



NOTICE OF APPLICATION AVAILABILITY
CITY OF HOLLYWOOD
COMMUNITY DEVELOPMENT BLOCK GRANT RECOVERY (CDBG-R) FUNDS

In accordance with Title XII of Division A of the American Recovery and Reinvestment Act of 2009 the City of Hollywood anticipates receiving a supplemental allocation of \$409,177 to carry out the Community Development Block Grant (CDBG) program under Title I of the Housing and Community Development Act of 1974. The supplemental grant program under Title XII is commonly referred to as the CDBG Recovery (CDBG-R) program.

Funding available under the American Recovery and Reinvestment Act of 2009 has clear purposes – to stimulate the economy through measures that modernize infrastructure, improve energy efficiency, and expand educational opportunities and access to health care. Accordingly, the Department of Housing and Urban Development (HUD) desires that the City carefully evaluate proposed CDBG-R projects for consistency with the overarching goals of the Recovery Act.

Specifically, CDBG-R should be used to fund economic development, housing, infrastructure, and other public facilities that will quickly spur further economic investment, increased energy efficiency, and job creation or retention.

Using CDBG-R funds the City of Hollywood will be providing Community Development Small Business Loans (CDSBL). The CDSBL shall be 0% interest forgiveness loan for job creation/retention and the establishment, stabilization, and/or expansion of microenterprises. An applicant shall be evaluated based on the applicant's ability to preserve and/or create jobs and achieve one of the following goals:

- Assist individuals most impacted by the current recession
- Invest in economic efficiency, transportation, environmental protection, or other infrastructure that will provide long-term economic benefits.
- Minimize or avoid reductions in essential services
- Foster energy independence

On October 7, 2009 CDSBL applications for City of Hollywood CDBG-R funding shall be made available starting at 8:00 am at The Department of Housing and Community Redevelopment, 2500 Hollywood Boulevard., Suite 314.

PERSONS WITH DISABILITIES WHO REQUIRE REASONABLE ACCOMODATION TO PARTICIPATE IN CITY PROGRAMS AND/OR SERVICES MAY CALL THE OFFICE OF THE CITY MANAGER (3) BUSINESS DAYS IN ADVANCE AT (954) 921-3201 (VOICE). IF AN INDIVIDUAL IS HEARING OR SPEECH IMPAIRED, PLEASE CALL 1-800-955-8770.

Unified Business Credit Application

Credit Request Information

Amount Requested: \$ _____
 Purpose of Credit: _____
 Term of Loan: _____ Years _____

Type: Line of Credit Term Loan Mortgage

Business Information

Will the business be a: Borrower Co-Borrower on this credit E-mail address _____

Legal Business Name: _____ Doing Business As (DBA): _____

Business Physical Address:

Street: _____ Suite: _____ City _____ County _____

State: _____ Zip _____ Tax ID# _____ Business Applied For

Date moved to current address: ____/____/____ Prior 12 Months gross sales \$ _____

Mailing Address (if different):

Street: _____ Suite: _____ City _____ County _____

State: _____ Zip _____ Tax ID# _____

Telephone Number _____ (Extension) _____ Fax Number _____

Business Website: _____

Business Contact Name: _____

Legal Status: Sole Proprietorship Partnership Sub S-Corporation
 Corporation LLC Corporation LLP
 Limited Partnership General Partnership Non-Profit
 Limited Liability Company Limited Liability Partnership
 Other (specify) _____

Nature of Business: Distributor Professional Wholesale
 Retail Manufacturing Other

Primary Product/Service _____

State of Registration: _____

Number of Employees: _____

Date Business Established: _____ Owner Since _____ Time in Industry _____ # of Locations _____

Date moved to current address ____/____/____ Prior 12 months gross sales: _____

What percentage of your sales are cash/credit cards _____ On Terms _____

Please describe the terms you typically offer: _____

Are your sales seasonal? Yes No If yes, explain: _____

Annual sales at your last fiscal year-end _____ Who is your CPA? _____

Phone Number _____

Business Accounts Information:

Please list the financial institutions where the business Depository accounts are maintained (attach schedule, if needed)

Account Type:	Account Number	Financial Institution	Current Balance	Average
<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Other	_____	_____	\$ _____	\$ _____
<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Other	_____	_____	\$ _____	\$ _____
<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Other	_____	_____	\$ _____	\$ _____

Checking Savings Other _____ \$ _____ \$ _____

LIST ALL BUSINESS INSTALLMENT DEBTS, LINES OF CREDIT, NOTES, MORTGAGES AND CONTRACT LEASES PAYABLE

Financial Institution/Creditor	Type of Debt	Original Amount	Present Balance/Limit	Interest Term/Rate	Maturity Date	Monthly Payment	Collateral Pledged

Owner/Guarantor Information

All Principals, Owners, Partners, and Members will be obligated for this credit and must complete the following information. Attach additional sheets as needed.

1. Name _____
 Last Name _____ First Name _____ Middle Initial _____
 Title _____ % Ownership _____ Social Security Number _____
 Date of Birth _____ Home Address: Street _____
 City _____ State _____ Zip _____
 E-mail Address _____ % Ownership _____
 Home Phone# _____ Cell Phone# _____
 Date Moved to Current Address _____ Residential status: Home Owner Rent Other Years _____
 Mortgage/Rent Payment _____
Driver's License # and State: _____
 Employment Information: Self-Employed Retired Other _____
 Employed Employer Name _____
 Gross (Before Tax) Income Sources * _____
 Salary \$ _____ Net _____ How Often? _____ Other: \$ _____ How Often: _____
 Person Net Worth: _____
 Will this individual be a: Borrower Co-Borrower or Guarantor on this credit?

2. Name _____
 Last Name _____ First Name _____ Middle Initial _____
 Title _____ % Ownership _____ Social Security Number _____
 Date of Birth _____ Home Address: Street _____
 City _____ State _____ Zip _____
 E-mail Address _____ % Ownership _____
 Home Phone# _____ Cell Phone # _____
 Date Moved to Current Address _____ Residential status: Home Owner Rent Other Years _____
 Mortgage/Rent Payment _____
Driver's License # and State: _____
Driver License Issue Date _____ **Expiration Date** _____
 Employment Information: Self-Employed Retired Other _____
 Employed Employer Name _____
 Gross (Before Tax) Income Sources * _____
 Salary \$ _____ Net _____ How Often? _____ Other: \$ _____ How Often: _____
 Person Net Worth: _____
 Will this individual be a: Borrower Co-Borrower or Guarantor on this credit?

3. Name _____
 Last Name _____ First Name _____ Middle Initial _____
 Title _____ % Ownership _____ Social Security Number _____
 Date of Birth _____ Home Address: Street _____
 City _____ State _____ Zip _____
 E-mail Address _____ % Ownership _____
 Home Phone# _____ Cell Phone # _____
 Date Moved to Current Address _____ Residential status: Home Owner Rent Other Years _____
 Mortgage/Rent Payment _____
Driver's License # and State: _____
 Employment Information: Self-Employed Retired Other _____

Employed Employer Name _____
 Gross (Before Tax) Income Sources * _____
 Salary \$ _____ Net _____ How Often? _____ Other: \$ _____ How Often: _____
 Person Net Worth: _____
 Will this individual be a: Borrower Co-Borrower or Guarantor on this credit?

Notice: We intend to apply for Joint Credit and/or Guaranty the Loan (initials) _____

* Notice: Alimony, child support, separate maintenance need not be revealed if you do not want it considered as a basis for repaying this obligation.

Business Activity Information

Who are your major competitors? _____
 Percent of business with cash sales: _____
 Percent of business with Government Contracts: _____
 What are projected gross sales this year? _____
 What does the company manufacture, distribute, sell? _____
 Are the sales seasonal? Yes No
 List major customers and the percentage of sales they provide: _____
 What are the selling terms? _____
 What are the purchasing terms? _____
 How is new business obtained? _____
 Name of insurance company and policy number: _____ Years? _____
 Phone number _____

Miscellaneous Information

Has the business or owner(s) ever declared bankruptcy? Yes No
 Is the business or owner(s) involved in any claim or lawsuit? Yes No
 Has the business incurred a loss in any of the past 3 years? Yes No
 Is the business or owner(s) delinquent on state or federal taxes, including payroll or real estate taxes? Yes No
 Has the business or owner(s) ever had any judgments, repossessions, garnishments, or other legal proceedings filed against them? Yes No
 Is the business for sale or under agreement that would change the ownership of the business? Yes No
 Does your business accept credit cards as payment option for clients? Yes No
 If yes, please provide the following: Annual Visa/MC Sales Volume: \$ _____ Average Ticket/Sale: \$ _____
 Do you currently have a business retirement account? Yes No
 Do you have a business credit card? Yes No
 Do you own any other business? Yes No If yes, please specify _____
 Are there any investors in the transaction who are not owners, members, partners, officers of the Borrower? Yes No
 If Yes, please provide and attach details.

If You Answered Yes To Any Of The Above Questions, Please Attach Details.

Do you own any other businesses? Yes No If yes, specify _____
 Does your company import or export? Yes No If yes, specify countries _____
 Do you utilize PC's in your business? Yes No

Regulation O: Read and complete if Applicable

Regulation O: Read and complete if Applicable:

Are you (applicant, co-applicant, and/or guarantor) a Director, Executive Officer, or Principal Shareholder of a Financial Institution or are you a Related Interest of one of these Individuals? Yes No If yes, please state Financial Institution

Financial Institution City State

THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS FULL AUTHORITY TO ACT ON BEHALF OF APPLICANT IN CONNECTION WITH THE ABOVE-REFERENCED CREDIT REQUEST.

Applicant Signature _____ Title _____ Date _____

Co-Applicant Signature _____ Title _____ Date _____

Guarantor Signature _____ Title _____ Date _____

Guarantor Signature _____ Title _____ Date _____

Please provide us with the following information to evaluate your request:

- ___ Business Financial Statements for the past three (3) years (most recent should be within last 12 months) – dated and signed by principal/owner (Include complete business plan with 2 years projections if company is less than 3 years old).
- ___ Current Interim Period Financial Statement
- ___ Complete Business Income Tax Return for the past three (3) years (signed & dated)
- ___ Current Personal Financial Statement on (BANK NAME) forms from all principals/owners of the business (signed & dated)
- ___ Complete Personal Tax Return for the past two (2) years from all principals/owners of the business (signed & dated)
- ___ Corporate Borrowing Resolution (supplies by bank representative)
- ___ Copy of Articles of Incorporation, Articles of Organization, Partnership agreement, Trust agreements and Operating agreements (if applicable)
- ___ Copy of invoice if funds are to be used to purchase fixed assets
- ___ Accounts Receivable Aging and Inventory Report (if request is for a Small Business Line of Credit)

If this loan is to be secured by real estate, please include:

- ___ For Purchase Transactions: Copy of purchase contract (Fully Executed)
- ___ For Second Mortgages: Copy of promissory note on first mortgage and most recent mortgage history statement
- ___ Income Producing Property: Copies of all leases, 3 years of rents and expenses associated with the property from tax returns and projected rental income/expenses
- ___ Copy of most recent paid tax receipt
- ___ Copy of insurance certificate
- ___ Brief Business Plan which should include the following:
 - Resume Highlighting Industry And Management Experience
 - Objectives
 - Product And Services
 - Present Market And Competition
 - Marketing Plan
 - Financial Plan/Data Including Performa Balance Sheet
 - At Least Twelve Months Income/Expense Projections