

BUSINESS PROJECT SUMMARY

Name of Business:								
Owner(s) Name:								
Business Address:								
City: County:		State:			Zip:			
Phone:		Federal Ta	ıx ID #:					
Product or Service:		Industry S	Sector:					
Is business registered in State of MD?	○ Yes ○ No	Date Esta	blished:					
Is business in good standing in State of MD?	○ Yes ○ No	Is this bu	siness: O	New?	Existir	ng?		
Is business in good standing in County?			Is there collateral available? • Yes • No					
Estimated Project Cost: \$			Describe collateral:					
Requested Loan Amount: \$			Requested loan term (months/years):					
Structure: O Sole Proprietorship O Partnership O Limited Liability Company O S Corporation O C Corporation Non-profit		Is this business 51% or more: (check all that apply) O Minority Owned O Woman Owned O Veteran Owned						
Proprietor, partners, officers, directors and Please use a separate sheet if necessary or i			_	0% of own	ership	o must be sh	own.	
Name:		Title:			Years Industry Experience:			
Home Address:					% Owned:			
Email:		Phone:						
Name:		Title:			Years Industry Experience:			
Home Address:					% Owned:			
Email:			Phone:					
		•						
Type of Company Financial Statements:				○ CPA-prep	ared	○ In-house	○ Tax return	
Has the firm, its affiliates or any owner ever filed for the Has the firm, affiliate or any owner ever defaulted Has any owner been convicted of a crime (other the Have you been declined for a loan for this project Are any individual or business taxes unpaid? If you answered YES for any of the above, please programmed the second	on a loan? nan minor vehicle)? by a lender?	Yes Yes Yes Yes Yes Yes Yes	O No O No O No O No O No O No					

PROJECT DESCRIPTION

Please briefly describe the proposed project. Include:

- 1. General allocation of project costs (land, building purchase, leasehold improvements, inventory, marketing, working capital, etc.),
- 2. Estimated completion date, and
- 3. Reason for the project (e.g. relocation, expansion, new business start-up, equipment purchase, etc.),
- 4. Also indicate if this project will ADD or RETAIN jobs and, if yes, how many.

nature:	Date:
nature:	Date:
give permission to use this information without a signature (for electronic submission only).
submitting this application you are not applying to the loan fu	und. This form is a prequalification counseling tool and for discussion purposes only.
OR INTERNAL USE ONLY:	
	Date received:
eceived by:	
· · · · · · · · · · · · · · · · · · ·	Review date:
Received by: Action:	Review date: