



PO BOX 702 | TAHOLAH WA 98587 | BUSINESS (360) 276-0118 | FAX: (360) 276-0167

Micro Business & Small Business Loan

Dear Customer,

Thank you for applying for a Micro Business & Small Business Loan through Taala Fund's Revolving Loan Fund. A complete loan package is needed to process your loan. Please submit:

- _____ Authorization to Release Information (original to Loan Officer, copy in customer file)
- _____ ML/SB Loan Application
 - ML and SBL
 - Current Financial Statement/Cash Flow
 - Planning – Microloans complete Marketing Questionnaire
- _____ Business Plan
- _____ Proof of permanent residence (copy of water or electric bill)
- _____ Tribal Business License, tribal enrollment and/or other business licenses
- _____ Copy of Title with Loan Application (submit if using vehicle as collateral)
 - Must bring Original Title to Loan Closing
 - Title must be in Borrower's name unless title belongs to co-signer (1st Lien Only)
 - Proof of insurance
- _____ **OR**
- _____ **Pictures** of Collateral with Serial number(s) AND Equity with serial number(s)
(Submit if using non-vehicle items)
- _____ Monthly Budgets
- _____ 5 Year Projection Profit/Loss.
- _____ Last 2 pay stubs – or other documentation to support income
- _____ Last year's Tax Returns (most current) – or other documentation to support income
- _____ Credit Report
- _____ Payroll deduction form (optional)
- _____ Resume
- _____ Copies of training Certificate(s); Number of training hours: _____

Type of Loan: **Microloan** _____ **Pd. \$100** **Small Business Loan** _____ **Pd. \$250**

This fee helps to defray some of our costs to review the application and obtain credit and other information in connection with our review

INTERNAL OFFICE USE ONLY

FORMS GIVE TO APPLICANT _____ RECEIVED FROM APPLICANT _____

COACH HANDED OFF TO LOAN OFFICER _____

Name of Applicant Business	Telephone No.
Full Street Address of Business	Date Established
Legal form of Business [] C-Corp [] S-Corp [] Ltd. Liability Corp [] Partnership [] Sole Proprietorship	Number of Employees At time of Application
Do you have ownership in any other business? If Yes, please provide name and address	How many jobs will be created if loan is approved? _____
Fishery Location: [] Quinault [] Queets [] Ocean [] Chehalis [] Humptulips	

1. What is the purpose of this loan? **(Circle one)**

- a. To start a business (i.e., operating capital)
- b. To expand a business (i.e., purchase inventory)
- c. To retain a business (i.e., pay expenses)
- d. Other: _____

2. What Taala Fund trainings would you be interested in taking? **(Circle all that apply)**

- a. ABC's of business planning
- b. Are you an Entrepreneur?
- c. Business taxes
- d. Guerrilla marketing
- e. Indianpreneurship class
- f. Pricing your product
- g. Quick books 101
- h. Shoebox accounting
- i. Understanding business financial statements
- j. One on one assistance
- k. Other Training(s): _____

3. How close are you to your actual business expenses to your business budget? **(circle one)**

- a. I don't have a business budget
- b. Very closely
- c. Somewhat closely
- d. not at all

4. What statement best describes how you pay your business expenses? **(circle one)**

- a. I always pay on time
- b. I usually pay on time
- c. I sometimes pay on time
- d. I almost never pay on time

5. Do you have a business plan? **(circle one)**

a. No

b. Yes. If yes, what does it include? **(Circle all that apply)**

- i. Executive summary
- ii. Mission statement
- iii. Business description
- iv. Management and operations plan
- v. Products and services
- vi. Marketing plan
- vii. Financial plan
- viii. Statement of business feasibility
- ix. Other: _____

If your loan is approved, there will be a follow up phone survey six months after the loan closes. We are interested in continually learning what works, and what needs improvement, in our own programs. Your participation in the follow up phone survey is a part of participating in our loan program.

Borrower agrees to at yearly follow-up throughout the duration of the loan with Taala Fund staff and/or TF technical assistance partners to determine progress and identify and discuss any issues that have arisen or may arise. (Initial): _____

Please identify how the loan proceeds will be used:		COLLATERAL: (include current business assets, personal assets and business assets to be purchased with loan proceeds)	
	Dollar Amount		Dollar Amount
repair /maintenance of machinery/equipment	_____	Accounts receivable	_____
business related fees	_____	Furniture fixtures	_____
Inventory purchase	_____	Inventory	_____
Operating Capital (fuel, start-up)	_____	Machinery/equipment	_____
New or used equipment	_____	Real estate equity	_____
Fishing gear	_____	Auto (Year____ Make_____)	_____
Other	_____	Other: _____	_____
		Other: _____	_____
TOTAL LOAN REQUESTED	\$ _____	TOTAL	\$ _____
Your request length of repayment is:	_____		

Owner Information

Name and Title	Date of Birth	Social Security No.	Address	Phone #	% of Owner-ship

COLLATERAL: Please list your collateral.

Item	Value	Appraisal Date	Appraisal Attached?
_____	_____	_____	_____
_____	_____	_____	_____
TOTAL \$ _____			

OWNER'S EQUITY: (Microloans and Business Loans only)

	Total Value	Evidence Attached (description of evidence)
Prior Investment in Existing Business Assets:		
Description: _____	Value \$ _____	_____
Description: _____	Value \$ _____	_____
Description: _____	Value \$ _____	_____
Total Value: \$ _____		_____

Investment intended before Loan Closing:

Description: _____	Cost \$ _____	_____
Description: _____	Cost \$ _____	_____
Description: _____	Cost \$ _____	_____
Total Est. Cost \$ _____		_____

Equity Capital Invested by Borrower in Project \$ _____

The following information is requested by the Federal Government in order to monitor compliance with Federal laws prohibiting discrimination against applicants seeking to participate in the program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race and ethnicity of applicants on the basis of visual observation or surname. If you do not wish to furnish the above information, please check the box below.

- ☐ I do not wish to furnish gender, ethnicity and race information. Initials: _____
- ☐ I will furnish the information: *(Please complete section below)*

Gender: ☐ Female ☐ MaleEthnicity: (Mark One) ☐ Hispanic or Latino ☐ Not Hispanic or LatinoRace: ☐ Native American ☐ Caucasian ☐ Pacific Islander ☐ Asian ☐ African American☐ Other *(please specify)* _____

Gender, ethnicity, and race information above was provided by:

☐ Applicant☐ TAALA Staff

Business Balance Sheet

Assets

Current Assets:	\$	
Cash	\$	
Accounts Receivable (money owed to you)	\$	
Inventory	\$	
Other current assets	\$	
<i>Total Current Assets</i>	\$	
 Fixed Assets	\$	
Land	\$	
Buildings (-accumulated depreciation)	\$	
Equipment (-accumulated depreciation)	\$	
<i>Total Fixed Assets</i>	\$	
Total Assets		\$

Liabilities

Current Liabilities:	\$	
Accounts payable	\$	
Notes Payable	\$	
Other current liabilities	\$	
<i>Total Current Liabilities</i>	\$	
Total Liabilities		\$

Owner's Equity

Additional paid-in capital	\$	
Retained Earnings	\$	
<i>Total Owner's Equity</i>	\$	
Total Liabilities & Owner's Equity		\$

Business Income Statement (P/L)

_____ Actual
 _____ Projected (synopsis of 12 mo. Projection)

SALES

Net Sales \$ _____

Cost of Goods Sold:

Beginning Inventory \$ _____

Purchases \$ _____

Labor \$ _____

Freight \$ _____

Commissions \$ _____

Total \$ _____

Less Ending Inventory \$ _____

Total Cost of Goods Sold \$ _____

GROSS PROFIT \$ _____

EXPENSES

Advertising \$ _____

Car & Truck expenses \$ _____

Commissions & Fees \$ _____

Contract Labor \$ _____

Employee benefit programs \$ _____

Insurance (other than health) \$ _____

Interest

a. Mortgage (pd to banks, etc.) \$ _____

b. Other \$ _____

Legal & professional services \$ _____

Office expense \$ _____

Pension & profit-sharing plans \$ _____

Rent or lease

a. Vehicles, machinery & equipment \$ _____

b. Other business property \$ _____

Repairs and maintenance \$ _____

Supplies (not included in GOGS) \$ _____

Taxes and Licenses \$ _____

Travel, meals, & Entertainment

a. Travel \$ _____

c. Deductible meals & entertainment \$ _____

Utilities \$ _____

Wages (less employment credits) \$ _____

Other expenses \$ _____

Total Expenses \$ _____

Net Profit Before Taxes \$ _____

Income Taxes \$ _____

PROFIT AVAILABLE FOR OWNER \$ _____

Personal Financial Statement

ASSETS	
<i>Liquid Assets</i>	
Cash (checking & savings accounts)	_____
Short-term investments	_____
Treasury Bills	_____
Savings Certificates	_____
Money Market Funds	_____
Cash Value of Life Insurance	_____
Total Liquid Assets	_____
<i>Investment Assets</i>	
Notes Receivable	_____
Marketable Securities	_____
Bonds	_____
Real Estate (investment)	_____
Tax Incentive Investments	_____
Retirement Funds	_____
Total Investment Assets	_____
<i>Personal Assets</i>	
Residence	_____
Vacation Property	_____
Art, Antiques	_____
Furnishings	_____
Vehicles	_____
Other	_____
Total Personal Assets	_____
Total Assets: \$	

LIABILITIES	
<i>Short-term</i>	
Credit Cards (from below)	_____
Car Loan	_____
Construction Liens/Notes/Balances Due	_____
Loan on Life Insurance	_____
Installment Loans	_____
Accrued Income Taxes	_____
Other Debt	_____
Total Short-term Liabilities	_____
<i>Long-term</i>	
Loans to Purchase Personal Assets	_____
Loan to Acquire Business	_____
Mortgage on Personal Residence	_____
Note to Business	_____
Total Long-term Liabilities	_____
<i>Contingent Liabilities</i>	
Endorser	_____
Guarantor (SBA Loan)	_____
Damage Claims	_____
Taxes	_____
Other	_____
Total Contingent Liabilities	_____
Debt/Worth: _____	
- Net Worth: _____	
Total Liabilities: \$	

Personal Financial Statement

Checking/Savings Accounts	Name	Institution	Account	Balance
Checking				
Savings				
Other				
Total Cash from Checking/Savings: \$				

Credit Accounts	Creditor	Address	Monthly Payments	Account Number	Account Balance
Car Loan					
Bank Loan					
Tribal Loan					
Fisherman Loan					
Visa					
Discover					
Other					
		Total Monthly Payments		Total Outstanding	

Monthly Income		Living Expenses	
Borrower's Salary		Rent/Mortgage	
Spouse's Salary		Taxes	
Bonus/Commissions		Utilities	
Alimony/Child Support		Sewage & Water	
Investment Income		Food	
Real Estate		Insurance	
TANF for Guardianship		Internet/Phone	
Per Capital		Cable/Satellite TV	
Social Security		Alimony/Child Support	
Other		Other	
Monthly Income \$		Monthly Expenses \$	

Monthly Disposable Income \$

Are any business assets currently pledge as collateral? Yes _____ No _____

Have you ever filed bankruptcy? Yes _____ No _____

Are there any outstanding judgments against you? Yes _____ No _____

Are you currently party to a lawsuit? Yes _____ No _____

Have you convicted, charged with or arrested for any criminal offences other than a minor vehicle violence?
Yes _____ No _____

Borrower's Acknowledgement:

- I certify that everything I have stated in this application and on any attachment is correct. You may keep this application whether or not it is approved. By signing below, I authorize you to check my credit and employment history and to answer questions others may ask you about my credit record with you. I agree to provide receipts for the total amount of the loan if it is approved.
- I understand that should my loan be approved, prior to closing, Taala Fund, Inc. will charge a Closing Fee of 1.5% of the loan amount. Additionally, any third party costs incurred by Taala Fund, Inc. in connection with closing the loan (including lien fees, legal fees, etc.) will also be charged to me.
- I agree to have payments deducted from my paycheck to repay this loan regardless of where I may be working. I also agree that if my employment is terminated, whether voluntarily or involuntarily, any remaining loan balance, including interest, shall be deducted from my final paycheck. If the amount of the final paycheck is not enough to pay off the loan balance, I will make arrangements with the Taala Fund within 10 business days of termination to pay the amount owed or risk legal action against me.

I, further represent and warrant that Taala Fund is relying on the above information to make a decision regarding the extension of credit. I promise that this is a true statement of my financial condition as of the date listed above.

 Borrower's Signature

 Date

 Spouse's Signature

 Date

AUTHORIZATION TO RELEASE INFORMATION

I have applied for or obtained a loan from Taala Fund. As part of the process, Taala Fund may verify information contained in my request for assistance and in other documents required in connection with the request.

I authorize you to provide to Taala Fund for verification purposes the following applicable information:

- Past and present employment or income records
- Bank account, stock holding, and any other asset balances
- Past and present landlord references
- Other consumer cred references

If the request is for a new loan, I further authorize Taala Fund to order a consumer credit report and verify other credit information.

I understand that under the Rights to Financial Privacy Act of 1978, 12 USC 3401, et seq., Taala Fund is authorized to access my financial records hold by financial institutions in connections or administration of assistance to me. I also understand that financial records involving my loan and loan application will be available to Taala Fund without further notice or authorization, but will not be disclosed or released by Taala Fund to any other person or agency without my written consent except as required or permitted by law.

The information Taala Fund obtains is only to be used in the process of my request for assistance.

A copy of this authorization may be accepted as an original. Your prompt reply is appreciated.

Jr.,Sr.,I,II

Full Name

	City	State	Zip Code
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Previous Address (If < 6 mo's at above address)	City	State	Zip Code
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Social Security No.	Date of Birth
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Signature	Date
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QIN/QNEB PAYROLL DEDUCTION FORM
(for Taala Fund customers)

EMPLOYER:

- ☐ QNEB Centralized Accounting, ATTN: Payroll Department
☐ Quinault Indian Nation, ATTN: Payroll Department
☐ Other (state) _____

EMPLOYEE NAME _____

EMPLOYEE # _____ BUDGET # _____

PAYROLL DEDUCTION AGREEMENT

I agree to have \$_____ deducted from my payroll check bi-weekly beginning the first/second (circle) pay period in _____ (month/year) for a total monthly payment of \$_____ and the deducted funds to be transferred to Taala Fund, PO Box 702, Taholah, WA 98587.

If I am terminated from my job for any reason, I agree that the current monthly deduction balance may be deducted from my annual leave paycheck.

Employee Signature_____
Date_____
Payroll Supervisor_____
Date

To set up transfer arrangements, please contact Ms. Lolita Black Taala Fund Finance Officer , at (360) 276-0118.