



*in partnership with...*



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## LOAN APPLICATION

10 Byers Street, Staunton, VA 24401  
Tel: (540) 213-0333 email: [justin@stauntonfund.com](mailto:justin@stauntonfund.com)  
[www.stauntonfund.com](http://www.stauntonfund.com)

**Thank you for contacting the Staunton Creative Community Fund (SCCF) for a business loan. We help small business by providing funding, consulting, and training. Our loans open doors, support sustainable local businesses, and expand economic opportunities in the Shenandoah Valley.**

**Send your completed Loan Application to SCCF and set up a meeting with us to discuss your application.**

1. Bring each of the items in Required Documentation section on the last page of the Loan Application to your meeting. We will discuss your application materials, answer questions that you have, and determine what information is still needed.
2. When we have received all of your information, the Loan Review Committee will review your application. In making its decision, the Committee will consider your:
  - a. **Business Plan:** What is your business idea? What items or services will you sell? What is your experience in producing them? Have you managed a business? How will you compete and market your business? What will your monthly expenses and sales revenues be for one year?
  - b. **Collateral:** We expect you to provide collateral to secure the loan (i.e.: unfinanced vehicle, business assets, equipment, machinery, and available personal assets). A co-signer with a reasonable credit score and income level who could pay your loan balance if necessary may be required. We will work closely with you to build a strong business plan.
  - c. **Equity:** In what ways will or have you provided equity to your business, either through cash or in-kind contributions?
  - d. **Credit History:** We will review your credit history and discuss it with you.
3. Each application is reviewed based on individual circumstances. Please contact us at (540) 213-0333 or email [justin@stauntonfund.com](mailto:justin@stauntonfund.com) with any questions.

**Copies of our Business Plan and Cash Flow Templates, as well as our Personal Financial Statement form, may be found by visiting our website at: <http://stauntonfund.com/target-businesses/>.**

**We look forward to working with you!**

The following application is comprised of two sections, the **Business Section**, which requests information specific to the business, and the **Owner Section**, which should be completed by **each** owner. An “owner” is considered any individual obtaining at least 20% ownership in the business. Please complete and return this application to:

Staunton Creative Community Fund  
10 Byers Street  
Staunton, VA 24401

## BUSINESS SECTION

### BUSINESS DESCRIPTION

Business Name:			
Business Address:			
Business Email:			
Business Contact:	Name:	Phone:	
	Address:		
Is this a new business?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Date started: <input style="width: 100px;" type="text"/>
Organization Type:	Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> S Corp. <input type="checkbox"/> C Corp <input type="checkbox"/>		
EIN Number:			
DUNS Number:			
Current number of full-time employees:			
Current number of part-time employees:			
Current annual sales/business revenue:			

**Describe the concept for your business:**

**Describe your products/services:**

**Describe your experience in producing them and in managing a business:**

**Describe your target market (Who are your customers? Where are they located?)**

**Name and location (distance from you) of your competitors:**

**How you will attract customers from your competition:**

**Other information you would like SCCF to know about your business:**

**If your loan is approved, how many new employees, including yourself, will you hire who will be**

**Full-time:** \_\_\_\_\_

**Part-time:** \_\_\_\_\_

**All start-up or significantly expanding businesses must submit a business plan and cash flow projections with this application.**

## LOAN REQUEST INFORMATION

Loan Amount Requested: \$
Term Requested: 1 yr. <input type="checkbox"/> 2 yrs <input type="checkbox"/> 3 yrs <input type="checkbox"/> 4 yrs <input type="checkbox"/> 5 yrs <input type="checkbox"/> 6 yrs. <input type="checkbox"/>
How much money will you provide from your own funds? \$
If your loan request is \$20,000+, have you tried to get a bank loan and been turned down? Yes <input type="checkbox"/> No <input type="checkbox"/>

**Describe the purpose of the loan. How will you use the loan proceeds?**

**SCCF provides a reduced interest rate incentive for businesses that purchase goods and services through other local businesses. Do you plan to purchase any of your new equipment, supplies, or other business related activities that are financed with your SCCF loan through local vendors? If so, please describe.**

### **COLLATERAL TO BE PROVIDED FOR LOAN**

Describe existing business assets:

Describe assets to be purchased with loan proceeds:

Other collateral available to secure the loan:

## OWNER SECTION

### CONTACT INFORMATION

Name:	
Social Security Number:	
Address:	
Email:	
Telephone Number:	Home: Cellular: Office:
Previous Address:	
Spouses Name:	
Spouses Social Security Number:	

### PERMISSION TO OBTAIN YOUR CONSUMER CREDIT REPORT

I hereby give the Staunton Creative Community Fund the right to obtain a consumer credit report regarding me for this application and the life of the loan should my application be approved. I also release from all liability all persons, companies, and corporations supplying such information. I indemnify the Staunton Creative Community Fund against any liability, which might result from making such an investigation.

Name:	Social Security Number:
Date of birth:	
Signature:	Date:

**SCCF recommends loan applicants obtain, review, and submit a free copy of their credit reports at the time of the loan application. Free reports are available for download at [www.annualcreditreport.com](http://www.annualcreditreport.com).**

**PERSONAL INFORMATION**

*(Please complete the following or attach a resume with your application)*

Current employer:		Address:	
Salary:		Job Title:	
How long there:		Duties:	
Supervisor's name:		Telephone:	

Last employer:		Address:	
Salary:		Job Title:	
How long there:		Duties:	
Supervisor's name:		Telephone:	
Reason for leaving:			

Previous employer:		Address:	
Salary:		Job Title:	
How long there:		Duties:	
Supervisor's name:		Telephone:	
Reason for leaving:			

Previous employer:		Address:	
Salary:		Job Title:	
How long there:		Duties:	
Supervisor's name:		Telephone:	
Reason for leaving:			

## INCOME AND DEMOGRAPHIC VERIFICATION

Name:	SSN:
Home address:	

Please check the boxes that apply to you:

- |   |   |
|---|---|
| <input type="checkbox"/> Male<br><input type="checkbox"/> Female<br><input type="checkbox"/> Elderly (over 62 years of age)<br><input type="checkbox"/> Single Parent (at least one child under 19)<br><input type="checkbox"/> Person with disability<br><input type="checkbox"/> Veteran<br><input type="checkbox"/> Non-US Citizen<br><input type="checkbox"/> Hispanic/Latino<br><input type="checkbox"/> Black or African American<br><input type="checkbox"/> White | <input type="checkbox"/> American Indian/Alaska Native<br><input type="checkbox"/> Asian<br><input type="checkbox"/> Native Hawaiian or Pacific Islander<br><input type="checkbox"/> American Indian/Alaska Native and White<br><input type="checkbox"/> Asian and White<br><input type="checkbox"/> Black or African American and White<br><input type="checkbox"/> Am. Indian or Alaska Native and Black or<br><input type="checkbox"/> African American<br><input type="checkbox"/> Other (more than one race) |
|---|---|

Find the line for your household size and then check whether your income over the previous 12 months is above or below the income amount listed on that line. You will check only one box. Total household income is defined as income of all household members over the age of 17 received from all sources, such as wages, salaries, interest income, investment income, social security, public assistance, or other sources.

**Persons in household,  
including yourself**

*(Circle household size first)*

**Income Level**

*(Then indicate if your income level is above or below the amount on that line)*

**Above**

**Below**

1.....	\$33,050 .....	□	□
2.....	\$37,800 .....	□	□
3.....	\$42,500 .....	□	□
4.....	\$47,200 .....	□	□
5.....	\$51,000 .....	□	□
6.....	\$54,800 .....	□	□
7.....	\$58,550 .....	□	□
8.....	\$62,350 .....	□	□

I certify that I have answered this question to the best of my ability. I understand that the information I have given is subject to verification.

### CERTIFICATION STATEMENT

I certify that the information above is correct to the best of my knowledge. I authorize SCCF to make inquiries as necessary to verify the accuracy of the statements made by me and to determine my creditworthiness. I have read and understand the fees outlines above. I agree to indemnify and hold harmless SCCF, its officers, directors, employees, agents and volunteers from any and all claims, loss or other liability arising from or

related to the services that SCCF provides before, during, and after the loan review process. I agree to pay the required sums and I agree to be bound by the loan agreement, if my application is accepted.

**Notice:** *SCCF is dedicated to maintaining the confidentiality of all private client information including proprietary business data, business plans, and tax ID numbers. As an organization receiving financial support from state and federal agencies, we may be required to document and share client information with public and non-profit agencies as a condition of program funding. Such information will be treated as confidential by all parties and shared only to the extent required for program compliance and not for further distribution.*

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Owner Signature

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Date

**Staunton Creative Community Fund is a non-profit 501c(3) corporation**



## REQUIRED DOCUMENTATION

In addition to this application, bring the following to your meeting with SCCF.

**With every application:**

- ❑ Complete business plan with cash flow projections (may be waived for certain existing businesses)

**For Existing Businesses Only:**

- ❑ Copy of business federal tax returns (3 years)
- ❑ Income statement and balance sheet for 3 years including year to date
- ❑ Copy of any bankruptcy discharge order during the past 7 years (if applicable)

**One per owner (any individual obtaining at least 20% ownership in business):**

- ❑ Personal financial statement (using form provided by SCCF)
- ❑ Copy of any bankruptcy discharge order during the past 7 years (if applicable)
- ❑ Recent copy of personal credit report (if available)
- ❑ Copy of personal tax returns (3 years)
- ❑ Copy of driver's license or other form of ID

**If your loan is approved, additional documents will be required before closing.**

**Thank you for submitting your application. We look forward to working with you.**