

## Business Loan Intake Application

Business Name:		TIN & Sams:	
Business Address:		City:	
State:	Zip	County:	
Email:		Phone:	
Owner/Applicant(s):		Social Security #:	
Owner/Applicant(s):		Social Security #:	
Home Address:		City:	
State:	Zip:	County:	
Email:		Phone:	
Description of Business:			
<b>Type of Business (check one)</b>			
<input type="checkbox"/> Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Corporation	Number of Employees
<input type="checkbox"/> Other:			
Loan Amount Requested: \$		New Business? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Date Established:		U.S. Citizen? <input type="checkbox"/> YES <input type="checkbox"/> NO	
USDA Form 400-4, Assurance Agreement – This form must be attached to application. <a href="#">Compliance Assurance RD Form 400-4 (Nov. 2017)   Rural Development (usda.gov)</a> Must be included with this application			
<b>Type/Source of Current License (check one)</b>			
<input type="checkbox"/> MN Department of Agriculture		<input type="checkbox"/> MN Department of Health	
<input type="checkbox"/> Delegated Agency	City:	County:	
<input type="checkbox"/> Other (Please Specify):		<input type="checkbox"/> None	
<b>Type of Inspection Services (check all that apply)</b>			
<input type="checkbox"/> USDA	<input type="checkbox"/> MN "Equal to" USDA	<input type="checkbox"/> Custom Exempt	<input type="checkbox"/> Retail Exempt
<input type="checkbox"/> Other (Please Specify):		<input type="checkbox"/> None	

The following information is requested by the Federal Government for certain types of loans and grants, in order to monitor compliance with civil rights laws. You are not required to furnish this information but are encouraged to do so. The law requires program recipient may neither discriminate on the basis of this information nor on whether you choose to furnish it. However, if you choose not to furnish it, under federal regulations, this program representative is required to note race/ethnicity on the basis of visual observation or surname."

I do not wish to provide this information. Initial here:

**Gender (check one)**

Male  Female  Not Disclosed

**Race (more than 1 may be selected)**

American Indian/Alaska Native  Asian  White  
 Native Hawaiian/Pacific Islander  Black/African-American  Not Disclosed

**Ethnicity (check one)**

Hispanic/Latino  Not Hispanic/Latino  Not Disclosed

**Veteran (check one)**

Non-Veteran  Veteran  Service-Disable Veteran  Spouse of Veteran  
 Not Disclosed

Purpose of Loan:

Collateral Offered:

I certify that everything I have stated in this application, and any attachments, is correct. I understand Minnesota Department of Agriculture (MDA) will request financial information and supporting corporate documents; a loan officer will contact me detailing the additional information required to complete the loan application process. By signing below I authorize the agency to check my credit and employment history, (including, if I am a corporation or partnership, the credit record and employment history of the owners, directors, officers or partners) to answer questions others may ask about my credit record, and to keep this application whether or not it is approved. I understand that I must update credit information at the agency's request if my financial condition changes. I certify credit is not available at similar rates and or terms from other sources. I further certify that I have read and understand the entirety of this form, including the Tennessee Warning and other notices on page 2.

Print Name	Sign Name	Date
Print Name	Sign Name	Date

## MDA IS AN EQUAL OPPORTUNITY PROVIDER, EMPLOYER, AND LENDER

### Tennessen Warning (Privacy Notice)

The purpose of this form is to collect information about the Business Applicant (Applicant) and its owners, the loan request, existing indebtedness, information about current or previous government financing, and certain topics. The information also facilitates backgrounds checks as authorized by section 7(a) (1) (B) of the Small Business Act, 15 U.S.C. 636 (a)(1)(B). Submission of the requested information is required for MDA to determine eligibility for financial assistance. Failure to submit the information would affect that determination and likely result in a denial of your application. Some of the information collected on the application is classified by Minnesota Statutes, Chapter 13 (The Minnesota Government Data Practices Act) as private or nonpublic data. Private and nonpublic data are available only to MDA employees and contractors that have a valid work assignment that requires access to the data, as well as other persons legally authorized to access the data. Parties with such authorization may include but are not necessarily limited to: Minnesota Management and Budget, Minnesota Department of Administration, United States Department of Agriculture, United States Internal Revenue Service, the Minnesota Department of Revenue, the State Auditor, the Legislative Auditor, the Office of the Attorney General, Minnesota Courts, and law enforcement agencies. Private and nonpublic data will also be shared with any party given valid consent by the data subject to access such data, as well as any party named in a valid court order directing such disclosure.

### Right of Setoff

All persons, businesses, and individuals doing business (a “vendor”) with the state of Minnesota must comply with [Minn. Stat. § 270C.65, Subd. 3](#). Under this law, a vendor consents to disclosure of its social security number, federal employer tax identification number, and/or Minnesota tax identification number, already provided to the State, to federal and state tax agencies and state personnel involved in the payment of state obligations. These identification numbers may be used in the enforcement of federal and state tax laws which could result in action requiring a vendor to file state tax returns and pay delinquent state tax liabilities, if any

### Privacy Act (5 U.S.C. 552a); Collection of Social Security Number (31 U.S.C.7701)

#### Authorities and Purpose for Collecting Information:

MDA is collecting the information on this form, including social security numbers and other personal information, to make a character and credit eligibility decision in connection with you or your company’s application for MDA assistance. MDA may also use social security numbers for the purpose of collecting and reporting on any delinquent fees or other amounts owed MDA. Under the provisions of 31 U.S.C. 7701, the applicant business and any guarantor of the loan are required to provide their social security numbers or other taxpayer identification numbers to do business with MDA. Failure to provide this information will affect your ability to obtain a loan.

### Criminal History and Background Checks:

In evaluating whether the applicant satisfies the criteria for a MPILP loan, MDA considers whether the applicant and each of its Associates possess good character. In making this determination, MDA considers the person’s integrity, candor, and criminal history if any. MDA is specifically authorized to verify your criminal history, or lack thereof, pursuant to section 7(a)(1)(B), of the Small Business Act, 15 USC Section 636(a)(1)(B). In addition, for all forms of assistance, MDA is authorized to make all investigations necessary to ensure that a person has not engaged in acts that violate or will violate the Small Business Act, 15 U.S.C. 634(b)(11). In conducting the criminal background check, MDA also uses your social security number to distinguish you from other individuals with the same or similar name or other personal identifiers. This use is permitted under Executive Order 9397.

### Equal Credit Opportunity Act (15 U.S.C. 1691)

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 or age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant’s income derives from any public assistance program, or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act.

Estimated Schedule of Loan Fees		Date:
Borrower:		Amount of Loan \$
Loan Number:		
Description	Rate	Total
*Origination Fee	1% of loan amount (Minimum \$100)	\$
Application Fee (non refundable)	\$500	\$
<b>Recording and Filing Fees</b>		
Vehicle Liens and Titles	\$15	\$
UCC I	\$25, \$3 Each Additional Debtor	\$
County Fixture Filing	\$46 Legal, \$10 First Name, \$2 Each Additional Name	\$
Title Insurance	TBD: As Billed by the Title Company	\$
Mortgage	\$46 for First 50 Pages, \$2 Each Additional Page	\$
Shared Collateral Agreement	\$46 for First 50 Pages, \$2 Each Additional Page	\$
Flood Determination Letter	\$20	\$
Credit Reports	\$15 Each Individual	\$
Accessibility Survey	\$100	\$
All Other Out of Pocket Costs (conference calls, appraisal, attorney fees, etc.)		\$
<b>TOTAL DUE</b>		<b>\$</b>

*\*Fees are estimated and may be modified to represent the true and correct costs incurred at the time of loan closing.*

Acknowledgement of Borrower (Signature)	Date
-----------------------------------------	------

**\*\*IMPORTANT\*\*** The Federal Government requires that all loan applicants for Federal assistance have a Unique Entity ID. Because MDA loan funds includes Federal Funds, Unique Entity ID's are required for all loan applicants. It is a twelve-digit identification number provided by SAM.gov that validates an organization's name and address. Business owners can request a Unique Entity ID for FREE by completing an online application. Please visit [www.SAM.gov](http://www.SAM.gov) and follow instructions below: Click the "Get Started" link under Register Your Entity or Get a Unique Entity ID 1. Click the "Get Started" link again & then ACCEPT 2. Click "Create an Account" 3. Proceed with answering their questions. Obtain a Unique Entity ID ONLY. Registration is NOT required.