RURAL NEVADA DEVELOPMENT CORPORATION LOAN APPLICATION

INFORMATION ABOUT YOUR COMPANY

.

Company Name	Form of Ownership
	Corporation
	Partnership
Federal Tax ID No	Proprietorship
Duns No. (required)	Other
CCR No. (required)	
8.	
Address	Owners
Zip	
<i> </i>	
Telephone	
Fax #	2. V 8. V
Name of Manager or CEO	Title
Date Business established	
Type of Business:	
Bank Contact:	
MONITORING INFORMATION	
Borrower:MaleFemale	Co-Borrower:MaleFemale
American Indian or Alaskan Native	American Indian or Alaskan Native
Asian or Pacific Islander	Asian or Pacific Islander
Black, not of Hispanic Origin	Black, not of Hispanic Origin
Hispanic	Hispanic
White, not of Hispanic Origin	White, not of Hispanic Origin
Other (specify)	Other (specify)

DESCRIPTION OF LOAN REQUEST

Requested loan amount \$

Description of what loan proceeds will be used for:

ECONOMIC IMPACT

Impact of project on jobs:

Retained ______ to be created ______

Potential benefits to community _____

Financing Source

	Amount	Rate %	Term	Payment
RNDC Loan	\$			_\$
Bank Loan). 		<u>.</u>	
Other				· i
Owner/Equity				
TOTALS				\$

USE OF LOAN PROCEEDS

Land	\$
New Construction	
Furniture & Fixture	
TOTAL	\$
DESCRIPTION OF COLLATERAL OFFE	RED

Building	
Machinery/Equipment	
Other	

ESTIMATED VALUE

\$ ______ \$ ______ \$ ______ \$ ____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ ___ \$ _____ \$ ____ \$ ____ \$ ____ \$ _____ \$ _____ \$ _____ \$ __

REQUIRED INFORMATION CHECKLIST

The following must be submitted with your application to complete your package.

A business plan (The plan should include but not be limited to: A personal history statement of all officers owning 20% or more of the company, projections for 3 years with the first year broke down by months, resumes of principals involved in management, economic benefits, employment opportunities, and the competitive advantage your business will have within this industry.)

- Copy of photo ID
- _____ Financial Institution Turndown documenting refusal to provide required financing.
- _____ \$100.00 Non-refundable fee to be applied to the 2% loan fee if loan is approved.
- _____ Signed Monitoring Statement (included.)
- _____ Signed RNDC Credit Authorization form (included.)
- _____ Signed RNDC Agreement and Certification form (included.)
- _____ Signed RNDC Criminal History form (included.)
- _____ Completed USDA Rural Development form 1940-20 Request for Environmental Information (included.)

Copy of any existing Real Estate Leases for your business.

Current Balance Sheets & Profit & Loss Statem

_____ A balance sheet, profit & loss statement and business tax returns for previous three (3) years.

Current personal financial statements for each owner of the business.

- Personal income tax returns for each borrower for previous three (3) years.
- Have you or any of the officers of your business ever been in bankruptcy or insolvency proceedings? ____ Yes ____ No

Have Company or Personal Tax Returns been audited by the IRS, in the last 5 years?
Yes ____ No (If yes, please include details and any Amended Tax Returns.)

Have you obtained Business Counseling for this project? Yes No (If yes, please answer the following.)

Agency:_____

Counselor Name:

Counselor Phone No.:_____

Agreement and Certification

.

I/We Agree and/or Certify:

That there are **no other** applications or requests for financing active at traditional lending institutions for funding on this project. If that changes, we will notify RNDC immediately.

That all information submitted in this loan application is accurate and complete to the best of my/our knowledge.

To authorize disclosure of information submitted in this application to other participating financial institutions.

That the proceeds of this loan, if approved, will be used as set forth in this application and as disclosed to the Rural Nevada Development Corporation.

To pay such fees as are disclosed by the Rural Nevada Development Corporation and authorized by the funding agencies including loan origination fees and legal fees.

As consideration for any Management and Technical Assistance that may be provided, to waive all claims against the Rural Nevada Development Corporation, it's officers, directors, and members.

That no owner or officer of my/our company or members of my/our immediate families will have any ownership interest which would create a conflict of interest as a result of receipt of funding from the lending programs as outlined in the EDA and/or USDA - Rural Development instructions 4274-D section 4274.308.

The Rural Nevada Development Corporation reserves the right to verify any and all information submitted in this application at their discretion.

By: _____

Ву:_____

Title: _____

Title: _____

Date:

Date: _____

Criminal History Information

A history of criminal conviction(s) will not necessarily result in the denial of your application for a loan. An untruthful answer, however, will cause your application for a loan to be denied. If you answer yes to any of the following questions, please provide the date of the conviction, the location where the conviction occurred, the name under which you were convicted, the sentence you were given and any information regarding the conviction which you feel is pertinent to the extension of credit.

1. Have you, any officers of the corporation or any guarantor or surety of the loan been convicted of any crime other than a minor traffic violation?

____Yes ____No

2. Are you, any officers of the corporation or any guarantor of surety of the loan presently being supervised on probation, parole or pursuant to a pretrial diversion program?

____Yes ____No

3. Do you, any officers of the corporation or any guarantor or surety of the loan have a criminal proceeding presently against you or them?

____Yes ____No

Signature:	Signature:
Print:	Print:
Date:	Date:

Rural Nevada Development Corporation 1320 E. Aultman Street Ely, NV. 89301 (775) 289-8519

AUTHORIZATION FORM

I authorize the Rural Nevada Development Corporation to request verification of my bank accounts, other assets, and employment earnings records and also to order a consumer credit report. I further authorize my banks and employer(s) to accept a copy of this document as their authorization to release such information.

BORROWERS Name (printed)
Social Security Number
Address:
BORROWERS SIGNATURE
CO-BORROWERS Name (printed)
Social Security Number
Address:
CO-BORROWERS SIGNATURE

This information is confidential and will only be used to process your loan request application.

MONITORING STATEMENT

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 are encouraged to do so. The law requires 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 above information, please check the box below.

Borrower:MaleFemale	Co-Borrower:MaleFemale
 American Indian or Alaskan Native Asian or Pacific Islander Black, not of Hispanic Origin Hispanic White, not of Hispanic Origin Other (specify) I do not wish to furnish this information 	 American Indian or Alaskan Native Asian or Pacific Islander Black, not of Hispanic Origin Hispanic White, not of Hispanic Origin Other (specify) I do not wish to furnish this information

Full time employees:

Part time employees:

Number of employees that fit the proper category:

Males Females

American Indian or Alaskan Native Asian or Pacific Islander Black, not of Hispanic Origin Hispanic White, not of Hispanic Origin

Other (specify)

Business Name

Business Owner

Date

U.S. SMALL BUSINESS ADMINISTRATION	PERSONAL FINA	ANCIAL STATEN	exp Ient	3 APPROVAL NO. 3245-0188 IRATION DATE:3/31/2008
Complete this form for: (1) each proprietor, or (2) ea 20% or more of voting stock, or (4) any person or e	ach limited partner who own	ns 20% or more Intere	the second se	
Name	ning providing a guaranty o		Business P	
Residence Address		Californic Herrichica	Residence	Phone
City, State, & Zip Code				
Business Name of Applicant/Borrower				
ASSETS	(Omil Cents)	1	LIABIL	ITIES (Omit Cents)
Cash on hand & in Banks	and the second se	Accounts Pavable		
Savings Accounts	\$			\$\$
IRA or Other Retirement Account				······ Ψ
	\$	Describe in S		¢
Accounts & Notes Receivable	\$		t (Auto)	»
Life Insurance-Cash Surrender Value Only (Complete Section 8)	\$	Mo. Payments	\$ t (Other)	\$
Stocks and Bonds	\$	 Mo. Payments 	\$	
Real Estate	\$	Mortgages on Real (Describe in S	Estate	\$
Automobile-Present Value	\$			\$
Other Personal Property.	\$	(Describe in S	ection 6)	
(Describe in Section 5)				\$
Other Assets	\$	(Describe in S		
(Describe in Section 5)		Total Liabilities		\$
		Net Worth		\$
Total	\$	-	Tota	^
Section 1. Source of Income		Contingent Liabli	ities	
Salary	\$	As Endersor or Co		
Net Investment Income	\$			····· \$
	A STATE OF A			
Real Estate Income	\$			\$
Other Income (Describe below)*	\$	_ Other Special Deb		\$
Description of Other Income in Section 1.		1.9.5		
*Alimony or child support payments need not be disclose Section 2. Notes Payable to Banks and Others.	(Use attachments if neces	sary. Each atlachmen	t must be identified as	a part of this statement and signed.)
Name and Address of Noteholder(s)	Original Cu Balance Ba	Irrent Payment Amount	Frequency (monthly,etc.)	How Secured or Endorsed Type of Collateral
Name and Address of Noteholder(s)	Balance Ba	Arhount	(monthly,etč.)	Type of Collateral

SBA Form 413 (3-05) Previous Editions Obsolete This form was electronically produced by Elite Federal Forms, inc.

4

(tumble)

Section 3. Stocks a	nd Bonds. (Use a	ttachments if necessary.	Each attachment		part of this statement a	and signed).
Number of Shares	Name	of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value
		- 10				
Section 4. Real Esta	te Owned.	(List each parcel separate of this statement and sign		if necessary. Each attack	nment must be identified	as a part
	and the state	Property A	States and	Property B	P	roperty C
ype of Property						
ddress	1. 970					
UUICaa	1.12 14	3				
ate Purchased	De la serie de					
original Cost						
resent Market Value						
						100 (11) 100 (10)
lame & ddress of Mortgage	Holder					
fortgage Account Nu	umber					
fortgage Balance						
mount of Payment p	ver Month/Year					
tatus of Mortgage						
Section 5. Other Per		(Des	cribe and if any is pler	food as security, state name	e and address of lien holder,	amount of lien, terms
Section 6. Unpa	aid Taxes. (D	escribe in detail, as to type,	to whom payable, y	when due, amount, and to	what property, if any, a ta	ax lien attaches.)
Section 7. Othe	er Llabilities. (De	escribe in detail.)		1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		
Section 8. Life	Insurance Held.	(Give face amount and	cash surrender valu	e of policies - name of in:	surance company and be	neficianes)
and the statements of a loan or guaranteeir	contained in the atta ng a loan. I underst	ies as necessary to verify th achments are true and accu tand FALSE statements ma	urate as of the state	d date(s). These stateme	ents are made for the purp	ose of either obtaining
(Reference 18 U.S.C	5. 1001).					
Signature:			Date	Socia	I Security Number:	
Signature:			Date	e: Socia	I Security Number:	
	concerning this estin Administration, Wash	age burden hours for the commate or any other aspect of hington, D.C. 20416, and Cleaters (503. PLEASE DO NOT SEND	this information, plea arance Officer, Paper I	ase contact Chief, Adminis	strative Branch, U.S. Small	Il Business

USDA Form RD 1940-20 (Rev. 6-99) REQ	QUEST	FOR		sition NMI	3 ENTAL INFORMATION	Name	of Proje	OMB	APPROVED No. 0575-0094
						Locati			
Yes No Copy 1b. If "No." provide the information	attached	as EXI ted in Ir	HIBIT I-A. Instructions as	EXH	Analysis been prepared for this pr BIT I. a detailed project description and		en reque	ested to	submit
comments to the appropriate Ru Item 3. Are any of the following land u	ural Deve	elopmen	t Office.	Ye:	s 🗌 No Date description su	bmittee	to SH	00	
project site(s)? (Check appropri									
	Yes	No	Unknown				Yes	No	Unknown
1. Industrial				19.	Dunes	•••••			
2. Commercial.				20.	Estuary	•••••			
3. Residential.			Π,	21.	Wetlands	•••••			
4. Agricultural				22.	Floodplain	•••••			
5. Grazing				23.	Wilderness				
6. Mining, Quarrying					Wilderness Act)		_		
7. Forests				24.	Wild or Scenic River				
8. Recreational				25	and Scenic Rivers Act) Historical, Archeological Sites				
9. Transportation				20.	(Listed on the National Register Historic Places or which may be	of			
10. Parks					eligible for listing)				
1. Hospital				26.	Critical Habitats				
12. Schools				27.	Wildlife				
13. Open spaces				28.	Air Quality				
14. Aquifer Recharge Arca				29.	Solid Waste Management	•••••			
15. Steep Slopes				30.	Energy Supplies				
16. Wildlife Refuge				31.	Natural Landmark				
17. Shoreline					(Listed on National Registry of N Landmarks)	Vatural			
18. Beaches				32.	Coastal Barrier Resources System	n			
Item 4. Are any facilities under your own consideration for listing on the Er								ner liste	ed or under
				Si	gned:				
(Date)						(Applice	ant)		
						(Title)			

.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collections is 0575-0094. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

INSTRUCTIONS FOR PREPARING FORM RD 1940-20

Fcderal agencies are required by law to independently assess the expected environmental impacts associated with proposed Federal actions. It is extremely important that the information provided be in sufficient detail to permit Rural Department to perform its evaluation. Failure to provide sufficient data will delay agency review and a decision on the processing of your application.

This information request is designed to obtain an understanding of the area's present environmental condition and the project's elements that will affect the environment. Should you believe that an item does not need to be addressed for your project, consult with the RD office from which you received this Form before responding. In all cases when it is believed that an item is not applicable, explain the reasons for this belief.

It is important to understand the comprehensive nature of the information requested. Information must be provided for a) the site(s) where the project facilities will be constructed and the surrounding areas to be directly and indirectly affected by its operation and b) the areas affected by any primary beneficiaries of the project. The amount of detail should be commensurate with the complexity and size of the project, and the magnitude of the expected impact. Some examples:

A small community center project may not require detailed information on air emissions, meteorological conditions and solid waste management.

A water resource, industrial development, or housing development project will require detailed information.

Item la - Compare the Environmental Impact Statement or Analysis that was previously prepared with the information requested in the instructions for Item lb below to be sure that every point in the information request is covered in the Environmental Impact Statement or Analysis. If any of the requested information is not covered, attach to the Environmental Impact Statement or Analysis a supplemental document that corrects any deficiencies or omissions.

Item lb - Provide responses to the following items in the order listed and attach as <u>EXHIBIT I</u>. In order to understand the full scope of the land uses and environmental factors that need to be considered in responding to these items, it may be helpful to complete Item 3 of the Form before completing these narrative responses. If your application is for a project that Rural Development has classified as a Class I action, complete only parts (1), (2), (13), (15), (16), and (17) of this Item. The Rural Development office from which you received this Form can tell you if your application falls within the Class I category.

(1) <u>Primary Beneficiaries</u>

Identify any existing businesses or major developments that will benefit from the proposal, and those which will expand or locate in the area because of the project. These businesses or major developments hereafter will be referred to as primary beneficiaries.

(2) Area Description

- (a) Describe the size, terrain, and present land uses as well as the adjacent land uses of the areas to be affected. These areas include the site(s) of construction or project activities, adjacent areas, and areas affected by the primary beneficiaries.
- (b) For each box checked "Yes" in item 3, describe the nature of the effect on the resource. If one or more of boxes 17 through 22 is checked "Yes" or "Unknown," contact Rural Development for instructions relating to the requirements imposed by the Floodplain Management and Wetland Protection Executive Orders.
- (c) Attach as <u>Exhibit II</u> the following: 1) a U.S. Geological Survey "15 minute" ("7 1/2 minute" if available) topographic map which clearly delineates the area and the location of the project elements; 2) the Federal Emergency Management Administration's floodplain map(s) for the project area; 3) site photos; 4) if completed, a standard soil survey for the project area; and 5) if available, an aerial photograph of the site. If a floodplain map is not available, contact Rural Development for additional instructions relating to the requirements imposed by the Floodplain Management Executive Order.

(3) <u>Air Quality</u>

- (a) Provide available air quality data from the monitoring station(s) either within the project area or, if none exist nearest the project area.
- (b) Indicate the types and quantities of air emissions to be produced by the project facilities and its primary benc**f** ciaries. If odors will occur, indicate who will be affected.
- (c) Indicate if topographical or meteorological conditions hinder the dispersal of air emissions.
- (d) Indicate the measures to be taken to control air emissions.
- (4) <u>Water Quality</u>
 - (a) Provide available data on the water quality of surface or underground water in or near the project area.
 - (b) Indicate the source, quality, and available supply of raw water and the amount of water which the project is designed to utilize.
 - (c) Describe all of the effluents or discharges sociated with the project facilities and its primary beneficiaries. Indicate the expected composition and quantities of these discharges prior to any treatment processes that they undergo and also prior to their release into the environment.

- (d) Describe any treatment systems which will be used for these effluents and indicate their capacities and their adequacy in terms of the degree and type of treatment provided. Indicate all discharges which will not be treated. Describe the receiving waters and their uses (e.g., recreational) for any sources of treated and untreated discharge.
- (e) If the treatment systems are or will be inadequate or overloaded, describe the steps being taken for necessary improvements and their completion dates.
- (f) Describe how surface runoff will be handled if not discussed in (d) above.

(5) Solid Waste Management

- (a) Indicate the types and quantities of solid wastes to be produced by the project facilities and its primary beneficiaries.
- (b) Describe the methods for disposing of these solid wastes plus the useful life of such methods.
- (c) Indicate if recycling or resource recovery programs are or will be used.

(6) <u>Transportation</u>

- (a) Briefly describe the available transportation facilities serving the project area.
 - (b) Describe any new transportation patterns which will arise because of the project.
 - (c) Indicate if any land uses, such as residential, hospitals, schools or recreational, will be affected by these new patterns.
 - (d) Indicate if any existing capacities of these transportation facilities will be exceeded. If so, indicate the increased loads which the project will place upon these facilities, particularly in terms of car and truck traffic.
- (7) <u>Noise</u>
 - (a) Indicate the major sources of noise associated with the project facilities and its primary beneficiaries.
 - (b) Indicate the land uses to be affected by this noise.
- (8) <u>Historic/Archeological Properties</u>
 - (a) Identify any known historic/archeological resources within the project area that are either listed on the National Register of Historic Places or considered to be of local and state significance and perhaps eligible for listing in the National Register.
 - (b) Attach as <u>EXHIBIT III</u> any historical/archeological survey that has been conducted for the project area.

(9) Wildlife and Endangered Species

- (a) Identify any known wildlife resources located in the project area or its immediate vicinity.
- (b) Indicate whether to your knowledge any endangered or threatened species or critical habitat have been identified in the project area or its immediate vicinity.
- (10) Energy
 - (a) Describe the energy supplies available to the project facilities and the primary beneficiaries.
 - (b) Indicate what portion of the remaining capacities of these supplies will be utilized.
- (11) <u>Construction</u>

Describe the methods which will be employed to reduce adverse impacts from construction, such as noise, soil erosion and siltation.

(12) <u>Toxic Substances</u>

- (a) Describe any toxic, hazardous, or radioactive substances which will be utilized or produced by the project facilities and its primary beneficiaries.
- (b) Describe the manner in which these substances will be stored, used, and disposed.

(13) <u>Public Reaction</u>

- (a) Describe any objections which have been made to the project.
- (b) If a public hearing has been held, attach a copy of the transcript as <u>EXHIBIT IV</u>. If not, certify that a hearing was not held.
- (c) Indicate any other evidence of the community's awareness of the project such as through newspaper articles or public notification.

(14) <u>Alternatives to the Proposed Project</u>

Provide a description of any of the following types of alternatives which were considered:

- (a) Alternative locations.
- (b) Alternative designs.
- (c) Alternative projects having similar benefits.

(15) Mitigation Measures

Describe any measures which will be taken to avoid or mitigate any adverse environmental impacts associated with the project.

(16) Permits

- (a) Identify any permits of an environmental nature which are needed for the project.
- (b) Indicate the status of obtaining each such permit and attach as EXHIBIT V any that have been received.

(17) Other Federal Actions

Identify other federal programs or actions which are either related to this project or located in the same geographical area and for which you are filing an application, have recently received approval, or have in the planning stages.

Item 2 - All applicants are required to provide the State Historic Preservation Officer (SHPO) with (a) a narrative description of the project's elements and its location, (b) a map of the area surrounding theproject which identifies the project site, adjacent streets and other identifiable objects, (c) line drawings or sketches of the project and (d) photographs of the affected properties if building demolition or renovation is involved. This material must be submitted to the SHPO no later than submission of this Form to Rural Development . Additionally, the SHPO must be requested to submit comments on the proposed project to the Rural Development office processing your application.

Item 3 - Self-explanatory.

Item 4 - Self-explanatory.