

NORTH DAKOTA DEVELOPMENT FUND SMALL BUSINESS TECHNOLOGY INVESTMENT APPLICATION

NORTH DAKOTA DEPARTMENT OF COMMERCE SFN 60029 (10-2019)

Applicant Name		Social Security Number/Federal Tax ID Number						
Primary Contact		Title		Telephone Number				
Address		City		State	ZIP Code			
Email Address		Date of Application		Date Business Established				
Legal Structure ☐ Sole Proprietorship ☐ General Partnership ☐ Limited Liability Comp	☐ Corporat ☐ Limited F eany ☐ Other	ub Chapter S Corpo on-Profit	ration		□ New Business□ Existing Business□ Purchase Existing Business			
Purpose of Request								
Current Number of Emplo	yees Projected	s within 24 Months	Current Average Wa	age	Average Wage within 24 Months			
Financial Institution/Devel	Primary Contact			Telephone Number				
Address		City			State	ZIP Code		
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Sources of	ount	Sources	of Fund	Amount				
A. Owner Equity		\$		D. Other			\$	
B. ND Development Fu	nd	\$		E. Other			\$	
C. Matching Funds \$				TOTAL		\$		
Use of Funds	Source A	Source B	Source C	Source D	So	urce E		Total Cost
Land Acquisition								
Building Construction								
Building Purchase								
Site Improvement								
Machinery/Equipment								
Inventory								
Working Capital								
Other								
TOTAL								

Note: Attach a complete description of the use of the North Dakota Development Fund (NDDF) funds (i.e. list of Machinery & Equipment to be purchased, description of building to be purchased or erected and inventory purchased).

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Summary of Colla	iteral		Present Ma	rket Value	Prese	nt Mortgage Bal	ance		NDDF Collate	ral Position
A. Land and Building		\$			\$					
B. Machinery & Equipme	ent	\$			\$					
C. Furniture & Fixtures \$		\$			\$					
D. Accounts Receivable		\$		\$						
E. Inventory \$			\$							
F. Other		\$		\$						
TOTAL COLLATERAL		\$			\$					
Primary Source of Repaym	nent (Describe	e)								
Present Indebtedness: B	usiness Debts	s, Contrac	cts, Notes ar	nd Mortgages Payab	ole					_
Owed To	Original Amount		Original Date	Present Balance	Rate of Interest	Maturity Date (MM/DD/YYYY)	Monthl Paymei		Security	Status (Current/ Delinquent)
	Note: Ple	nace reta	in conics f	or yourself and for	vour financ	ial institution/de	walanman	t agar	201	
Present Banking Referen		ease rela	iiri copies id	or yoursen and for	your illiand	าลา การแนนเบก/นิธิ	evelopmen	ayei	icy.	
Financial Institution City State		Type of Account Account Number(s)			Contact Person			Telephone Number		
Trade References						<u> </u>				<u>l</u>
Trade Supplier				Address			Materials and Products Supplied			
Management (Officers, Di	rectors, Owne	ers/Invest	ors, etc.)							
Name and Title				Address			Percentage Ownership			
Key Advisors						Т				
		Name		Fin	m/Company				Address	
Attorney										
Accountant										
Insurance Agent										

NOTE: THE FOLLOWING EXHIBITS MUST BE COMPLETED WHERE APPLICABLE. ALL QUESTIONS ANSWERED BECOME PART OF THE APPLICATION.

	 If your collateral consists of (A) Land and Building, (B) Machinery and Equipment, (C) Furniture and Fixtures, (D) Accounts Receivable, (E) Inventory, (F) Other, please provide and itemized list labeled Exhibit A that contains serial and identification numbers of all articles that have a value greater than \$500. Include a legal description of Real Estate offered as collateral. Furnish a signed current personal balance sheet and three years of tax returns for each stockholder (with 20% or greater ownership), partner, officer and owner. Social Security number should be included on personal financial statement. It should be as of the same date as the most recent business financial statements. Label as Exhibit B. Do you have any co-signers and/or guarantors for this loan? Yes No If yes, please submit their names, addresses, tax ID numbers, three years of tax returns and a current personal balance sheet(s). Label as Exhibit C. Are you buying machinery or equipment with the proceeds? Yes No If yes, you must include a list of equipment and cost as quoted by the seller and a purchase invoice. Label as Exhibit D. Have you, or has any officer of your company ever been involved in bankruptcy or insolvency proceedings? Yes No If yes, please provide details. Label as Exhibit E. Are you, or is your business involved in any pending lawsuits? Yes No If yes, please provide details. Label as Exhibit F. 	 Does your business, its owners or majority stockholders own or have a controlling interest in other businesses? Yes No If yes, please provide their names and the relationship with your company along with a current balance sheet and operating statement for each. Label as Exhibit G. Do you buy from, sell to or use the services of any concern in which someone in your company has a significant financial interest? Yes No If yes, provide details on a separate page. Label as Exhibit H. Attach a copy of funding commitments from each source of funding. Label as Exhibit I. Are any current business loans delinquent? Yes No If yes, describe on separate page. Label as Exhibit J. Are any of the company's principals related to or doing business with any NDDF staff or Board member? Yes No If yes, describe on separate page. Label as Exhibit K. Are there any judgments against you? Yes No If yes, list separately. Label as Exhibit L. Attach a full business plan. Label as Exhibit M. 				
Program Criteria: 1. Maximum award \$50,000 2. A qualified applicant must: a. Be a North Dakota Business that is at the start-up state; b. Be a Primary Sector Business in the technology field; c. Shall meet the underwriting guidelines of the NDDF. 3. Eligible uses of funds: a. Investment funds may be used for developing a proof of concept b. Working capital c. Equipment d. Real estate The undersigned specifically acknowledge(s) that: (1) verification or re-verification of any information contained in the application and I/We have a continuing obligation to amend and/or supplement the information provided in this adelinquent, the Lender, its agents and assigns may, in addition to all their other right and remedies, report my/our name(s) and account infor reporting agency. PRIVACY ACT INFORMATION						
	Your social security number is requested to enable the North Dakota Developr N.D.C.C 10-30.5-13 for determining whether the applicant is eligible for NDDF you do not provide your social security number, the NDDF may be unable to come with the North Dakota Development Fund to make all inquiries deem determine the credit worthiness of the undersigned. We certify that the information provided in this application is true and correct in the content of the north Dakota Development Fund to make all inquiries deem determine the credit worthiness of the undersigned.	funding. Disclosure of your social security number is voluntary. However, if onduct a credit check and may decline to process the NDDF application. ned necessary to verify the accuracy of the information contained herein and to				
	application.					
	Applicant (please print)	Financial Institution/Developer (please print)				
	Authorized Signature	Authorized Signature				
	Date	Date				
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Instructions for Applicant:

Submit the supporting documentation and the completed application to: North Dakota Development Fund PO Box 2057 Bismarck, ND 58502-2057

For more information on the North Dakota Development Fund, including additional requirements, please visit: http://www.legis.nd.gov/cencode/t10c30-5.pdf (see § 10-30.5-13).

If you have any questions...

Call: 701-328-5310

Write to: North Dakota Development Fund

PO Box 2057

Bismarck, ND 58502-2057

Visit: www.NDDevelopmentFund.com