**STEPS’ Micro-Enterprise Primary Loan Application**

Email: StepsCommunity@pivitalPHP.org Phone: (315) 651-9919

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| **Applicant Information** |
| Name | Business Name |
| Address |
| Phone Number |
| Fax Number |
| Email |
| Business Address |
| Website |
| **Business History** |
| Describe your business idea and any steps you have taken to develop your business. |
| Describe any training (classes/workshops), education, or experience you have related to your business idea? |
| Have you completed a business plan with Onondaga Small Business Development Center for your potential business? (Please note that a business plan created with OSBDC will be required prior to approval) If yes, please attach. |
| Capital Investments:How much money have you invested in the following categories to date?Property: $\_\_\_\_\_\_\_\_\_\_\_\_\_Equipment: $\_\_\_\_\_\_\_\_\_\_\_\_\_Inventory: $\_\_\_\_\_\_\_\_\_\_\_\_­\_Other: $\_\_\_\_\_\_\_\_\_\_\_\_\_What are your funding sources, and how much did each one contribute to date?Personal Cash: $\_\_\_\_\_\_\_\_\_\_\_\_\_Micro-Enterprise Grant: $\_\_\_\_\_\_\_\_\_\_\_\_\_Bank Loan: $\_\_\_\_\_\_\_\_\_\_\_\_\_Other: $\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Current Business Needs** |
| List all current business expenses and liabilities below (ex. Rent, Operating Costs, Insurance, Payroll, etc.) |
| Funding amount requested (Up to $1500): $\_\_\_\_\_\_\_\_\_\_\_\_\_What will the funds be used for? Please provide an estimated breakdown of how you plan to use funds.*Note: The amount awarded will be 100% Loan.*  |
| **Future Goals and Community Impact** |
| Please state two objectives for your business that you would like to see within the next two years.1.2. |
| Economic ImpactJob Impact: Note the number of full-time or full-time equivalents to be created or retained by this project. Please differentiate “new” versus “retained” jobs\_\_\_\_\_\_\_\_\_\_\_\_\_ Jobs created if applicable Total Yearly Business Expenditures in: Value of goods to be purchased as a result of this loanSeneca County $\_\_\_\_\_\_\_\_\_\_\_\_\_ Seneca County $\_\_\_\_\_\_\_\_\_\_\_\_\_ New York State $\_\_\_\_\_\_\_\_\_\_\_\_\_ New York State $\_\_\_\_\_\_\_\_\_\_\_\_\_Anticipated Projected Sales:Current Year: $\_\_\_\_\_\_\_\_\_\_\_\_\_ Next Year: $\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| Current assessed property value associated with your business: $\_\_\_\_\_\_\_\_\_\_\_\_\_ Square footage of space converted to business usage sourced from: \_\_\_\_\_\_\_\_\_\_\_\_\_  New Construction \_\_\_\_\_\_\_\_\_\_\_\_\_ Vacant Property \_\_\_\_\_\_\_\_\_\_\_\_\_ Private Residential Property \_\_\_\_\_\_\_\_\_\_\_\_\_Estimated number of new construction jobs created as a result of this project: \_\_\_\_\_\_\_\_\_\_\_\_\_Acres of land to be added to agricultural production as a result of this project: \_\_\_\_\_\_\_\_\_\_\_\_\_Acres of land to be removed from agricultural production as a result of this project: \_\_\_\_\_\_\_\_\_\_\_\_\_List all debt outstanding to date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| How did you hear about the Micro-Enterprise Program? |
| Client SignatureI certify that the above information is true and correct to the best of my knowledge and understand that this information may be verified by authorized government officials.Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Please return this form by email to StepsCommunity@pivitalphp.org or mail to:

STEPS Office

PO Box 621, 7180 Main St.

Ovid, NY 14521

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FOR OFFICE USE ONLY

*Approved By:*

 Accountant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

Project Director: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supportive Signature 1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supportive Signature 2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_