



NEW MEXICO · ARIZONA · COLORADO

Lending. Supporting. Inspiring.

Loan Application

1. Contact Information

Business

Name: _____ **Business #:** () -

Business Address: _____ **Fax #:** () -

City: _____ **State:** _____ **Zip:** _____ **Website:** _____

Borrower's

Name: _____ **Home phone:** () -

Home Address: _____ **Work phone:** () -

City: _____ **State:** _____ **Zip:** _____ **Email address:** _____

Previous Address (If less than 1 year): _____

Names credit could be under: _____ **Marital status: (OPTIONAL)** Married Single Legally Separated

Social security #: _____ **Drivers license #:** _____ **Date of birth:** _____ **Years of Education:** _____

2. Business Information

Time owning business: _____ **Years:** _____ **Months:** _____ **Ownership:** individual partnership corporation non-profit

Business Location: Home Storefront Market Street **Other (Explain)** _____

Sales in best month: \$ _____ **Month:** _____ **Worst month:** \$ _____ **Month:** _____

Is your business seasonal? yes no

Where does the business get its raw materials or supplies? _____

How do you pay for them? credit cash net 30/60/90 other (explain): _____

Description of business:

Years of Experience: _____

3. Loan Information

Loan amount requested: \$ _____

Approximate monthly payment you would feel comfortable with: \$ _____

Dollar amount	Purpose of loan (please break down purpose of loan by cost)
\$	
\$	
\$	
\$	

What is the minimum loan amount you can work with and what would the purpose be:

Dollar amount	Purpose of loan (please break down purpose of loan by cost)
\$	
\$	
\$	
\$	

4. Landlord Information

Home Landlord's Name: _____	Phone #: _____	()
Time at Current Residence: _____	Years: _____	Months: _____
	Fax #: _____	()
Business Landlord's Name: _____	Phone #: _____	()
Time at Current Location: _____	Years: _____	Months: _____
	Fax #: _____	()

5. Employment Information

If employed, Name/address of employer: _____

Phone # () - Fax# () - Income : \$ per month (approx.)

6. Financial Information

Business Assets (Materials, inventory, machinery, accounts receivable, furniture, fixtures, Vehicles, etc.)

Item	Value	Own Free and Clear
1. _____	\$	<input type="checkbox"/> Yes / <input type="checkbox"/> No
2. _____	\$	<input type="checkbox"/> Yes / <input type="checkbox"/> No
3. _____	\$	<input type="checkbox"/> Yes / <input type="checkbox"/> No
Total:	\$	

Business Liabilities (Include all business debts, such as vehicles, accounts payable, loans with other lenders, banks, suppliers, etc., and the total balance of any loans or debts.)

Item	Monthly Payment	Owed to	Balance
1. _____	\$		\$
2. _____	\$		\$
3. _____	\$		\$
Total:	\$	Total:	\$
Total Owner's Equity (Assets – Liabilities)	Total:	\$	

7. What collateral will be used to secure this loan (Please include as much detail as possible including serial number, model number, etc. and feel free to include a separate page)

Item	Resale	Own free and clear?
_____	\$	
_____	\$	
_____	\$	
_____	\$	

8. Bank Account Information

Do you have a bank account? yes no If yes, personal business both Type of Account personal business both

9. Monthly Financials

Personal Financials		
		Monthly
1. Income		
	Take home from business	
	Spouse's income	
	Applicant's employment income	
	Any other income	
	Total Personal Income	
2. Personal Expenses		
	Education and Childcare	
	Food & Clothing	
	Child Support / Alimony	
	Utilities	
	Insurance, Gasoline, Miscellaneous	
	Home Rent/Mortgage	
	Credit card payments	
	Vehicle and Other Loan payments	
	Total Household Expenses	
	Personal Surplus	
	Total Personal Debts	
	Personal Debt/Income Ratio	
Business Financials		
Existing <input type="checkbox"/> Projected <input type="checkbox"/>		
1. Income		
	a. Gross Sales	
	b. Any Other Income	
	Total Business Income	
2. Business Expenses		
	COGS- Raw materials, merchandise	
	Salaries/Labor	
	Insurance, Gasoline, Miscellaneous	
	Utilities	
	Business Rent/Mortgage	
	Credit card payments	
	Vehicle and Other Loan payments	
	Total Business Expenses	
	Gross Business Surplus	
	Owner's Draw	
	Net Business Surplus	
	Total Capacity	

10. Co-borrower's Information

Co-Borrower's Name: _____

Home phone: () - _____

Address: _____ Work phone: () - _____

City: _____ State: _____ Zip: _____ Email address: _____

Previous Address (If less than 1 year): _____

Names credit could be under: _____

Social security #: _____ Drivers license #: _____ Date of birth: _____

11. Credit Information

If you presently have an active bankruptcy, you do not qualify for a loan under our program's guidelines. If you have successfully completed your bankruptcy plan, please provide us with your discharge papers. Thank you.

If you presently show past due or slow pay in child support accounts, you do not qualify for a loan under our program's guidelines. If you are under a payment plan and in compliance with it, please provide us with proof of payments. Thank you.

It is important to inform ACCION if you are presently delinquent in your mortgage and/or vehicle payments. If you are aware such accounts are appearing as late on your credit report, and are in fact up-to-date, please provide supporting information. Thank you.

Have you ever filed for bankruptcy? yes no
Is it active? yes no

Are you behind on any child support payments? yes no

Can you prove that you are current? yes no

Are you behind on any mortgage and/or vehicle payments? yes no

Can you prove that you are current? yes no

12. Referral information

How did you hear about ACCION New Mexico • Arizona • Colorado? _____

13. Personal References

(1). Family Member _____ Address _____ Contact number _____
Contact number (secondary) _____ Relationship _____

(2). Friend _____ Address _____ Contact number _____ Contact
number (secondary) _____ Relationship _____

(3). Supplier or Business Associate _____ Address _____
Contact number _____ Contact number (secondary) _____ Relationship _____

I attest that all of the information on this application is true. I authorize ACCION New Mexico • Arizona • Colorado (ACCION) to investigate and verify the above information, and contact any references regarding this application. I also authorize ACCION to perform a credit check, which may include obtaining consumer and/or commercial credit reports and to exchange information about credit experience with other creditors from time to time, as authorized by law. The release in any manner by ACCION of all information is hereby authorized whether such information is of record or not, and I hereby release all persons, agencies, firms, companies, etc., from any damages resulting from such information. I understand that if I am applying as a co-borrower, co-applicant or co-signer, I am applying for joint credit with the other parties on this application. I understand that if I receive a loan from ACCION, I must make my full monthly payments on time. I understand that I cannot be delinquent in my repayment of this loan and that I must use the loan for the business purpose I specified in my loan application. I also understand that delinquent loan payments can adversely affect my credit record. I understand that ACCION will retain this application whether the loan is approved or denied and that I can appeal a denial of this loan request. By submitting this application, I agree to the above terms and acknowledge that my application is not complete until all required documents are received.

Signature of Borrower: _____ Date: _____

Signature of Co-borrower: _____ Date: _____

Person conducting intake (if applicable): _____ Date: _____

EQUAL CREDIT OPPORTUNITY ACT

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against 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); 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. The Federal agency that administrates compliance with this law concerning this creditor is the Federal Trade Commission. For more information you may contact the Federal Trade Commission Consumer Response Center by phone at 1-877-382-4357 or TDD 1-866-653-4261 or via www.ftc.gov.

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