

Trade Name(s): _____

Has business name changed, or has merger, consolidation or other substantial business change occurred during the last five years? ____ Yes ____ No If yes, describe on separate sheet.

Address: _____

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

Principle office (if different from address): _____

Telephone: (____) _____ State of Incorporation: _____

Fax: (____) _____

Federal Employer ID# _____ WAST UBI# _____

Type of organization: ___ Proprietorship ___ Corporation "C" or "S" (circle one) ___ Partnership (Limited/General)

Date business was started: _____

Principal product/service line: _____

Market area: _____

Company Principals: (List of principal officers, stockholders, or partners)

Name	Address	Phone	%Ownership

Amount of Loan Requested:

From NCWBLF Revolving Loan Fund: \$ _____

Participating Lenders: \$ _____

Name of Lender: _____ Contact Person: _____

Owner Participation (Equity): \$ _____

Other: \$ _____

Purpose of Financing: _____

Employment Creation:

a. Present employment

Average number of employees in the past 12 months _____

Number of employees who are minority group members _____

Number of female employees _____

b. Projected employment

Projected number of new employees _____

Over next 12 months _____

Over next 24 months _____