



Capital for Opportunity and Change

INSTRUCTIONS

Please complete this application and begin assembling the information requested on pg. 2 for closing. A decision will be made within 3 business days of the receipt of a complete application. All owners with 20% or greater ownership interest must complete and submit a separate, signed application.

All materials submitted to CEI in connection with your loan application shall become the property of CEI and shall be retained or destroyed in accordance with CEI's file retention policy.

This is a credit scored loan product. CEI offers free credit counseling. For support, please contact Jill Lorum at (207) 535-2919 or jill.lorum@ceimaine.org.

Payment by ACH is required.

CEI WICKED FAST MICROLOAN APPLICATION ≤ \$25,000

INFORMATION ABOUT YOU

Name: _____ Phone: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

County: _____ Property is: Owned Rented Do you have a current loan with CEI: Yes No

Number of people in your household: _____ Adjusted Gross Income: \$ _____
(Line 37 of IRS Form 1040)

INFORMATION ABOUT YOUR BUSINESS

Name of Business: _____ DBA: _____

Business Address: _____ City: _____ State: _____ Zip: _____

County: _____ Website: _____ E-mail: _____

Date Est.: _____ Sole Proprietorship Partnership LLC S Corp C Corp Co-op L3C

SSN/EIN: _____ # Employees (incl. yourself): _____ FT _____ PT _____

Can your business demonstrate six consecutive months of revenue? Yes No Previous F/Y Gross Revenue: \$ _____

Business is sole source of household income: Yes No Please list other sources: _____

Do you have a Business Advisor Yes No Advisor Name: _____

Name(s) of any subsidiaries/affiliates: _____

PROPOSED FINANCING

Loan Amount Requested: \$ _____ Use of funds: _____

BUSINESS OWNERSHIP Existing or Proposed: All owners having ≥ 20% interest will be required to submit a separate, signed application.

Name and Title: _____ % of Ownership: _____

Address: _____ Annual Salary: \$ _____

REFERENCES Please provide the names and contact information for your two nearest relatives not living with you.

Name: _____ Phone: _____ E-mail: _____

Name: _____ Phone: _____ E-mail: _____

BUSINESS DESCRIPTION In the space below, please describe what you sell/are planning to sell or what services you provide/are planning to provide, to whom, and where.

SUMMARY OF COLLATERAL Please list all business assets, with serial numbers if available.

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SUMMARY OF BUSINESS LOANS AND LEASES						
Creditor Name and Address	Present Balance	Int. %	Maturity Date	Monthly Payment	Collateral	Current or Delinquent

While we are processing your application, please assemble the following. CEI reserves the right to request additional information.

1. If your business is a:
 - a. **Partnership:** Please provide a copy of the partnership agreement.
 - b. **Limited Liability Company:** Please provide a copy of the operating agreement and articles of organization.
 - c. **Corporation:** Please provide a copy of the articles of incorporation and corporate bylaws.
2. Proof of Insurance, with CEI named as loss payee.
3. Social Impact Data Form
4. Start-up businesses: identify and engage a Business Advisor if you do not currently have one. CEI can provide guidance.
5. Depending on legal ownership structure, you may be required to provide a Borrower’s Resolution.

If you answer yes to any of the following questions, please provide an attachment of details.

- A. Have you or any officers of your company ever been involved in bankruptcy or insolvency proceedings? Yes No
- B. Are you or your business involved in any pending lawsuits? Yes No
- C. Do you buy from, sell to, or use the services of any entity in which someone in your company has a financial interest of 20% or more? Yes No
- D. If you owe child support, are you ≥ 60 days late on payment? Yes No

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided that the applicant has the capacity to enter into a binding contract); and because all or parts of the applicant’s income is derived from any public assistance program; or because the applicant has, in good faith, exercised any rights under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning the creditor is the Federal Trade Commission. If a person believes that he or she was denied assistance in violation of this law, they should contact the Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.

I/we understand that by signing this application, I/we authorize CEI to make inquiries as needed to verify the accuracy of the information and to determine creditworthiness. The undersigned authorize any person or consumer reporting agency to give you any information it may have on the undersigned. I certify the statements contained herein are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. I understand that falsifying statements may result in forfeiture of benefits and possible prosecution by the U.S. Attorney General (Reference 18 U.S.C. 10001). CEI will maintain the confidentiality of this information and it will not be released without authorization.

I authorize Lender to respond to any inquiries from others concerning the Lender’s credit experience with the undersigned. I understand Lender may provide information about my credit experience with Lender to credit reporting agencies.

By checking this box, I authorize CEI to share my information internally with all relevant third parties outside of the lending department who may provide technical assistance to the deal or project.

Applicant Signature

Today’s Date

SSN

DOB