



SouthEastern Montana Development Corporation

Growing Montana ~ One Job at a Time

Purchase of an Existing Business

Purchaser's Name:

Email Address:

Phone Number:

Business Name:

Business Address:

Website:

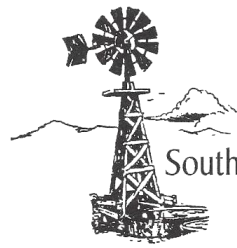
In order to make your consulting session more effective, please answer all of the following questions, to the best of your ability. There are no right or wrong answers.

What expectations do you have of a meeting with MCAEDC?

Why would you like to purchase this business?

Who is the target market for your product/service?

List all products or services you plan to offer your customer:



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List any items (equipment, inventory, building, land, etc) you own that may be used in your business:

What legal form of business organization do you intend to utilize?

Sole Proprietorship

Limited Liability Company

Partnership

Limited Liability Partnership

Corporation

Unknown

Subchapter S Corporation

Why are you selecting this legal form of business organization?

Describe any experience you have that would be relevant to you owning this business:

Do you need help with any of the following topics?

Accounting

Other (list all applicable topics below):

Bookkeeping

Taxes

Marketing

Pricing

Distribution

Registering a business

Licensing

Hiring Employees



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Will you need financing to purchase this business? _____ YES _____ NO

If yes, what is your approximate anticipated loan amount? \$ _____

How much are you able to put down? \$ _____ or _____ %

Describe your credit history (also indicate the credit history of any partners):

_____ Excellent

_____ Good, past issues have been corrected

_____ Poor

_____ Unknown

Have you obtained and reviewed your credit report recently? _____ YES _____ NO

Score: _____

If no, please order a credit report from one of the three national credit bureaus listed:

Experian www.experian.com 888-397-3742

Transunion www.transunion.com 800-888-4213

Equifax www.equifax.com 800-685-1111

Or visit www.annualcreditreport.com or call 877-322-8228 for all three sources.

Have you filed for bankruptcy in the past 5 years? _____ YES _____ NO If yes, why?

Have you been to or are any other organizations/resources currently assisting you?

_____ YES _____ NO

If yes, please list them:

**All information provided is confidential and used only for the purposes of analyzing potential for growing profitability.*

Client Initials: _____

ESTIMATED START-UP COST WORKSHEET	START-UP	MONTHLY
Cash on Hand		
Loan or Other Cash		
TOTAL CASH AVAILABLE		
Inventory (needed for resale or production)		
Gross Wages		
Payroll Expense (20% of wages)		
Professional Fees (accountants and attorneys)		
Advertising (BUSINESS cards, brochures, grand opening)		
Delivery and Travel (trade shows, materials)		
Insurance (deposits, prepaid accounts, bonding)		
Credit Card Service (set-up fees, monthly charge)		
Accounting and Legal Fees (agreements, contracts, books)		
Office and Operating Supplies (pens, paper, register tape)		
Dues and Subscriptions (organizational dues)		
Postage (marketing and freight)		
Telephone (installation, telephone sets, service)		
Rent (deposits and/or last month's rent)		
Repairs and Maintenance (equipment, machinery, buildings)		
Supplies (fixtures and furniture)		
Taxes and Licenses (property and business licenses)		
Supplies (fixtures and furniture)		
Contract Services (engineers, cleaning service, training)		
Miscellaneous		
Loan Payment		
Capital Purchases		
Reserve or Escrow		
Owners Withdrawal		
TOTAL COSTS PAID		
CASH POSITION		



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Sources & Uses of Funds

SOURCES OF FUNDS

Investment of Cash by Owner	_____	A
Investment of Non-cash by Owner (lower of market value or cost)	_____	B
Bank Loan to Business - Long Term	_____	C
TOTAL SOURCES OF FUNDS	\$ _____	AA

USES OF FUNDS

Land	_____	D
Building	_____	E
Equipment	_____	F
Inventory	_____	G
Vehicles	_____	H
Non-Cash Assets Contributed by Owner (Equip.)	_____	I
Down-payment and Fees	_____	J
Working Capital	_____	K
TOTAL USES OF FUNDS	\$ _____	

LOAN PACKAGE CHECKLIST

Personal Financial Checklist

Personal Financial Statements (signed and dated)
Copies of Personal Tax Returns (including all schedules for 3 ears)
Source and Amount of Owner's Capital Injection (statements needed)
Credit Report for Owners of 20% or more (dated within 90 days with all derogatory information explained) <i>www.annualcreditreport.com/index.action</i>
Resumes from Principals , Partners or Proprietors (all owners or key members of the team)

Financial Business Information

Business Plan
Description/History of the Business
Source and Use of Funds
Articles of Incorporation or Assumed Name Certificate
Credit Report for the Business (dated within 90 days with all derogatory information explained) <i>Bank can pull this information.</i>
Cash Flow Projections (Need the first year to be done by month. Second and third years may be done annually.)
Projected Profit and Loss (For one year by month. Second and third years may be done annually)
Notes to Financial Projections (assumptions)
Balance Sheet and Profit & Loss Statement (for the interim period dated within 90 days, each page signed/dated. Start-ups should include opening balance.)
Copies of Business Income Tax Returns (3 years)
Copy of Existing Facility Leases and/or Leases to Be Signed
Schedule of All Business Term Debt (notes, contract & leases payable)
Aged Accounts Receivable
Aged Accounts Payable

Collateral Requirements

Schedule of Fixed Assets to Be Purchased and the Cost
Appraisal on Real Estate and Most Recent Tax Appraisal

Franchise

Franchise Agreement and FTC Disclosure Report

Construction (Including Leasehold Improvements)

Construction Contract (by the contractor, architect, or other, with "turn- key" firm cost quotation)
Copy of Performance Bond

Additional Information

Partnership Agreements
Employment Agreements
Change of Ownership/Business Acquisition (copy of Buy-Sell Agreement and copy of Escrow Instructions)
Real Estate Acquisition (copy of sale/purchase agreement, signed/ dated, copy of escrow instructions , to include legal description)
Hazardous Waste Assessments Reports (PHASE 1 or 2, must have for existing gas stations and frequently polluting industries)
Real Estate Refinancing or Debt Payment (copies of notes, escrow instructions and settlement sheet)



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Colstrip, MT 59323
Phone/Fax (406) 748-2990
E-mail: jatchison@semcdc.org
Website: www.semcdc.org

Revolving Loan Fund Checklist

Revised: July 2020

Applicant Name: _____

_____ Loan Application

_____ Application Fee (\$250.00 Non-Refundable)

_____ Business Plan

_____ 3 Years of Prior Business Financial Statements or 3 Years of Prior Income Tax Returns

_____ 3 Years of Cash Flow Projections (First Year Should Be Monthly)

_____ 3 Years of Projected Income Statements/Profit & Loss

_____ 2 Years of Projected Balance Sheets

_____ Current Personal and/or Business Financial Statements or

_____ Current Personal Debt Schedule form filled out (or copy of Bank submittal)

_____ Current Personal Balance Sheet form filled out (or copy of Bank submittal)

_____ Credit and Information Release authorization signed (or copy of Bank submittal)

_____ Credit Report Completed (Billed at closing)

_____ Letter of Commitment from Matching Source (Lead Lender)

_____ Insurance Policy-Hazard, Life

Loan Criteria

- Applicant is required to provide 20% of project total cost (options may be discussed)
- Debt-to-worth must be 5:1 or less after loan funds have been distributed
- Working capital cannot exceed 50% of total project costs
- A local lender should also be involved with the project
- Loan Origination Fee: 1% for Participation Loans; 2% for all other loans
- Non-refundable application fee: \$250

CREDIT and INFORMATION RELEASE AUTHORIZATION

To all consumer reporting agencies, to all creditors, depositories and employers of the undersigned. Please be advised that the undersigned, and each of them has made an application to SOUTHEASTERN MONTANA DEVELOPMENT CORPORATION (SEMDC) (Lender) requesting an extension of credit to the undersigned. Therefore, the undersigned, and each of them, hereby authorizes you to provide a credit report and/or a disclosure of balance and/or payoff information, past, present, and future employment and earnings records, landlord references and rental payment history, investment accounts and any other asset valuations to Lender or any agent of Lender. The undersigned also authorizes you to disclose your deposit or credit experiences with the undersigned to Lender or any agent of Lender. Other necessary information may include obtaining present flood/hazard insurance information.

In addition, the undersigned, and each of them, hereby authorizes Lender to disclose to any third party, or any agent or employee thereof, information regarding the deposit or credit experience with any of the undersigned. The information Lender obtains is to be used only in the processing of the undersigned application for extension of credit with the Lender.

A photographic or scanned copy of this authorization bearing a photographic or scanned copy of the original signature(s) of the undersigned may be deemed to be equivalent to the original hereof and may be used as a duplicate original.

Date: _____

_____, _____, _____
Signature Printed Name Social Security Number

_____, _____, _____
Signature Printed Name Social Security Number

_____, _____, _____
Signature Printed Name Social Security Number

_____, _____, _____
Signature Printed Name Social Security Number

In accordance with Federal law and the U.S. Department of Agriculture's policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. (Not all prohibited bases apply to all programs).

To file a complaint of discrimination, write to: USDA, Director Office of Civil Rights, Room 326-W, Whitten Building, 14th and Independence Avenue, SW., Washington DC 20250-9410 or call 202-720-5964 (Voice and TDD). USDA is an equal opportunity provider and employer.

SOUTHEASTERN MONTANA DEVELOPMENT CORP.

Revolving Loan Fund Application

Non-refundable \$250.00 application fee

Name: _____

Home Address: _____

City: _____ Zip: _____

Phone # _____ Cell # _____

Email _____

Loan Amount Requested: _____

Business Name: _____

Business Address: _____

Business Phone: _____

Business/Project Description: _____

Other Lender Information _____

Contact Person: _____

Signature: _____ Date: _____

“The following information is requested by the Federal Government in order to monitor compliance with Federal laws prohibiting discrimination against applicants seeking to participate in this program.

You are not required to furnish this information but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the racial / national origin of the individual applicants on the basis of visual observation or surname.”

Ethnicity: Hispanic or Latino _____ Not Hispanic or Latino _____ Gender: Female _____ Male _____

Race: (mark one or more) White _____ Black or African American _____ American Indian / Alaska Native _____ Asian _____ Native Hawaiian or Other Pacific Islander _____

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