



O:AM DĪĒO:AM Commerce

Enhancing and securing the financial well-being of Cherokee people, businesses, and communities.

DATE:

Credit Application

If you have any questions about filling out this application, Contact 918-453-5536.

Please return completed application to the Small Business Assistance Center.

Please complete the additional Commerical Business Loan Application, if you are seeking a loan for business needs.

Application:

- ♦ Complete all portions of the attached Credit Application and additional forms required
 - ♦ A brief written statement explaining the need for the loan
- ♦ Proof of Tribal citizenship (not required for employee loan)
 - ♦ Verification of employment/income
 - ♦ Proof of collateral for non-employees*
 - ♦ *Collateral must be equal in value to the loan request and have a clear title.*

APPLICANT INFORMATION			
Legal Name and/or <u>Name as Printed on Payroll Check for Employee Loans:</u>			
LAST	FIRST	MIDDLE	MAIDEN
Social Security Number	Date of Birth	Gender	Email address
Driver's License Number	Community	Main Contact Telephone Number	
Co-Applicant: LAST FIRST MIDDLE MAIDEN			
Co-Applicant Social Security Number	Co-Applicant Date of Birth	Gender	Co-Applicant Driver's License Number
Marital Status: Complete ONLY if applying with spouse jointly or if requesting a loan secured by collateral located in a community property state. <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widowed			
Number in Household	Ages	Relation	
Current Address (Street, City, State, Zip)	<input type="checkbox"/> OWN <input type="checkbox"/> RENT	How Long?	County
Previous Address (Street, City, State, Zip)	<input type="checkbox"/> OWN <input type="checkbox"/> RENT	How Long?	County
Amount Requested:	Requested Funding Date:	Requested Repayment Period:	
Loan Purpose:			
Loan Program (Artist, Employee, Consumer, Commercial Business Loan over \$25K, Micro Business Loan)			

EMPLOYMENT INFORMATION			
Current Employer	Address (Street, City, State, Zip)	How Long?	Telephone
Position or Title	Hourly Wage	Monthly Gross Income (Before Tax) \$	Monthly Net income (Take-Home) \$
Previous Employer	Address (Street, City, State, Zip)	How Long?	Telephone
Position or Title	Hourly Wage	Monthly Gross Income (Before Tax) \$	Monthly Net income (Take-Home) \$
Co-Applicant Current Employer	Address (Street, City, State, Zip)	How Long?	Telephone
Position or Title	Hourly Wage	Monthly Gross Income (Before Tax) \$	Monthly Net income (Take-Home) \$

REFERENCES		
Please list three (3) references for Applicant and Co-Applicant, with the first one being the nearest relative that lives outside the home:		
Name and Address	Telephone Number	Relationship
1		
2		
3		

ADDITIONAL INFORMATION		
IS ANY OF THE INCOME LISTED ABOVE LIKELY TO BE REDUCED BEFORE THE CREDIT IS PAID?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
HAVE YOU PREVIOUSLY RECEIVED A LOAN FROM CNEDTA? IF YES, WHEN?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
HAVE YOU COMPLETED TRAINING RECOMMENDED BY CNEDTA?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
IF YES, WHAT IS THE TRAINING COMPLETION DATE? ARE CERTIFICATES ATTACHED?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
DO YOU HAVE HEALTH CARE COVERAGE? IF YES, PLEASE LIST THE PROVIDER:	<input type="checkbox"/> YES	<input type="checkbox"/> NO
DO YOU OR ANY MEMBER OF YOUR FAMILY CURRENTLY WORK FOR CHEROKEE NATION OR ANY OF ITS ENTITIES?	<input type="checkbox"/> YES	<input type="checkbox"/> NO

HOUSEHOLD INCOME			
Monthly Income	\$ After Taxes	Monthly Expenses	\$ After Taxes
APPLICANT'S SALARY		RENT OR MORTGAGE ON RESIDENCE	
SPOUSE'S SALARY (if applicable)		AUTOMOBILES:	
BONUS /COMMISSIONS		INSTALLMENT LOANS	
ALIMONY & CHILD SUPPORT		ELECTRICITY, WATER, OIL, & GAS	
INVESTMENT INCOME		FOOD	
REAL ESTATE INCOME		INSURANCE	
PUBLIC ASSISTANCE		ALIMONY & CHILD SUPPORT	
OTHER:		EDUCATION	
OTHER:		TAXES OTHER THAN FEDERAL	
OTHER:		ENTERTAINMENT	
OTHER:		MEDICAL EXPENSES (INCL INSURANCE PREMIUMS)	
	MONTHLY INCOME		MONTHLY EXPENSES
	MONTHLY DISPOSABLE INCOME		= MONTHLY INCOME LESS MONTHLY EXPENSE

OTHER INFORMATION		
* NOTE: Alimony, Child Support, or Separate Maintenance Income need NOT be revealed if you do not wish to have it considered as a basis for Repaying the Loan.		
ALIMONY, CHILD SUPPORT or SEPARATE MAINTENANCE INCOME is received or paid under the following: <input type="checkbox"/> COURT ORDER <input type="checkbox"/> WRITTEN AGREEMENT <input type="checkbox"/> ORAL UNDERSTANDING		
IS ANY OF THE INCOME LISTED ABOVE LIKELY TO BE REDUCED BEFORE THE CREDIT IS REPAYED?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
ARE YOU A CO-MAKER / CO-SIGNER, ENDORSER, OR GUARANTOR ON ANY LOAN OR CONTRACT	<input type="checkbox"/> YES	<input type="checkbox"/> NO
IF YES, FOR WHOM?	TO WHOM?	AMOUNT \$
ANY GARNISHMENTS: <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YOU HAVE GARNISHMENTS, LIST TYPE AND AMOUNT:	\$
ARE YOU OBLIGATED TO MAKE ALIMONY, CHILD SUPPORT, OR MAINTENANCE PAYMENTS NOT DISCLOSED ABOVE	<input type="checkbox"/> YES	<input type="checkbox"/> NO
IF YES, TO WHOM? NAME	ADDRESS	AMOUNT \$
DO YOU OWE ANY LOCAL OR FEDERAL TAXES? IF YES, PLEASE LIST AMOUNT: \$	<input type="checkbox"/> YES	<input type="checkbox"/> NO
DOES ANYONE HAVE A DAMAGE CLAIM AGAINST YOU? IF YES, PLEASE LIST AMOUNT: \$	<input type="checkbox"/> YES	<input type="checkbox"/> NO
401 K LOAN DEDUCTIONS: <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, PLEASE LIST BALANCE DATE OPENED AND BALANCE:	\$

Please provide titled collateral with no liens attached to this application. This must be property you own and is in your name.

APPLICANT INFORMATION	
Please initial by each item in the space provided that you agree with the statement. If you need additional space please attach to this application.	
1.	_____ I understand that should my loan be approved, prior to closing, CNEDTA will charge a CLOSING FEE in the amount of 2% of the funded amount (not to exceed \$30 for Consumer Loans.)
2.	_____ I give my permission for CNEDTA to check my credit and employment history and to contact landlords, creditors and other individuals and institutions detailed within this Loan Application.
3.	_____ I have never filed for bankruptcy protection. (If you have, please give date and status: _____)
4.	_____ There are no outstanding judgments against me. (If there are, give the amount you could be obligated to pay: _____)
5.	_____ I am not currently a party to a lawsuit. (If you are, please explain: _____)
6.	Ethnicity: Please Choose A or B below: <input type="checkbox"/> A. I do not wish to furnish this information. "The following information is requested by the Federal Government for certain types of loans, in order to monitor the lender's compliance with equal credit opportunity. You are not required to furnish this information, but are encouraged to do so. The law requires that a lender may neither discriminate on the basis of this information nor on whether you choose to furnish it. However, if you choose not to be furnish it, under Federal regulations, this lender is required to note race/ethnicity on the basis of visual observation or surname. If you do not wish to furnish the above information, please check the box below." "This is an Equal Opportunity Program, Discrimination is prohibited by Federal Law. Complaints or discrimination may be filed with the USDA, Director, Office of Civil Rights, Washington, DC 20250." <input type="checkbox"/> B. Please CHECK one: <input type="checkbox"/> CAUCASIAN <input type="checkbox"/> HISPANIC <input type="checkbox"/> AFRICAN AMERICAN <input type="checkbox"/> NATIVE AMERICAN (TRIBE _____)
7.	_____ I certify that EVERYTHING I have stated in this Application and any attachments is correct.

By signing below, I AGREE to the above. Co-Applicant's signatures are required if co-applicant shares ownership of the assets or is a party to obligations disclosed in the Application for a loan from CNEDTA.

Applicant's SIGNATURE _____

Date _____

CO-Applicant's Signature (if applicable) _____

Date _____



SMALL BUSINESS ASSISTANCE CENTER

Commercial Business Loan

Commercial business loans require the submission of the “Credit Application” and a Business Plan, in addition to this supplemental. This document contains tools for developing your own personalized business plan. Please remember these are ONLY tools and do not require you to tailor certain details to the specifics applicable to your own business. For further assistance, we provide “frequently asked questions” to clients with direction and assistance on SBAC and TERO. For any additional questions or concerns, please contact our office at 918-453-5536.

Checklist of Required Documentation

- | | |
|---|---|
| <input type="checkbox"/> Completed “Credit Application”, Signed and Dated | <input type="checkbox"/> Cash Flow Projections for One Year (Attach) |
| <input type="checkbox"/> Business Plan (Attach) | <input type="checkbox"/> Minority Statement Signed and Dated |
| <input type="checkbox"/> Copy of Driver’s License | <input type="checkbox"/> Proof of Equity Investment |
| <input type="checkbox"/> Copy of Tribal citizenship | <input type="checkbox"/> Detailed list of Collateral available before and after loan proceeds |
| <input type="checkbox"/> Letter of Reference | <input type="checkbox"/> Employment Verification, if applicable |
| <input type="checkbox"/> Personal Financial Statements (Attach) | <input type="checkbox"/> Proof of Workman’s Compensation and/or Waiver, if applicable |
| <input type="checkbox"/> Family Budget (Attach) | <input type="checkbox"/> Other documentation may be required depending on business |

Websites offering assistance

Provided below are two websites offering business plan assistance, advice, and templates:

www.score.org

www.sba.gov

www.entrepreneur.com

www.womenentrepreneur.com

At the end of the application is a Detailed Business Plan Outline. This is just an outline, and only meant to provide guidance while developing your business plan. When using the Detailed Business Plan Outline, be sure to address each point that applies to your business in a narrative paragraph format within your own business plan. This is NOT a question and answer form, but a guideline as to what you should address in your business plan. It is very important to include as many details as possible within your business plan keeping it concise and clear. This outline will assist you in covering the appropriate topics.

For further assistance, we provide “frequently asked questions” to clients with direction and assistance on SBAC and TERO. However, we are always here to provide service and answer questions. For any additional questions or concerns, please contact our office at:

Cherokee Nation Small Business Assistance Center (SBAC)
PO Box 948
Tahlequah, OK 74465-0948
918-453-5536
www.cherokeesbac.org

BUSINESS INFORMATION

OPERATING INFORMATION

LEGAL BUSINESS NAME:

Legal Business Owner(s) Name(s):

Amount Requested:

Requested Funding Date:

Requested Repayment Period (Terms):

Loan Purpose (Start-up, Expansion, Equipment, etc):

Current Address (Street, City, State, Zip)

Community:

Cell Phone:

Daytime Phone Number:

Evening Phone Number:

Is your business: Start -Up Currently Operating, Since:

Business Operation Hours (full-time, part-time, seasonal):

What type of Industry: Service Retail Wholesale

Not Including you, how many employees: # _____ Full-time # _____ Part-time

Describe the Type of Product or Service your business will offer:

Please list any State and/or Federal Licenses your business is required to have in order to operate AND do you currently have this License?

Why did you choose this type of business?

What is your experience in this type of business?

Have you previously owned a business? If yes, why are you no longer in this business? If you have not owned a business please indicate First Time Business or Not Applicable.

What are your business GOALS for the first year of operation?

Will this business be your Primary Source of Income? YES NO

MINORITY STATEMENT

1. I certify that **EVERYTHING** I have stated in the Application Process and any attachments are correct.
2. I certify that doing business as _____ (name of your business) I agree to hire minority and moderate to low income individuals.

By signing below, I AGREE to the above, the Business Plan, and the Credit Application. Co-Applicant's signatures are required if co-applicant shares ownership of the assets or is a party to obligations disclosed in the Application for a loan from CNEDTA.

Loan Applicant / Business Owner Signature

Date

Loan Applicant / Business Owner Signature

Date

Co-Loan Applicant / Business Owner Signature

Date

Detailed Business Plan Template Outline

I. COVER SHEET

II. TABLE OF CONTENTS

III. EXECUTIVE SUMMARY

A. Purpose of the business plan.

- Define the purpose of the business
- Describe who is requesting the money and how much
- Describe why the money is needed and for what purpose
- Describe the benefit to the business and the repayment process
- Describe the Tribal, Local, and regional benefits of this plan.

B. Description of the Business.

- Type of Business (manufacturing, merchandising, or service)
- Status of business. Indicate if the business is a start-up, expansion, or a take-over
- Describe the legal business structure (sole proprietorship, partnership, corporation, Subchapter S Corporation)
- Indicate the level of profitability and opportunity for success
- State the opening day of business and hours of operation, including details on seasonally adjustments.
- State the location of your business and location needs, if applicable.
- State the ownership of buildings and equipment (owned or leased)
- If renovations are required, indicate renovations needs and requirements.

C. For a new Business:

- Indicate level of experience in the business.
- Indicate the level of research in the field of business and response to success of such a business.
- Describe how your business will be unique and capture an opportunity.
- Indicate the supply chain: potential suppliers to see what services/training are provided.
- Indicate the usage of trade credit.
- Indicate the need for contracts, terms, and anticipate contract work.
- Reference any firm contract or letter and include it as a supporting document.

D. For a take-over:

- Indicate when and by whom was the business founded.
- Describe why the owner is selling the business and your changes to the business to increase success.
- Indicate how the purchase price was determined.
- Indicate the trend in sales.
- Indicate how will your management make the business more profitable.

IV. MARKETING PLAN

A. Target markets served:

- Describe your target customer (age, gender, profession, income, geography, etc.) and market size (numbers, growth potential)
- Describe your pricing strategy and level of competitiveness.

B. Marketing mix and plan

- Nature of products and service: Quality, quantity, assortment, guarantee or warranty, packaging.
- Nature of place/distribution: Manufacturing, retail store, wholesaler, warehouse, and transportation.
- Nature of price: Variable cost, fixed cost, competitive price, consumer reaction.
- Nature of promotion: Sales people, sales promotion, advertising, and publicity.

C. Competition

- Indicate the five nearest competitors and analysis compared to your business on level of growth, operation similarity, strengths, weaknesses, location, price, products, services, and describe your opportunity.
- Indicate your operational strategy.

V. MANAGEMENT PLAN

A. Background and Experience

- Describe your business background and experience.
- Describe level of education (include all formal and informal learning experiences)
- Personal data (age, where you currently live and have lived, special abilities, interests, operational experience, and reasons for going into business).
- If lacking experience and knowledge, indicate your resources to fulfill business needs.
- A personal financial statement must be included as a supporting document in your business plan.

B. Daily operations and Personnel

- Draft an organizational chart and attach to business plan.
- Describe individual roles, reporting chains of command, salaries or rates of pay, and final decision making authority.
- Indicate other roles and required resources in your daily operations (accountant, lawyer, etc.).
- Describe management team and skill set of employees including hours of work, status, salaries or wages, overtime requirements, benefits, and training.
- Describe hiring needs, availability of individuals for staffing,

VI. FINANCIAL PLAN

A. Sources and uses of funds?

- Indicate your sales projection.
- Breakdown of expenses (total monthly expenses) and Start-up Costs

B. Break-even analysis.

C. Capital equipment list:

- Major equipment and normal accessories
- Minor shop equipment
- Other equipment

D. Pro-forma income statements

- Year one-monthly
- Years two and three-Quarterly
- Notes and explanations for pro-forma income statements

E. Pro-forma cash flow (for a minimum of three years)

F. Pro-forma balance sheet (for a minimum of three years)

The Small Business Assistance Center can provide assistance in reviewing financial statements and giving you some guidance when preparing your financial documents. It is recommended that you have resources available to provide assistance with financial planning.

VII. APPLICATION & EXPECTED EFFECT OF LOAN / INVESTMENT

A. Indicate level of Equity (Expressed in a percentage)

B. Indicate level of Collateral (Detailed Before and After Loan)

C. Do you need this new money? Establish a procedure for making borrowing decisions.

D. Indicate the usage of loan funds. (This can be fairly general, i.e. working capital, new equipment, inventory, and supplies, etc.)

E. Describe your Equipment / Product / Service. Things to consider in making an application and indicate your reasons for the decisions: Should you lease or buy? What is the item being bought? Who is the supplier? What is the price? How much will you pay in sales tax? Installation charges, and/or freight fees? What is the specific name and model of your purchase?

F. How will the loan make your business more profitable?

VIII. SUPPORTING DOCUMENTS AS NEEDED

A. Resumes of all existing employees and potential employees.

B. Job descriptions

C. Credit reports

D. Letters of reference

E. Copies of contracts

F. Copies of leases

G. Copies of letter of intent

H. Legal documents

I. Production requirements

J. Other documents may be needed depending on the nature of the business.