



MANDAN GROWTH FUND PACE & FLEX PACE APPLICATION

Please complete and return to: City of Mandan Business Development & Communications Dept., 205 Second Ave. NW, Mandan, ND 58554 or ehuber@cityofmandan.com. For more information, call 667-3485. Applications will be reviewed at Mandan Growth Fund Committee meetings, scheduled as needed. Please allow 3 – 4 weeks for consideration.

GENERAL CONTACT INFORMATION										
Business Name:					FOR INTERNAL USE ONLY					
Business Address:					Date Received:					
City:		State:		Zip Code:		Date to Growth Fund:				
Project Address:					Date to Commission:					
City:		State:		Zip Code:		Date Commission Approved:				
Contact:			Phone #:			Funding Amount Approved:				
Cell #:		Fax #:			Payment Status:					
E-mail:					Payment Entry Date:					
Website:					Date Payment Mailed:					
Federal Tax ID #:					Other:					
Date Business Established:										
Amount of Growth Funds Requested:										
TYPE OF FUNDING REQUESTED (Please check one)										
<input type="checkbox"/> PACE Loan			<input type="checkbox"/> Flex PACE Loan			<input type="checkbox"/> Flex PACE Affordable Housing Loan				
PROJECT DESCRIPTION										
<input type="checkbox"/> New Business			<input type="checkbox"/> Business/Equipment Updates			<input type="checkbox"/> Community Development				
<input type="checkbox"/> Business Expansion			<input type="checkbox"/> Purchasing Existing Business			<input type="checkbox"/> Other _____				
BUSINESS OWNERSHIP INFORMATION										
Ownership Structure:										
<input type="checkbox"/> Sole Proprietorship			<input type="checkbox"/> Partnership			<input type="checkbox"/> Limited Liability Company				
<input type="checkbox"/> Corporation			<input type="checkbox"/> Other _____							
Key Owner Names (list all with a 20% interest or more)					% Ownership					
Key Management Name/Phone #					Titles					
KEY ADVISORS										
		Name		Firm/Company		Phone Number				
Attorney:										
Accountant:										
Other:										
FINANCIAL INFORMATION										
Total Project Cost:					Owner's Equity:					
BANKING INFORMATION										
LOAN TYPE		Part of Construction Finance <input type="checkbox"/> Yes <input type="checkbox"/> No			OR		Permanent Finance <input type="checkbox"/> Yes <input type="checkbox"/> No			
FINANCIAL INSTITUTION		CONTACT PERSON			PHONE NUMBER		E-MAIL			
EMPLOYEE INFORMATION										
Current Employees		F.T.		Avg. Salary	\$	P.T.		Avg. Salary	\$	
3-Year Projection		F.T.		Avg. Salary	\$	P.T.		Avg. Salary	\$	
5-Year Projection		F.T.		Avg. Salary	\$	P.T.		Avg. Salary	\$	

A. EXECUTIVE SUMMARY

Please fill out this form if you are not submitting a full business plan or an executive summary that answers these questions.

Business Name			
Funding Requested			
Total Square Feet		Industry Type	
What is the outline of the proposed project?			
What is the primary purpose of the business?			
What products and services are provided by the business?			
Who are the local competitors?			
What percentage of business income comes from the following:			
<i>Mandan/Bismarck</i>	%	<i>Other In-State</i>	%
How many jobs will this project create?	Full Time	Part Time	
Average Salary of New Jobs			
How will this project benefit the community?			
Additional information regarding this project:			
Has or will this project receive any other incentives <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:			

B. PROJECT FINANCING BREAKDOWN

Costs		Equity	Bank	Mandan Growth Fund
Site Work				
Land Acquisition				
Purchase of/Improvements to Building				
Purchase of Machinery/Equipment				
Inventory Purchased				
Working Capital				
Interest Buy Down				
Other:				
Other:				
Desired terms of financing requested from Growth Fund				
Loan Type	<input type="checkbox"/> Forgivable Loan <input type="checkbox"/> Repayable Loan <input type="checkbox"/> Other (please specify):			
If a repayable loan, requested interest rate				
Requested length of buy-down period (# of months or years)				
Please attach the following: <ul style="list-style-type: none"> • Copies of bids received that support cost assumptions • A commitment letter from a financial institution that indicates terms for project financing. • Bank of North Dakota Exhibit A payment schedule with proposed loan & interest buy-down 				

C. CURRENT AND PROJECTED EMPLOYMENT

CURRENT AND PROJECTED EMPLOYMENT									
Type of Employment	Existing Jobs At Date of Application		Employment Projection Year 1		Employment Projection Year 2		Employment Projection Year 3		Starting Wage/Salary
	FT	PT	FT	PT	FT	PT	FT	PT	
Professional									
Managerial									
Technical									
Skilled									
Unskilled									
Semi-skilled									
Totals									

Salary and benefit total amounts should be provided for each job category.

Do salary and wage employees receive the same benefits? Yes No

The data which you supply to the Growth Fund will be used to assess your firm’s qualifications for a business loan. We will not be able to process your financial application without it. There is a possibility this data might constitute a public record if and when a loan is approved, and, at this time, the data may be examined by anyone.

The undersigned says he/she is duly authorized to verify the foregoing application, that he/she has read the same and is familiar with the statements contained herein and that the same are true in substance and in fact. The undersigned specifically authorizes the Mandan Growth Fund to do a background check on the applicant, including the checking of references and the verification of any information on the application.

Additional information or documentation may be requested if deemed necessary.

Be advised as per North Dakota open records law that applications may be released to the public if requested except for portions subject to NDCC 44-04-18.4 pertaining to confidentiality of trade secret, proprietary, commercial, and financial information.

Certification and Authorization

I / We certify that all information set forth in this application is a true representation of the facts pertaining to the proposed business for the purpose of obtaining funding under the City of Mandan Restaurant Incentive Program. I / We understand and acknowledge that any willful misrepresentation of the information contained in this application could result in disqualification from the program, requiring any funds already disbursed to be repaid in full to the City of Mandan.

The undersigned specifically authorizes the City of Mandan Business Development Office or its representatives to conduct a background check on the applicant, including the checking of references and the verification of any information on the application.

I understand that personal and/or business information may be requested pursuant to this applicant for an incentive and I hereby give my consent for such information to be provided to the City of Mandan Business Development Office, the Mandan Growth Fund Committee or its representatives. I also understand that the Mandan Growth Fund Committee and the Mandan City Commission retain the decision as to whether this incentive application is approved, disapproved, or modified. It is my right to accept or decline the incentive amount and terms approved by the program.

The applicant further certifies that he/she has read and understands the Mandan Growth Fund Interest Buy Down Guidelines. The applicant must comply with all local, state and federal regulations. It is understood that all funding commitments are contingent upon the availability of program funds.

Release of information

The applicant hereby authorizes any third party to release to the City of Mandan Business Development Office without limit, any and all financial information regarding the applicant that is requested by the City of Mandan Business Development Office, its representatives or employees. Further, the applicant hereby authorizes release of said records and information by the City of Mandan Business Development Office to a third party, as deemed necessary by the City of Mandan Business Development Office, its representatives or employees.

All owners, officers or partners must sign this application.

Special Notice

Voters in the Nov. 4, 2008, election in the City of Mandan approved an initiated ordinance that states, "Installation of electric handicap accessible entrance doors are required on every building open to the public that has received public funds in any form whatsoever." Any property receiving an incentive since Nov. 14, 2008, is subject to the requirement in accordance with municipal code 111-2-9. Plan to install an automatic door for at least the main entrance of your business location if you do not have one.

Signatures:

Applicant/Business Owner

Date

Applicant/Business Owner

Date