

KOSCIUSKO DEVELOPMENT, INC.

COMMERCIAL CREDIT APPLICATION

TO: **KDI LOAN COMMITTEE** (313 S. Buffalo St. Warsaw, IN 46580)

The undersigned respectfully submits the application for the credit extension described below:

Applicant's Name _____

Name, Address, and Telephone Number of Contact Person

Type of Organization (as indicated):

- | | |
|---|--|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Limited Liability Company (LLC) |
| <input type="checkbox"/> General partnership | <input type="checkbox"/> Limited Liability Partnership (LLP) |
| <input type="checkbox"/> Limited partnership (LP) | <input type="checkbox"/> Sole proprietorship (d/b/a) |
| <input type="checkbox"/> Individual personal | <input type="checkbox"/> Joint personal (ie. husband & wife) |

State of Organization: _____

Date Organized: _____

Brief Description of Business _____

Identify any owner/member that has 20% or more ownership in the company _____

Current number of employees: _____ Number of employees planned as a result of this facility: _____

Requested Credit Facility (as indicated):

1. Use of Funds
 - Acquisition of land, buildings, equipment and other fixed assets
 - Construction, expansion or remodeling of buildings
 - Purchase of equipment or machinery
 - Research and development of new products/processes
 - Buy outs by purchase of business assets
 - Other (specify): _____
2. Total Project Cost \$ _____
3. Amount requested \$ _____

Describe Specific Purpose of Loan Request _____

Repayment Source _____

Proposed Collateral _____

Financial Statements Attached (as indicated):

	<u>Applicant</u>	<u>Guarantor(s)</u>
Fiscal Year Ended _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
Interim (_____ month(s)/period(s) ending _____)	<input type="checkbox"/> _____	<input type="checkbox"/> _____
Personal Financial Statement Dated _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____

References (if appropriate to loan request) _____

The undersigned hereby represents and warrants that the information set forth herein is accurate and complete in all respects.

Dated: _____

Individual/Joint Applicant

Organizational Applicant

Applicant Signature

Organization Name

Applicant Printed Name

By: _____
Signature

Co-Applicant, if any, Signature

Printed Name / Title

Co-Applicant Printed Name

SCHEDULE A: CASH

NAME OF FINANCIAL INSTITUTION	(X) IF JOINT	TYPE OF ACCOUNT i.e., Checking Savings, C.D.'s etc.	AMOUNT	PLEGGED ON LOANS	
				YES	NO

SCHEDULE B: STOCKS AND BONDS

No. of Shares Or Face Value	DESCRIPTION	(X) IF JOINT	Market Value Or Book Value if Unlisted	PLEGGED ON LOANS	
				YES	NO

SCHEDULE C: RECEIVABLES

AMOUNT	NAME OF MAKER	WHEN DATED	WHEN DUE	REPAYMENT PLAN – COLLATERAL, IF ANY

SCHEDULE D: REAL ESTATE

ADDRESS OF PROPERTY	(X) If Joint	Date Acquired	No. Acres	COST	Market Value	Insurance Coverage	Mortgage Balance	Payment	Mortgage Holder

*On land Contract

SCHEDULE E: LIFE INSURANCE

NAME OF INSURANCE COMPANY	BENEFICIARY	FACE VALUE	CASH SUR. VALUE	POLICY LOANS

SCHEDULE F: PAYABLES AND LOANS

NAME AND ADDRESS OF PAYEE	TERMS	DATE MADE	DATE DUE	CURRENT BALANCE	COLLATERAL

The undersigned hereby affirm(s), upon penalties for perjury, that this financial statement has been given voluntarily and that it is a continuing and binding instrument which should be relied upon for all future advances, and shall be deemed accurate until KDI is notified otherwise. The undersigned further affirm(s) that he is solvent, able to pay his debts as they become due, and agrees to inform KDI immediately of any change in financial condition including insolvency. In case of failure to so notify KDI, or if this statement is false in any material respect, KDI may declare due and payable all obligations of the undersigned to KDI. The undersigned certify(ies) that both sides hereof have been carefully read and that the information given herein is true and correct, and authorize(s) KDI to obtain information concerning any statements made herein, including but not limited to credit reports and histories from credit reporting agencies.

_____	_____	_____	_____
BORROWER'S SIGNATURE	DATE	SPOUSE'S SIGNATURE (IF JOINT)	DATE
Social Security Number _____		Social Security Number _____	
Date of Birth _____		Date of Birth _____	