

# Loan Insurance Program

**A completed loan application package must include all attachments listed on page five before it can be reviewed.**

## BUSINESS/BORROWER INFORMATION

Business/Borrower Name			
Business/Borrower Description			
Federal Tax ID Number	NAICS Number	Date Established	State
Mailing Address		City/State/Zip	County
Phone Number	Fax Number	E-mail Address	
Contact Person Name		Title	
Phone Number	Fax Number	E-mail Address	
<b>Business Type</b>	<input type="checkbox"/> Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> S-Corp
	<input type="checkbox"/> LLC	<input type="checkbox"/> LLP	<input type="checkbox"/> Other (describe)
<b>Is there any legal action currently pending or threatened against the applicant(s) or guarantor(s)?</b>	<input type="checkbox"/> No	If yes, please explain.	
	<input type="checkbox"/> Yes		

## LOAN INFORMATION

Loan Amount	Loan Type (term, line, etc.)	Insurance Requested <input type="checkbox"/> Pro-Rata or <input type="checkbox"/> Leveraged
% to be Insured	Term/Amortization	Interest Rate
Purpose of Loan		
Number of Jobs Created		Number of Jobs Retained
Public Benefit of Financing (Describe)		



# Loan Insurance Program

Business/Borrower Name \_\_\_\_\_

**Does business/borrower offer health insurance or pension plans to its employees?**

- Health Insurance      Type: \_\_\_\_\_
- Pension Plan          Type: \_\_\_\_\_
- None

**Business Principals: List all Partners or Stockholders and their ownership percentage\*.**  
(Attach additional sheets if necessary.)

Name & Title	Address	Phone Number	Ownership Percentage
			%
			%
			%

*\*Individuals owning 20% or more of the borrower or owns 5% or more of the borrower and receives substantial income from the borrower, must provide unlimited personal guarantees.*

**Business Indebtedness: Include major leases. Use an asterisk (\*) to identify debts to be paid with loan proceeds.**  
(Attach additional sheets if necessary.)

Payable To	Original Amount	Original Date	Present Balance	Interest Rate	Maturity Date	Monthly Payment	How Secured

**Proposed Collateral:**  
(Attach additional sheets if necessary.)

Type	Description	Market Value	Basis for Valuation	Existing Lien holder	Outstanding Balance



# Loan Insurance Program

Business/Borrower Name
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## LENDER INFORMATION

Financial Institution		
Account Officer		
Mailing Address	City/State/Zip	County
Phone Number	Fax Number	E-mail Address
Underwriter Name (if different than Account Officer)		
Mailing Address	City/State/Zip	County
Phone Number	Fax Number	E-mail Address
<b>Is this a new lending relationship with your institution?</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>If no, is a primary purpose of this loan to restructure debt?</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No

## FAME DISCLOSURE & CONFIDENTIALITY STATEMENT

Certain information in the Finance Authority of Maine's (FAME's) possession must be available for public inspection after an application for financial assistance is received. This information includes the names of applicants, including principals; the amounts, types and general terms of financial assistance; description of projects and businesses benefiting from the assistance; the number of jobs and the amount of tax revenues projected in connection with a project; and the names of the financial institutions participating with the Authority.

Certain records at FAME are designated confidential and will not be available to the public for inspection. This includes the disclosure of records which would constitute an invasion of an individual's privacy, such as: personal tax returns, financial statements, assessments of creditworthiness or financial condition, records obtained by FAME in connection with any monitoring or servicing on an existing project, or any records or information the release of which FAME had determined could cause a business or competitive detriment to the person to whom the information belongs or pertains.

If an applicant desires certain information remain confidential, the applicant must clearly identify what information or documents it wishes to remain confidential. The applicant must also explain, in writing, the basis for such a request. Where the applicant asserts that the basis for the confidentiality request is that release of the information could cause a business or competitive disadvantage, or loss of a competitive advantage, the applicant must provide FAME with sufficient information to independently determine the likelihood of such a detriment. Applicants may wish to consult their attorney or FAME's legal counsel as to the scope of public disclosure and confidentiality as it relates to FAME and the business seeking assistance.

FAME does not discriminate in the administration of any of its programs or in its employment practices on the basis of race, color, national origin, age, gender, religion, physical or mental disability, political affiliation, marital status or sexual orientation. FAME is an equal opportunity employer, provider and lender.



# Loan Insurance Program

Business/Borrower Name \_\_\_\_\_

## FINANCIAL INSTITUTION CERTIFICATION

I certify on behalf of my financial institution that:

1. I have read FAME's disclosure and confidentiality statement and have provided a copy of same to the business;
2. My financial institution has exercised its normal due diligence in processing this loan and believes all information provided by the business is true, accurate and complete;
3. The loan is eligible for the insurance requested based on my analysis of the information provided by the applicant; and
4. I further certify that the lender would not make the loan without FAME insurance.

\_\_\_\_\_  
Name and Title of Authorized Financial Institution Representative

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
Date

## CREDIT REPORT AUTHORIZATION

By signature below, the authorized representative of the borrower and each proposed guarantor of the loan to be insured by FAME grants FAME permission to order consumer credit report(s) on the borrower(s) and each proposed guarantor.

\_\_\_\_\_  
Name and Title of Borrower

\_\_\_\_\_  
Signature of Borrower

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name and Title of Owner/Guarantor

\_\_\_\_\_  
Signature of Owner/Guarantor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name and Title of Owner/Guarantor

\_\_\_\_\_  
Signature of Owner/Guarantor

\_\_\_\_\_  
Date

## SIGNATURE and CERTIFICATION

I certify that all information provided to the financial institution and FAME relating to the loan to be insured by FAME is true, accurate and complete.

\_\_\_\_\_  
Name and Title of Borrower

\_\_\_\_\_  
Signature of Borrower

\_\_\_\_\_  
Date

Business/Borrower Name

## APPLICATION CHECKLIST

### **A completed loan application package must include the following before it can be reviewed:**

- Loan Insurance Program Application
- Detailed description of project being financed
- Detail of the sources and uses of all financing, include itemized description of work and costs
- Federal income tax return for the previous three years for Business/Borrower, also for Principal Owners/Guarantors (those with 20 percent or more ownership)
- Accountant prepared financial statements, including income statement and balance sheet with notes
- Copy of signed Lender commitment letter
- Personal Financial Statement(s) of Principal Owners
- Environmental Questionnaire
- Employment Plan (if business employs ten or more)
- Department of Environmental Protection Assessment Application (if loan amount is equal or greater than \$1 million)
- Lender Analysis:
  - Management experience and capabilities of the principals
  - Financial trends
  - Financial position
  - Repayment ability with appropriate debt service schedules
  - Collateral analysis
  - Assessment of support provided by borrower and guarantor(s)
  - An explanation of credit factors that make the insurance necessary
  - Analysis of borrower projections and assumptions
  - If possible, please provide a comparison to industry averages
  - Competition

Supplemental information such as collateral appraisals, marketing plans, resumes, site assessments, and aging of accounts receivable/payable may be requested by the Authority. If these materials are readily available, please include them with your application package.

A complete program description, including terms and conditions, is available online at [www.famemaine.com/business](http://www.famemaine.com/business).