

G.O.E.D. Loan Application

 Livestock Participation loan

 Ag Facility Participation loan

 MicroLOAN

APPLICANT INFORMATION

Name Age

Address

City/State/Zip

Phone #

County

LENDER INFORMATION (if Participation Loan)

Name

Address

City/State/Zip

Phone #

Email

Additional Applicant Info. (if applicable):

Name of Applicant Business:

Name (address) of parent company:

Name (address) of affiliates:

Name (title) of contact person:

Business or federal tax ID number: SD sales tax number:

SD unemployment insurance number: NAICS code:

Primary Business activity:

Business type: Fiscal Year End:

Date business established: Date business established in SD:

Background information on the applicant, credit history, character, expertise, etc.:

Livestock Participation Loan Information ONLY - complete this section, sign/date application and submit.

Applicant's Eligibility:

- Applicant is a resident of South Dakota at the time of loan closing: Check Box
- Applicant derives 60% or more of GROSS income from farming/ranching: Check Box
- Applicant is age 18 or older: Check Box
- Applicant is applying as a "qualifying small or beginning farmer" (documentation attached) Check Box

Total Loan Amount \$

Participation Am't \$

Lender loan Am't \$

Lender Interest Rate

Term/Repayment Period

Type of Livestock

No. of Head Est. purchase price/head \$

Identified By: Brand Tags Tattoo

Other

Description and Location of ID:

Other Collateral used in addition to livestock being purchased:

Value \$

Other Livestock Owned:

Amount and Type	Lien Amount(if any)	Creditor
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

Type and amount of feed available

Additional Feed or supplements to be purchased

Any interests/claims on feed; with whom

Legal description of land where livestock will be kept

Is land owned or rented/how many acres

Describe facilities where livestock will be kept

Attachments:

Applicant's 1040 and 1040F Federal Income Tax Returns for most recent 2 years:

Applicant's projected cash flow for livestock and entire operation:

Applicant's current financial statement signed and dated within 30 days of the application date:

Cover letter from the Lender with applicant background information:

Check Box
 Check Box
 Check Box
 Check Box

Facility Participation and MicroLOAN Information ONLY - complete this section, sign/date application and submit.

Description of Project/Purpose of the Loan:

Loan and Collateral Summary:

Interest rate and terms of Lender Loan (if participation loan):

Lender Loan Amount	\$ <input type="text"/>	% of total project	<input type="text"/>
GOED Loan Amount	\$ <input type="text"/>	% of total project	<input type="text"/>
Applicant Capital	\$ <input type="text"/>	% of total project	<input type="text"/>
Other Sources	\$ <input type="text"/>	% of total project	<input type="text"/>
TOTAL PROJECT COSTS	\$ <input type="text"/>		

Land	\$ <input type="text"/>
Building and/or Improvements	\$ <input type="text"/>
Equipment purchase	\$ <input type="text"/>
Other	\$ <input type="text"/>
TOTAL PROJECT COSTS	\$ <input type="text"/>

Cost	Existing Liens	Appraised Value
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

*Please include additional pages if needed.

Please summarize current and the next three years projected job creation regarding this project:

Describe any future or contingency plans for the business:

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Banks or credit unions where business/principal personal accounts are maintained:

Name	City/State	Phone Number	Type of Account	Balance	Account Number

Present business trade creditors or trade references:

Name	City/State	Phone Number	Type of Account	Balance	Date

Management Information (list all officers, directors, or general partners - attach resumes):

Name/Title	Address/Phone No.	Compensation	Social Security No.

Major Stockholders, partners or proprietors (totaling 100% ownership), include resumes and personal financial statements:

Name/Title	Address/Phone No.	Compensation	Social Security No.

What permits are needed; status of those (please include engineering/environmental study if applicable):

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Describe your marketing and/or business plan; target customers, market area, anticipated sales, etc. (please attach):

Attachments:

- Applicant's 1040 and 1040F Federal Income Tax Returns for most recent 3 years: Check Box
- Applicant's projected cash flow for operation: Check Box
- Applicant's current financial statement signed and dated within 30 days of the application date: Check Box
- Cover letter from the Lender with applicant background information: Check Box
- Business plan, marketing plan, feasibility study if applicable: Check Box
- Environmental/Engineering study if applicable: Check Box
- If applicant is not an individual, copies of articles of incorp, by-laws, cert of partnership, etc. Check Box

Governor's Office of Economic Development (GOED) is an equal opportunity lender. Under the Equal Credit Opportunity Act, it is illegal to discriminate in any credit transaction on the basis of race, color, national origin, religion, sex, marital status or age. The applicant realizes that GOED and any of its boards or committees may not process any incomplete application. The applicant further understands that there is no right to financing under these programs. Approval of the application does not constitute a guarantee that the project will receive financing. Financing is contingent on the availability of funds, compliance with all program requirements, execution of all loan agreements, and the closing of the project by the lead lender.

The information provided to GOED is for the sole purpose of determining eligibility for the loan programs and will be for the sole use of the GOED. All information will be treated in a confidential manner pursuant to codified law and will not be for public disclosure unless specifically authorized by the borrower.

By signing below, the applicant declares and affirms under the penalties of perjury that the information contained herein is accurate and to the best of my knowledge and belief, is in all things true and correct.

Applicant Signature (required)	<input style="width: 100%;" type="text"/>	Date:	<input style="width: 100%;" type="text"/>
Co-applicant Signature (required)	<input style="width: 100%;" type="text"/>	Date:	<input style="width: 100%;" type="text"/>
Loan Officer (if participation loan):	<input style="width: 100%;" type="text"/>	Date:	<input style="width: 100%;" type="text"/>
Title	<input style="width: 100%;" type="text"/>	Signature	<input style="width: 100%;" type="text"/>

GOED Section:

Date Received	<input style="width: 100%;" type="text"/>
Total Loan \$	<input style="width: 100%;" type="text"/>
GOED Loan Approved \$	<input style="width: 100%;" type="text"/>
GOED Signature	<input style="width: 100%;" type="text"/>
Title	<input style="width: 100%;" type="text"/>
Date	<input style="width: 100%;" type="text"/>