



### **Nutrient Management Loan Program**

A completed loan application package <u>must</u> include all attachments listed on page 5 before it can be reviewed. **APPLICANT INFORMATION** Applicant Name Tax ID or SS Number Date Established Mailing Address City/State/Zip County Phone Number Fax Number E-mail Address Contact Person Name Title Phone Number Cell Number E-mail Address Proprietorship Partnership ☐ S-Corp □ C-Corp **Business Type** ☐ LLC ☐ LLP ☐ Other (describe) If yes, please explain Is there any legal action currently pending or threatened against the ■ No applicant or any guarantor? ☐ Yes (See page 2 for guarantor information.) **LOAN INFORMATION** Amount Requested Term Requested Number of Jobs Created Number of Jobs Retained Public Benefit Purpose of Loan Number of Years Business Operating





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Individuals owning 20% or more of the applicant company or owning 5% or more of the applicant company and receiving substantial income from the applicant company must provide unlimited personal guarantees of the loan, if approved.

GUARANTOR IN	FORMATION	strat guarantooc of the roan,	п аррготоа.	
Guarantor Name #1				
Mailing Address		City	State/Zip	County
Phone Number	Cell Number	Email Address		
Tax ID or SS Number				
Guarantor Name #2				
Mailing Address		City	State/Zip	County
Phone Number	Cell Number	Email Address		
Tax ID or SS Number				
Guarantor Name #3				
Mailing Address		City	State/Zip	County
-				
Phone Number	Cell Number	Email Address		
Tax ID or SS Number				



Applicant Name

## **APPLICATION Nutrient Management Loan Program**



Name	& Title			Addres	SS	Pho	ne Number	Ownership
								Percentage
								%
								%
								%
Business Indebtedno			. Use an aste	risk (*) to	identify debt	s to be paid	with loan p	roceeds.
(Attach additional shee		<del> </del>	D		B# = 4	NA ( I- I		
Payable To	Original Amount	Original Date	Present Balance	Interest Rate	Maturity Date	Monthly Payment		How cured

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







#### SIGNATURE and CERTIFICATION

By signing below, I represent that I am the individual authorized to complete this application on behalf of the applicant. I (we) also certify that the information provided and submitted in connection with the application is true and accurate and fairly presents the business and financial status of the applicant. I (we) authorize FAME to conduct appropriate business or personal credit checks. I (we) also certify that I (we) have read and understand FAME's Disclosure and Confidentiality Statement.

#### **FAME Disclosure and 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 participating financial institutions.

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 of an existing project, or the release of any records or information which FAME has determined could cause competitive detriment to a business or individual to whom the information belongs and/or pertains.

If an applicant wants certain information to remain confidential, the applicant must clearly identify what information or documents are 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 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 an attorney or FAME's legal counsel regarding the scope of public disclosure and confidentiality as it relates to FAME and the business seeking assistance.

Information may be shared with the Department of Agriculture, Conservation and Forestry.

Applicant/Authorized Representative Signature	Date
Applicant/Authorized Representative Printed Name and Title	
Guarantor #1 Signature	Date
Guarantor #1 Printed Name	
Guarantor #2 Signature	Date
Guarantor #1 Printed Name	
Guarantor #3 Signature	Date
Guarantor #1 Printed Name	







#### APPLICATION CHECKLIST

The Maine Department of Agriculture, Conservation and Forestry will forward Applicant's eligibility notification letter and approved Eligibility Form to FAME.

#### A loan application package must be complete in order to be reviewed. A complete loan application package must include the following:

- This completed Nutrient Management Loan Program Application
- Federal income tax returns for the previous three years for Business/Applicant and also for each Guarantor
- Financial statements, including profit & loss statement, income statement, cash flow statement, balance sheet with notes, and future projections
- Personal Financial Statement(s) of Guarantors
- Business Plan with three-year projections, unless previously submitted with Eligibility Form
- Copies of Appraisal(s) (if applicable)
- Land, Lease and/or Easement Agreements (if applicable), unless previously submitted with Eligibility Form

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 program description, including terms and conditions, is available online at www.famemaine.com/business.

#### PLEASE SEND COMPLETED APPLICATION AND ALL REQUIRED SUPPORTING DOCUMENTS TO:

**Finance Authority of Maine** P.O. Box 949 Augusta, ME 04332-0949

1-800-228-3734 • 207-623-3263 TTY: 207-626-2717

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