

Name and Address of Business	Phone Number		
	Email Address		
Federal Tax ID	State Tax ID		
Business Organization: Corporation	Sole Proprietorship		
Partnership	Other		
Business Owners Names and Addresses			
1	Title		
	Percent of Ownership		
	Social Security Number		
	Titlo		
2	Title  Percent of Ownership		
	Social Security Number		
Type of Business			
New Business Existing	Date Established		
Describe the company's business:			



Project Address/Location:
Parcel ID(s):
Describe the Proposed Multi-family Housing Project:
Unit Description:
Total No. of Units:
Market Rate: Estimated Rent Range (\$):
Income-Restricted: Estimated Rent Range (\$):
Project Timeline:
Describe the Details of the Loan Request:
Loan Amount \$
Interest Rate
Term



#### **Use of Funds:**

	MEDA RLF	Bank	Equity	Other	Subtotals
Aquire Land	\$	\$	\$	\$	\$
Aquire Building	\$	\$	\$	\$	\$
New Construction of Building	\$	\$	\$	\$	\$
Improve or Renovate Building	\$	\$	\$	\$	\$
Other:	\$	\$	\$	\$	\$
TOTALS	\$	\$	\$	\$	\$

#### **Project Summary:**

	MEDA RLF	Bank	Equity	Other	Other
Loan Amount	\$	\$	\$	\$	\$
Loan Term (Years)					
Loan Interest Rate	%	%	%	%	%
Annual Debt Service	\$	\$	\$	\$	\$
Type of Collateral					
Security Position					
Type of Guarantee					



		Yes No			
Have you as a business owner or personally gone through bankruptcy?					
Have you as a business owner or personally ever defaulted on a loan commitment?					
Have you as a business owner ever had a judgement issued against you?					
•	ntion provided in this application and in its ur knowledge. I/We agree to provide any a	•			
Applicant Signature	Applicant Signature	Date			
Applicant Full Name	Applicant Full Name	Date			
<u>Applic</u>	ation Attachments Required				
Letter from the Zoning I	Director verifying project compliance	with zoning regulations			
Site Plan					
Detailed Project Budget					
Written commitment do	ocumentation from all other sources	of funding			
Purchase Agreement (if	applicable)				
Appraisal (if applicable)					



#### **Tennessen Warning: Data Privacy Statement**

The information provided in the application materials or to be obtained separately as a part of the application process will be used by the lender to determine whether you qualify as a prospective borrower for the Madelia Economic Development Authority (EDA) Revolving Loan Funds. The information provided in the application and information authorized above for assistance will become a matter of public record with the exception of those items protected under Minnesota Statutes Chapter 13 *Government Data Practices*.

The private data whom this information may be shared include:

- 1. The EDA Loan Review Committee and EDA Board; and
- 2. Staff who are involved in program administration; and
- 3. Auditors who perform required audits of the program; and
- 4. Authorized personnel from other County, State, Federal or Regional Agencies providing funding assistance to you; and
  - 5. Those other persons who you authorize to see the information; and
  - 6. Law enforcement personnel in the case of suspected fraud.

Unless otherwise authorized by MN Statutes or Federal Law, other government agencies using the private data must also handle the data as private. You may wish to exercise your rights as contained in the Minnesota Government Data Practices Act. Those rights include:

- 1. The right to see and obtain copies of the data maintained on you; and
- 2. Be told the contents and meaning of the data; and
- 3. Challenge the accuracy and completeness of the data.

#### TO EXERCISE THESE RIGHTS

Contact: Madelia EDA at (507) 642-3245 or 18 Drew Ave NE, Madelia, MN 56062

#### **SIGNATURE**

I declare that	I have read and	understand the	information	given above	regarding the	Minnesota	Data Pra	actices
Act.								

Applicant Signature	Applicant Signature	Date
Applicant Full Name	Applicant Full Name	