |  |  |  | \$ |  |  |  | \$ |  |  |  | \$ |  |  |  | \$ |  |  |  | \$ | <b>Section 2. Sources of Annual Income</b><br>Salary/Wages \$ _____<br>Net Investments Income \$ _____<br>Real Estate Income \$ _____<br>Other Income* (describe below) \$ _____<br><b>Total Annual Income</b> \$ _____ |  |
| Financial Institution  | Acct. Number     | Acct. Type   | Balance          |   |         |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |   |  |
|  |                  |  | \$               |   |         |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |   |  |
|  |                  |  | \$               |   |         |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |   |  |
|  |                  |  | \$               |   |         |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |   |  |
|  |                  |  | \$               |   |         |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |   |  |
|  |                  |  | \$               |   |         |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |   |  |
| *Other Income (alimony, child support or separate maintenance income do not need to be listed if you do not want to have them considered as a basis for repaying this obligation):   |                  |  |                  |   |         |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |   |  |
| <b>Section 3. Installment Loans, Credit Accounts and Auto Payments</b> (Please label and sign any attachments to this section.)  |                  |  |                  |   |         |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |   |  |
| Note holder(s) Name and Address  | Original Balance | Current Balance  | Monthly Payments | How Secured/Endorsed? Type of Collateral? |         |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |   |  |
|  | \$               | \$   | \$               |   |         |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |   |  |
|  | \$               | \$   | \$               |   |         |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |   |  |
|  | \$               | \$   | \$               |   |         |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |   |  |
|  | \$               | \$   | \$               |   |         |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |  |  |  |    |   |  |

**Where can I find more information about The Support Center’s loan programs?**  
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| <b>Section 4. Stocks and Bonds</b> (Please label and sign any attachments to this section.) |                    |      |                                 |             |
|---|--------------------|------|---------------------------------|-------------|
| Number of Shares  | Name of Securities | Cost | Market Value Quotation/Exchange | Total Value |
|   |                    | \$   | \$                              | \$          |
|   |                    | \$   | \$                              | \$          |

| <b>Section 5. Real Estate Owned</b> (List each parcel separately. Please label and sign any attachments to this section.) |            |            |            |
|---|------------|------------|------------|
|   | Property A | Property B | Property C |
| Type of Property (residential/commercial)   |            |            |            |
| Title in Name of  |            |            |            |
| Address   |            |            |            |
| Date Purchased  |            |            |            |
| Original Cost   | \$         | \$         | \$         |
| Present Market Value  | \$         | \$         | \$         |
| Name and Address of Mortgage Holder   |            |            |            |
| Mortgage Balance  | \$         | \$         | \$         |
| Amount of Payment per Month   | \$         | \$         | \$         |

| <b>Section 6. Other Liabilities</b>  |     |    |  |
|--|-----|----|--|
|  | Yes | No | If yes, describe below or on a separate attachment |
| Are you a guarantor, co-maker or endorser for any debt of another?               |     |    |  |
| Are you currently liable on any lease or contract                                |     |    |  |
| Are there any suites or legal actions pending against you?                       |     |    |  |
| Are any tax obligations past due?  |     |    |  |
| Are you obligated to pay alimony, child support or separate maintenance payment? |     |    |  |
| Have you ever had a judgment recorded against you?                               |     |    |  |
| Have you ever filed bankruptcy? If yes, list date of discharge.                  |     |    |  |

| <b>Section 7. Life Insurance Held</b>      |                       |                      |                 |                     |
|--|-----------------------|----------------------|-----------------|---------------------|
| Name of Person Insured / Insurance Company | Face Amount of Policy | Cash Surrender Value | Loans on Policy | Is Policy Assigned? |
|  | \$                    | \$                   | \$              |                     |
|  | \$                    | \$                   | \$              |                     |

I am providing this financial statement for the purpose of obtaining or maintaining credit with The Support Center (TSC) or on behalf of others whose credit I may endorse, cosign or guarantee. I understand that TSC is relying on the information provided within this statement (including the designations made as to ownership of property) in deciding to grant or continue credit. I certify that THE INFORMATION PROVIDED IS TRUE AND COMPLETE and that TSC may consider this statement to be true and correct until a written notice of change is given to TSC. I authorize TSC to make all inquiries it deems necessary to verify the accuracy of this statement and to determine my creditworthiness. I also authorize TSC to answer questions and inquiries from other seeking credit experience information about me. If this is a joint financial statement, these representations and warranties are from each of us. I HAVE READ, UNDERSTAND, AND HEREBY MAKE THESE REPRESENTATIONS AND WARRANTIES.

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

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## 12-MONTH INCOME AND EXPENSE PROJECTIONS

**Applicant Name** \_\_\_\_\_ **Date** \_\_\_\_\_

**Instructions:** Please start the projections with the month when you think you will get the loan and fill in the months that follow. Then enter the income and expenses you project for each month. Show only future numbers, not past. Please total all of your columns and rows. Also, please round off numbers to the nearest dollar. Example: \$232, not \$231.69.

| 1               | <i>Enter the months in the spaces provided in this row</i>     | 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 |
|-----------------|--|---------|---------|---------|---------|---------|---------|---------|---------|---------|----------|----------|----------|-------|
| <b>INCOME</b>   |  |         |         |         |         |         |         |         |         |         |          |          |          |       |
| 2               | Sales  |         |         |         |         |         |         |         |         |         |          |          |          |       |
| 3               | Other Revenue  |         |         |         |         |         |         |         |         |         |          |          |          |       |
| 4               | <b>TOTAL INCOME</b><br>(add lines 2 and 3)                     |         |         |         |         |         |         |         |         |         |          |          |          |       |
| <b>EXPENSES</b> |  |         |         |         |         |         |         |         |         |         |          |          |          |       |
| 5               | Cost of Goods Sold<br>(ex. inventory or materials)             |         |         |         |         |         |         |         |         |         |          |          |          |       |
| 6               | Equipment/Supplies   |         |         |         |         |         |         |         |         |         |          |          |          |       |
| 7               | Business Rent  |         |         |         |         |         |         |         |         |         |          |          |          |       |
| 8               | Employees' Salaries  |         |         |         |         |         |         |         |         |         |          |          |          |       |
| 9               | Loan Payments  |         |         |         |         |         |         |         |         |         |          |          |          |       |
| 10              | Owner's Draw   |         |         |         |         |         |         |         |         |         |          |          |          |       |
| 11              | Other <sup>(1)</sup>   |         |         |         |         |         |         |         |         |         |          |          |          |       |
| 12              | Other <sup>(1)</sup>   |         |         |         |         |         |         |         |         |         |          |          |          |       |
| 13              | <b>TOTAL EXPENSES</b><br>(add lines 5 through 12)              |         |         |         |         |         |         |         |         |         |          |          |          |       |
| 14              | <b>PROFIT OR LOSS</b><br>(Line 4 minus line 13) <sup>(2)</sup> |         |         |         |         |         |         |         |         |         |          |          |          |       |

<sup>(1)</sup>Please be specific about items in the "Other" category (lines 11 and 12). Some items to consider are advertising, utilities, telephone, accounting, legal, insurance, travel, etc.

<sup>(2)</sup>Start-up businesses might show a loss for several months

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## BUSINESS NOTES PAYABLE SCHEDULE

**Applicant Name** \_\_\_\_\_ **Date** \_\_\_\_\_

Please include on this schedule all existing notes and long-term leases of your business, including mortgages, revolving credit arrangements, factoring agreements, equipment leases and any other type of debt, secured or unsecured.

| Creditor | Purpose | Original Date | Current Balance | Interest Rate | Maturity Date | Payment Amount | Payment Frequency | Collateral | Status |
|----------|---------|---------------|-----------------|---------------|---------------|----------------|-------------------|------------|--------|
|          |         |               |                 |               |               |                |                   |            |        |
|          |         |               |                 |               |               |                |                   |            |        |
|          |         |               |                 |               |               |                |                   |            |        |
|          |         |               |                 |               |               |                |                   |            |        |
|          |         |               |                 |               |               |                |                   |            |        |
|          |         |               |                 |               |               |                |                   |            |        |
|          |         |               |                 |               |               |                |                   |            |        |
|          |         |               |                 |               |               |                |                   |            |        |
|          |         |               |                 |               |               |                |                   |            |        |
|          |         |               |                 |               |               |                |                   |            |        |
|          |         |               |                 |               |               |                |                   |            |        |
|          |         |               |                 |               |               |                |                   |            |        |
|          |         |               |                 |               |               |                |                   |            |        |
|          |         |               |                 |               |               |                |                   |            |        |
|          |         |               |                 |               |               |                |                   |            |        |
|          |         |               |                 |               |               |                |                   |            |        |
|          |         |               |                 |               |               |                |                   |            |        |
|          |         |               |                 |               |               |                |                   |            |        |
|          |         |               |                 |               |               |                |                   |            |        |
|          |         |               |                 |               |               |                |                   |            |        |
|          |         |               |                 |               |               |                |                   |            |        |

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 You can visit our website at [www.thesupportcenter-nc.org](http://www.thesupportcenter-nc.org) to learn even more about our loan products and the other aspects of our non-profit organization.

## **DISCLOSURE OF RIGHT TO REQUEST SPECIFIC REASONS FOR CREDIT DENIAL**

The undersigned Applicant hereby acknowledges that he/she is aware that under the provisions of the Equal Credit Opportunity Act, he/she has the right to receive a written statement of the specific reason(s) for the denial if this application for credit is denied. To obtain the statement, please contact us at The Support Center, Attention: VP, Business Services & Operations, 3120 Highwoods Blvd, Suite 350, Raleigh, NC 27604 within sixty (60) days from the date of notification of the credit denial. The Support Center will send the Applicant a written statement of the reason(s) for the denial within thirty (30) days of receiving the request for the statement.

Applicant  
Signature \_\_\_\_\_

Date \_\_\_\_\_

**Please sign above and return this form to us with your application materials.  
Retain a copy for your files.**



**The  
SUPPORT CENTER**

Serving | Strengthening | Sustaining Our Communities

**The Support Center  
3120 Highwoods Blvd  
Suite 350  
Raleigh, NC 27604  
(919) 803-1437  
FAX (919) 896-8612**

**[www.thesupportcenter-nc.org](http://www.thesupportcenter-nc.org)**

**Where can I find more information about The Support Center's loan programs?**

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## BUSINESS PLAN

**Applicant Name** \_\_\_\_\_ **Date** \_\_\_\_\_

Describe the service/product you will offer. Provide as much detail as possible.

Describe qualifications and experience of management and other employees, and any outside professional services (accountants, attorneys, etc.)

Describe the market area, market trends, and customers you will service. Describe your advertising, promotions, pricing and customer service.

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Who is your competition? Be specific. What are the advantages of your products or services?

What are your plans for growth or expansion? How does this relate to working capital, equipment and/or your building (location, size, age, zoning, condition)?

What is your financing plan? Please specify how much money you can put towards the project and how much money you need to borrow?

Include additional comments on separate pages.

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## INFORMATION FOR GOVERNMENT MONITORING PURPOSES

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 you are encouraged to do so. The law provides 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 following information, please check the box below. If you are a permanent resident alien, please provide a copy of your resident alien ID card.

### Race and Ethnicity

**Borrower:**

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or other Pacific Islander
- White
- Other
  
- Hispanic or Latino
- Not Hispanic or Latino
  
- I do not wish to furnish this information

**Co-Borrower:**

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or other Pacific Islander
- White
- Other
  
- Hispanic or Latino
- Not Hispanic or Latino
  
- I do not wish to furnish this information

### Income

Please estimate your total family income over the past 12 months: \_\_\_\_\_

How many immediate family members are supported through this income? \_\_\_\_\_

### Use of Funds

Please provide more detail on how you will use TSC funds:

- Working Capital
- Land and/or Building Purchases
- Building Improvements
- Machinery and Equipment
- Inventory

If you selected “working capital” will you be engaging in any of the following? Please select all that apply:

- Hiring Workers
- Increasing Worker Pay
- Increasing Benefits Offered
- Increasing Marketing & Product/Service Awareness
- Expanding Products or Services

### Previous Experience

1. Have you previously applied for a loan from a bank? If so, what was the outcome-- were you approved or denied?

- Applied for a bank loan:**
- Yes
  - No

- Outcome of loan:**
- Approved
  - Denied

2. If you were approved, were you satisfied with the loan amount (was it sufficient to meet your needs) and the terms that were offered?

- Loan Amount:**
- Satisfied
  - Unsatisfied

- Loan Terms:**
- Satisfied
  - Unsatisfied

3. Why did you choose to apply for a loan with The Support Center?

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