



Waterbury Development Corporation

Waterbury Development Corporation (WDC) offers financial assistance through a variety of loan funds designed to support business development and economic growth in Waterbury. We look forward to speaking with you about the financing options that may be available for your business.

WDC evaluates loan applications using a holistic review process. The Loan Committee typically considers the following factors:

- The economic benefit of the business to the City of Waterbury/the region, job retention, including job creation and the potential for job creation
- The financial condition of the business
- The quality and experience of management
- The nature and condition of the industry
- The current assets of the company
- The ability to support loan repayment, considering all debts, assets, and cash flow

In addition to working with established businesses, WDC also provides financing to businesses that may not qualify for traditional bank loans, considering their broader economic impact and potential for growth. Each application is evaluated on its overall merits and alignment with WDC's development goals.

Pre-Loan Submission Requirements

The following items must be completed and submitted with your application in order to be considered for financial assistance:

- A detailed & concise business plan
- A current balance sheet, income statement, and cash flow statement
- A projected 12-month balance sheet, income statement, and cash flow statement
- Personal tax returns for the last three (3) years
- Business tax returns for the last three (3) years (if applicable)
- Authorization to obtain business and/or personal credit reports
- Completed loan application and personal financial statement, including proposed collateral

Please note: WDC does not provide debt consolidation or reimbursement services. Eligibility for financing is determined solely by the WDC Loan Committee.



LOAN APPLICATION

Name of Applicant(s):
Doing Business as:
Date of Application:
Loan Request Amount:

Business Profile

Business Name:			
Nature of Business:			
Business Address			
City, State, Zip			
Business Telephone:		Email:	
Year Established:		Website:	

Type of Business

<input type="checkbox"/> Proprietorship	<input type="checkbox"/> General Partnership	<input type="checkbox"/> C Corp	<input type="checkbox"/> Not-for-Profit
<input type="checkbox"/> Limited Liability	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> S Corp	<input type="checkbox"/> Other

Business Ownership

	Name	% Ownership	Title	Years in Position
1.				
2.				
3.				



Trade References (List of your 5 Largest Trade Creditors)

Creditor #1:			
Contact Name:			
Contact Email:			
Contact Address:			
Trade Terms (e.g., Net 30):			
High Credit Amount:	\$	Current Balance	\$
Collateral (if any):			

Creditor #2:			
Contact Name:			
Contact Email:			
Contact Address:			
Trade Terms (e.g., Net 30):			
High Credit Amount:	\$	Current Balance	\$
Collateral (if any):			

Creditor #3:			
Contact Name:			
Contact Email:			
Contact Address:			
Trade Terms (e.g., Net 30):			
High Credit Amount:	\$	Current Balance	\$
Collateral (if any):			



Creditor #4:			
Contact Name:			
Contact Email:			
Contact Address:			
Trade Terms (e.g., Net 30):			
High Credit Amount:	\$	Current Balance	\$
Collateral (if any):			

Creditor #5:			
Contact Name:			
Contact Email:			
Contact Address:			
Trade Terms (e.g., Net 30):			
High Credit Amount:	\$	Current Balance	\$
Collateral (if any):			

Top 5 Customers

Customer #1:			
Contact Address:			
Trade Terms (e.g., Net 30):		% of Annual Sales	

Customer #2:			
Contact Address:			
Trade Terms (e.g., Net 30):		% of Annual Sales	



Customer #3:			
Contact Address:			
Trade Terms (e.g., Net 30):		% of Annual Sales	

Customer #4:			
Contact Address:			
Trade Terms (e.g., Net 30):		% of Annual Sales	

Customer #5:			
Contact Address:			
Trade Terms (e.g., Net 30):		% of Annual Sales	

Project Costs

Use of Funds	Description	Estimated Cost
Working Capital:		\$
Refinancing Existing Debt:		\$
Purchase of Land: (requires formal appraisal dated within 6 months)	Address:	\$
Purchase of Existing Buildings: (requires formal appraisal dated within 6 months)	Address:	\$
Equipment:		\$



Project Costs

Use of Funds	Description	Estimated Cost
Leasehold Improvements:		\$
Renovations/Construction:		\$
Other:		\$
Total Project Costs:		\$

Business Bank Accounts

Business accounts should not be repeated in the Personal Financial Statement.

Bank Name:			
Bank Location (City, State):			
Owner(s):			
Type of Account:		Balance:	\$

Bank Name:			
Bank Location (City, State):			
Owner(s):			
Type of Account:		Balance:	\$



Bank Name:			
Bank Location (City, State):			
Owner(s):			
Type of Account:		Balance:	\$

Bank Name:			
Bank Location (City, State):			
Owner(s):			
Type of Account:		Balance:	\$

Bank Name:			
Bank Location (City, State):			
Owner(s):			
Type of Account:		Balance:	\$

Source Of Funds

Source of Funds	Contact Information	Estimated Cost
Equity from Owners/Partners:	Name:	\$
	Address:	
	Email:	
Equity from Owners/Partners:	Name:	\$
	Address:	
	Email:	
Funds from Business:	Contact Name:	\$
	Address:	
	Email:	



Bank Loans:	Contact Name:	\$
	Address:	
	Email:	
WDC/State of CT Loan:	Contact Name:	\$
	Address:	
	Email:	
Small Business Administration Loan:	Contact Name:	\$
	Address:	
	Email:	
Other:	Contact Name:	\$
	Address:	
	Email:	
Other:	Contact Name:	\$
	Address:	
	Email:	
Other:	Contact Name:	\$
	Address:	
	Email:	
Total Source of Funds:		\$

Note: Total Project Costs should equal Total Source of Funds.



Purpose of the loan? (Be Specific):

What collateral will you be pledging to secure this loan?

(Please estimate the value of the collateral. Also include your basis for the estimate):

Are there any liens or loans on the proposed collateral? If yes, please give details:

Has the business ever filed Bankruptcy?

If yes, list year and bankruptcy court location.

Number of Employees

	Full Time	Part Time	Total
Present Employment			
Projected Employment (1 Year)			



Debts

	Lender			
Mortgage:	Contact Name:		Original Balance:	\$
	Address:		Present Balance:	\$
	Email:		Annual Payments:	\$
	Interest Rate:	%	Maturity:	yrs
2 nd Mortgage:	Contact Name:		Original Balance:	\$
	Address:		Present Balance:	\$
	Email:		Annual Payments:	\$
	Interest Rate:	%	Maturity:	yrs
Home Equity Line of Credit:	Contact Name:		Original Balance:	\$
	Address:		Present Balance:	\$
	Email:		Annual Payments:	\$
	Interest Rate:	%	Maturity:	yrs
Terms Loan:	Contact Name:		Original Balance:	\$
	Address:		Present Balance:	\$
	Email:		Annual Payments:	\$
	Interest Rate:	%	Maturity:	yrs
Working Capital/Line of Credit:	Contact Name:		Original Balance:	\$
	Address:		Present Balance:	\$
	Email:		Annual Payments:	\$
	Interest Rate:	%	Maturity:	yrs

**Debts Continued:**

	Lender			
Credit Cards:	Contact Name:		Original Balance:	\$
	Address:		Present Balance:	\$
	Email:		Annual Payments:	\$
	Interest Rate: %		Maturity:	yrs
Auto Loans:	Contact Name:		Original Balance:	\$
	Address:		Present Balance:	\$
	Email:		Annual Payments:	\$
	Interest Rate: %		Maturity:	yrs
Prior Owners:	Contact Name:		Original Balance:	\$
	Address:		Present Balance:	\$
	Email:		Annual Payments:	\$
	Interest Rate: %		Maturity:	yrs
Stockholders:	Contact Name:		Original Balance:	\$
	Address:		Present Balance:	\$
	Email:		Annual Payments:	\$
	Interest Rate: %		Maturity:	yrs
Officers:	Contact Name:		Original Balance:	\$
	Address:		Present Balance:	\$
	Email:		Annual Payments:	\$
	Interest Rate: %		Maturity:	yrs

**Debts Continued:**

Trade:	Contact Name:		Original Balance:	\$
	Address:		Present Balance:	\$
	Email:		Annual Payments:	\$
	Interest Rate:	%	Maturity:	yrs
Other:	Contact Name:		Original Balance:	\$
	Address:		Present Balance:	\$
	Email:		Annual Payments:	\$
	Interest Rate:	%	Maturity:	yrs
Other:	Contact Name:		Original Balance:	\$
	Address:		Present Balance:	\$
	Email:		Annual Payments:	\$
	Interest Rate:	%	Maturity:	yrs
Other:	Contact Name:		Original Balance:	\$
	Address:		Present Balance:	\$
	Email:		Annual Payments:	\$
	Interest Rate:	%	Maturity:	yrs
Total:	Present Balance:	\$	Annual Payments:	\$

Unpaid Taxes:

Federal:	State:	Municipal:
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Primary Applicant - Personal Financial Statement

Statement Dated:	
Name:	Occupation or Position:
Address:	Address of Company:
City, State, Zip:	City, State, Zip:
No. of Dependents:	
Other Business Affiliations:	

Have you ever gone through bankruptcy or made a general assignment
If yes, list year and bankruptcy court location.

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Income

(Alimony, child support, or maintenance payments need not be indicated if the applicant does not choose to disclose such income)

Salary or Adjusted Gross Income: *per tax return	
Bonus or Commissions:	
Dividends or Interest:	
Other Income:	
TOTAL INCOME:	



Assets

Schedule A — Personal Bank Accounts	\$
Schedule B — Stocks & Bonds (Market Value)	\$
Schedule C — Closely Held Investments	\$
Schedule D — Life Insurance (Cash Surrender Value) <i>(Do not list death benefit. Use surrender value only if applicable.)</i>	\$
Schedule E — Real Estate Owned (Net Equity)	\$
Vehicles — Present Value (e.g., cars, boats, equipment)	\$
Other Personal Property:	\$
Other Assets (Itemize — attach sheet if needed):	\$
TOTAL ASSETS	\$

Liabilities and Net Worth

Schedule F: Notes Payable (Excluding Real Estate Mortgages): <i>(Do not include mortgages listed on Schedule E.)</i>	\$
Accounts & Bills Payable (e.g., credit cards, utilities):	\$
Taxes Payable (include Income & Real Estate):	\$
Other Liabilities (Itemize — attach sheet if needed)	\$
TOTAL LIABILITIES:	\$

NET WORTH (Total Assets Less Total Liabilities):	\$
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Schedule A: Personal Bank Accounts

Business accounts should not be repeated in the Personal Financial Statement.

Bank Name:			
Bank Location (City, State):			
Owner(s):			
Type of Account:		Balance:	\$

Bank Name:			
Bank Location (City, State):			
Owner(s):			
Type of Account:		Balance:	\$

Bank Name:			
Bank Location (City, State):			
Owner(s):			
Type of Account:		Balance:	\$

Bank Name:			
Bank Location (City, State):			
Owner(s):			
Type of Account:		Balance:	\$

Bank Name:			
Bank Location (City, State):			
Owner(s):			
Type of Account:		Balance:	\$



Schedule B: Stocks And Bonds — Readily Marketable

Description of Security: <i>(Include issuer, class, and CUSIP if known)</i>			
<input type="checkbox"/> STOCK No. Shares:		<input type="checkbox"/> BOND - Face Value:	\$
Registered Owner(s):			
If pledged, to Whom:			
Present Market Value:	\$		

Description of Security: <i>(Include issuer, class, and CUSIP if known)</i>			
<input type="checkbox"/> STOCK No. Shares:		<input type="checkbox"/> BOND - Face Value:	\$
Registered Owner(s):			
If pledged, to Whom:			
Present Market Value:	\$		

Description of Security: <i>(Include issuer, class, and CUSIP if known)</i>			
<input type="checkbox"/> STOCK No. Shares:		<input type="checkbox"/> BOND - Face Value:	\$
Registered Owner(s):			
If pledged, to Whom:			
Present Market Value:	\$		

Description of Security: <i>(Include issuer, class, and CUSIP if known)</i>			
<input type="checkbox"/> STOCK No. Shares:		<input type="checkbox"/> BOND - Face Value:	\$
Registered Owner(s):			
If pledged, to Whom:			
Present Market Value:	\$		



Description of Security: <i>(Include issuer, class, and CUSIP if known)</i>			
<input type="checkbox"/> STOCK No. Shares:		<input type="checkbox"/> BOND - Face Value:	\$
Registered Owner(s):			
If pledged, to Whom:			
Present Market Value:	\$		

Description of Security: <i>(Include issuer, class, and CUSIP if known)</i>			
<input type="checkbox"/> STOCK No. Shares:		<input type="checkbox"/> BOND - Face Value:	\$
Registered Owner(s):			
If pledged, to Whom:			
Present Market Value:	\$		

Description of Security: <i>(Include issuer, class, and CUSIP if known)</i>			
<input type="checkbox"/> STOCK No. Shares:		<input type="checkbox"/> BOND - Face Value:	\$
Registered Owner(s):			
If pledged, to Whom:			
Present Market Value:	\$		

Description of Security: <i>(Include issuer, class, and CUSIP if known)</i>			
<input type="checkbox"/> STOCK No. Shares:		<input type="checkbox"/> BOND - Face Value:	\$
Registered Owner(s):			
If pledged, to Whom:			
Present Market Value:	\$		



Schedule C: Investments — Closely Held Companies & Unlisted Securities

Company / Investment:					
<input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> S-Corp <input type="checkbox"/> C-Corp <input type="checkbox"/> Other					
Registered Owner(s):					
Ownership:	%	Value:	\$		
Notes:					

Company / Investment:					
<input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> S-Corp <input type="checkbox"/> C-Corp <input type="checkbox"/> Other					
Registered Owner(s):					
Ownership:	%	Value:	\$		
Notes:					

Company / Investment:					
<input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> S-Corp <input type="checkbox"/> C-Corp <input type="checkbox"/> Other					
Registered Owner(s):					
Ownership:	%	Value:	\$		
Notes:					

Company / Investment:					
<input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> S-Corp <input type="checkbox"/> C-Corp <input type="checkbox"/> Other					
Registered Owner(s):					
Ownership:	%	Value:	\$		
Notes:					



Company / Investment:				
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Partnership LLC S-Corp C-Corp Other

Registered Owner(s):				
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Ownership:	%	Value:	\$	
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Notes:				
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Company / Investment:				
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Partnership LLC S-Corp C-Corp Other

Registered Owner(s):				
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Ownership:	%	Value:	\$	
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Notes:				
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Company / Investment:				
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Partnership LLC S-Corp C-Corp Other

Registered Owner(s):				
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Ownership:	%	Value:	\$	
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Notes:				
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Company / Investment:				
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Partnership LLC S-Corp C-Corp Other

Registered Owner(s):				
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Ownership:	%	Value:	\$	
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Notes:				
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Schedule D: Life Insurance — Include Group Insurance

Insurance Company:			
Type of Policy	<input type="checkbox"/> Term <input type="checkbox"/> Whole Life	<input type="checkbox"/> Universal Life <input type="checkbox"/> Other	<input type="checkbox"/> Group
Cash Surrender Value (if applicable):	\$	Face Amount (Death Benefit):	\$
(Note: Cash Surrender Value applies only to permanent policies such as Whole/Universal Life. Term policies have no Cash Surrender Value.)			
Beneficiary(ies):			
Owner of Policy:			
Notes:			

Insurance Company:			
Type of Policy	<input type="checkbox"/> Term <input type="checkbox"/> Whole Life	<input type="checkbox"/> Universal Life <input type="checkbox"/> Other	<input type="checkbox"/> Group
Cash Surrender Value (if applicable):	\$	Face Amount (Death Benefit):	\$
(Note: Cash Surrender Value applies only to permanent policies such as Whole/Universal Life. Term policies have no Cash Surrender Value.)			
Beneficiary(ies):			
Owner of Policy:			
Notes:			

Insurance Company:			
Type of Policy	<input type="checkbox"/> Term <input type="checkbox"/> Whole Life	<input type="checkbox"/> Universal Life <input type="checkbox"/> Other	<input type="checkbox"/> Group
Cash Surrender Value (if applicable):	\$	Face Amount (Death Benefit):	\$
(Note: Cash Surrender Value applies only to permanent policies such as Whole/Universal Life. Term policies have no Cash Surrender Value.)			
Beneficiary(ies):			
Owner of Policy:			
Notes:			



Schedule E: Investments—Real Estate Owned

Location:			
Description:			
Title In Name(s) of:			
Mortgage Held By:			
Cost With Improvements:	\$	Market Value:	\$
Mortgage Balance:	\$	Tax Assessment Value:	\$
Rental Income (If Any):	\$	Annual Mortgage Payments:	\$

Location:			
Description:			
Title In Name(s) of:			
Mortgage Held By:			
Cost With Improvements:	\$	Market Value:	\$
Mortgage Balance:	\$	Tax Assessment Value:	\$
Rental Income (If Any):	\$	Annual Mortgage Payments:	\$

Location:			
Description:			
Title In Name(s) of:			
Mortgage Held By:			
Cost With Improvements:	\$	Market Value:	\$
Mortgage Balance:	\$	Tax Assessment Value:	\$
Rental Income (If Any):	\$	Annual Mortgage Payments:	\$



Schedule E: Investments—Real Estate Owned Continued

Location:			
Description:			
Title In Name(s) of:			
Mortgage Held By:			
Cost With Improvements:	\$	Market Value:	\$
Mortgage Balance:	\$	Tax Assessment Value:	\$
Rental Income (If Any):	\$	Annual Mortgage Payments:	\$

Location:			
Description:			
Title In Name(s) of:			
Mortgage Held By:			
Cost With Improvements:	\$	Market Value:	\$
Mortgage Balance:	\$	Tax Assessment Value:	\$
Rental Income (If Any):	\$	Annual Mortgage Payments:	\$

Location:			
Description:			
Title In Name(s) of:			
Mortgage Held By:			
Cost With Improvements:	\$	Market Value:	\$
Mortgage Balance:	\$	Tax Assessment Value:	\$
Rental Income (If Any):	\$	Annual Mortgage Payments:	\$



Schedule F: Notes Payable (Excluding Real Estate Mortgages)

To Whom Owed (Name & Address):			
Original Amount:	\$	Current Balance:	\$
Status (check all that apply):	<input type="checkbox"/> Guaranteed <input type="checkbox"/> Secured <input type="checkbox"/> N/A		
Maturity (end date):		Interest Rate (APR):	%
Payment Schedule: (e.g., monthly amount & due date)			

To Whom Owed (Name & Address):			
Original Amount:	\$	Current Balance:	\$
Status (check all that apply):	<input type="checkbox"/> Guaranteed <input type="checkbox"/> Secured <input type="checkbox"/> N/A		
Maturity (end date):		Interest Rate (APR):	%
Payment Schedule: (e.g., monthly amount & due date)			

To Whom Owed (Name & Address):			
Original Amount:	\$	Current Balance:	\$
Status (check all that apply):	<input type="checkbox"/> Guaranteed <input type="checkbox"/> Secured <input type="checkbox"/> N/A		
Maturity (end date):		Interest Rate (APR):	%
Payment Schedule: (e.g., monthly amount & due date)			

To Whom Owed (Name & Address):			
Original Amount:	\$	Current Balance:	\$
Status (check all that apply):	<input type="checkbox"/> Guaranteed <input type="checkbox"/> Secured <input type="checkbox"/> N/A		
Maturity (end date):		Interest Rate (APR):	%
Payment Schedule: (e.g., monthly amount & due date)			



Contingent Liabilities

	Description	Amount
As Endorser / Co-Maker / Guarantor (e.g., loans you guaranteed):		\$
On Leases or Contracts:		\$
On Receivables, Discounted or Sold (with recourse):		\$
Legal Claims:		\$
Other (Itemize):		\$



Co-Applicant if applicable - Personal Financial Statement

Statement Dated:	
Name:	Occupation or Position:
Address:	Address of Company:
City, State, Zip:	City, State, Zip:
No. of Dependents:	
Other Business Affiliations:	

Have you ever gone through bankruptcy or made a general assignment
If yes, list year and bankruptcy court location.

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Income

(Alimony, child support, or maintenance payments need not be indicated if the applicant does not choose to disclose such income)

Salary or Adjusted Gross Income: *per tax return	
Bonus or Commissions:	
Dividends or Interest:	
Other Income:	
TOTAL INCOME:	



Assets

Schedule A — Personal Bank Accounts	\$
Schedule B — Stocks & Bonds (Market Value)	\$
Schedule C — Closely Held Investments	\$
Schedule D — Life Insurance (Cash Surrender Value) <i>(Do not list death benefit. Use surrender value only if applicable.)</i>	\$
Schedule E — Real Estate Owned (Net Equity)	\$
Vehicles — Present Value (e.g., cars, boats, equipment)	\$
Other Personal Property:	\$
Other Assets (Itemize — attach sheet if needed):	\$
TOTAL ASSETS	\$

Liabilities and Net Worth

Schedule F: Notes Payable (Excluding Real Estate Mortgages): <i>(Do not include mortgages listed on Schedule E.)</i>	\$
Accounts & Bills Payable (e.g., credit cards, utilities):	\$
Taxes Payable (include Income & Real Estate):	\$
Other Liabilities (Itemize — attach sheet if needed)	\$
TOTAL LIABILITIES:	\$

NET WORTH (Total Assets Less Total Liabilities):	\$
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Schedule A: Personal Bank Accounts

Business accounts should not be repeated in the Personal Financial Statement.

Bank Name:			
Bank Location (City, State):			
Owner(s):			
Type of Account:		Balance:	\$

Bank Name:			
Bank Location (City, State):			
Owner(s):			
Type of Account:		Balance:	\$

Bank Name:			
Bank Location (City, State):			
Owner(s):			
Type of Account:		Balance:	\$

Bank Name:			
Bank Location (City, State):			
Owner(s):			
Type of Account:		Balance:	\$

Bank Name:			
Bank Location (City, State):			
Owner(s):			
Type of Account:		Balance:	\$



Schedule B: Stocks And Bonds — Readily Marketable

Description of Security: <i>(Include issuer, class, and CUSIP if known)</i>			
<input type="checkbox"/> STOCK No. Shares:		<input type="checkbox"/> BOND - Face Value:	\$
Registered Owner(s):			
If pledged, to Whom:			
Present Market Value:	\$		

Description of Security: <i>(Include issuer, class, and CUSIP if known)</i>			
<input type="checkbox"/> STOCK No. Shares:		<input type="checkbox"/> BOND - Face Value:	\$
Registered Owner(s):			
If pledged, to Whom:			
Present Market Value:	\$		

Description of Security: <i>(Include issuer, class, and CUSIP if known)</i>			
<input type="checkbox"/> STOCK No. Shares:		<input type="checkbox"/> BOND - Face Value:	\$
Registered Owner(s):			
If pledged, to Whom:			
Present Market Value:	\$		

Description of Security: <i>(Include issuer, class, and CUSIP if known)</i>			
<input type="checkbox"/> STOCK No. Shares:		<input type="checkbox"/> BOND - Face Value:	\$
Registered Owner(s):			
If pledged, to Whom:			
Present Market Value:	\$		



Description of Security: <i>(Include issuer, class, and CUSIP if known)</i>			
<input type="checkbox"/> STOCK No. Shares:		<input type="checkbox"/> BOND - Face Value:	\$
Registered Owner(s):			
If pledged, to Whom:			
Present Market Value:	\$		

Description of Security: <i>(Include issuer, class, and CUSIP if known)</i>			
<input type="checkbox"/> STOCK No. Shares:		<input type="checkbox"/> BOND - Face Value:	\$
Registered Owner(s):			
If pledged, to Whom:			
Present Market Value:	\$		

Description of Security: <i>(Include issuer, class, and CUSIP if known)</i>			
<input type="checkbox"/> STOCK No. Shares:		<input type="checkbox"/> BOND - Face Value:	\$
Registered Owner(s):			
If pledged, to Whom:			
Present Market Value:	\$		

Description of Security: <i>(Include issuer, class, and CUSIP if known)</i>			
<input type="checkbox"/> STOCK No. Shares:		<input type="checkbox"/> BOND - Face Value:	\$
Registered Owner(s):			
If pledged, to Whom:			
Present Market Value:	\$		



Schedule C: Investments — Closely Held Companies & Unlisted Securities

Company / Investment:					
<input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> S-Corp <input type="checkbox"/> C-Corp <input type="checkbox"/> Other					
Registered Owner(s):					
Ownership:	%	Value:	\$		
Notes:					

Company / Investment:					
<input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> S-Corp <input type="checkbox"/> C-Corp <input type="checkbox"/> Other					
Registered Owner(s):					
Ownership:	%	Value:	\$		
Notes:					

Company / Investment:					
<input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> S-Corp <input type="checkbox"/> C-Corp <input type="checkbox"/> Other					
Registered Owner(s):					
Ownership:	%	Value:	\$		
Notes:					

Company / Investment:					
<input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> S-Corp <input type="checkbox"/> C-Corp <input type="checkbox"/> Other					
Registered Owner(s):					
Ownership:	%	Value:	\$		
Notes:					



Company / Investment:				
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Partnership LLC S-Corp C-Corp Other

Registered Owner(s):				
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Ownership:	%	Value:	\$	
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Notes:				
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Company / Investment:				
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Partnership LLC S-Corp C-Corp Other

Registered Owner(s):				
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Ownership:	%	Value:	\$	
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Notes:				
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Company / Investment:				
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Partnership LLC S-Corp C-Corp Other

Registered Owner(s):				
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Ownership:	%	Value:	\$	
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Notes:				
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Company / Investment:				
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Partnership LLC S-Corp C-Corp Other

Registered Owner(s):				
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Ownership:	%	Value:	\$	
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Notes:				
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Schedule D: Life Insurance — Include Group Insurance

Insurance Company:			
Type of Policy	<input type="checkbox"/> Term <input type="checkbox"/> Whole Life	<input type="checkbox"/> Universal Life <input type="checkbox"/> Other	<input type="checkbox"/> Group
Cash Surrender Value (if applicable):	\$	Face Amount (Death Benefit):	\$
(Note: Cash Surrender Value applies only to permanent policies such as Whole/Universal Life. Term policies have no Cash Surrender Value.)			
Beneficiary(ies):			
Owner of Policy:			
Notes:			

Insurance Company:			
Type of Policy	<input type="checkbox"/> Term <input type="checkbox"/> Whole Life	<input type="checkbox"/> Universal Life <input type="checkbox"/> Other	<input type="checkbox"/> Group
Cash Surrender Value (if applicable):	\$	Face Amount (Death Benefit):	\$
(Note: Cash Surrender Value applies only to permanent policies such as Whole/Universal Life. Term policies have no Cash Surrender Value.)			
Beneficiary(ies):			
Owner of Policy:			
Notes:			

Insurance Company:			
Type of Policy	<input type="checkbox"/> Term <input type="checkbox"/> Whole Life	<input type="checkbox"/> Universal Life <input type="checkbox"/> Other	<input type="checkbox"/> Group
Cash Surrender Value (if applicable):	\$	Face Amount (Death Benefit):	\$
(Note: Cash Surrender Value applies only to permanent policies such as Whole/Universal Life. Term policies have no Cash Surrender Value.)			
Beneficiary(ies):			
Owner of Policy:			
Notes:			



Schedule E: Investments—Real Estate Owned

Location:			
Description:			
Title In Name(s) of:			
Mortgage Held By:			
Cost With Improvements:	\$	Market Value:	\$
Mortgage Balance:	\$	Tax Assessment Value:	\$
Rental Income (If Any):	\$	Annual Mortgage Payments:	\$

Location:			
Description:			
Title In Name(s) of:			
Mortgage Held By:			
Cost With Improvements:	\$	Market Value:	\$
Mortgage Balance:	\$	Tax Assessment Value:	\$
Rental Income (If Any):	\$	Annual Mortgage Payments:	\$

Location:			
Description:			
Title In Name(s) of:			
Mortgage Held By:			
Cost With Improvements:	\$	Market Value:	\$
Mortgage Balance:	\$	Tax Assessment Value:	\$
Rental Income (If Any):	\$	Annual Mortgage Payments:	\$



Schedule E: Investments—Real Estate Owned Continued

Location:			
Description:			
Title In Name(s) of:			
Mortgage Held By:			
Cost With Improvements:	\$	Market Value:	\$
Mortgage Balance:	\$	Tax Assessment Value:	\$
Rental Income (If Any):	\$	Annual Mortgage Payments:	\$

Location:			
Description:			
Title In Name(s) of:			
Mortgage Held By:			
Cost With Improvements:	\$	Market Value:	\$
Mortgage Balance:	\$	Tax Assessment Value:	\$
Rental Income (If Any):	\$	Annual Mortgage Payments:	\$

Location:			
Description:			
Title In Name(s) of:			
Mortgage Held By:			
Cost With Improvements:	\$	Market Value:	\$
Mortgage Balance:	\$	Tax Assessment Value:	\$
Rental Income (If Any):	\$	Annual Mortgage Payments:	\$



Schedule F: Notes Payable (Excluding Real Estate Mortgages)

To Whom Owed (Name & Address):			
Original Amount:	\$	Current Balance:	\$
Status (check all that apply):	<input type="checkbox"/> Guaranteed <input type="checkbox"/> Secured <input type="checkbox"/> N/A		
Maturity (end date):		Interest Rate (APR):	%
Payment Schedule: (e.g., monthly amount & due date)			

To Whom Owed (Name & Address):			
Original Amount:	\$	Current Balance:	\$
Status (check all that apply):	<input type="checkbox"/> Guaranteed <input type="checkbox"/> Secured <input type="checkbox"/> N/A		
Maturity (end date):		Interest Rate (APR):	%
Payment Schedule: (e.g., monthly amount & due date)			

To Whom Owed (Name & Address):			
Original Amount:	\$	Current Balance:	\$
Status (check all that apply):	<input type="checkbox"/> Guaranteed <input type="checkbox"/> Secured <input type="checkbox"/> N/A		
Maturity (end date):		Interest Rate (APR):	%
Payment Schedule: (e.g., monthly amount & due date)			

To Whom Owed (Name & Address):			
Original Amount:	\$	Current Balance:	\$
Status (check all that apply):	<input type="checkbox"/> Guaranteed <input type="checkbox"/> Secured <input type="checkbox"/> N/A		
Maturity (end date):		Interest Rate (APR):	%
Payment Schedule: (e.g., monthly amount & due date)			



Contingent Liabilities

	Description	Amount
As Endorser / Co-Maker / Guarantor (e.g., loans you guaranteed):		\$
On Leases or Contracts:		\$
On Receivables, Discounted or Sold (with recourse):		\$
Legal Claims:		\$
Other (Itemize):		\$



Additional Information

- Current Business Plan
- Business Financial Statements (3 yrs. Historical, if available)
- Business Cash Flow Forecast
- Personal Federal Returns
- Business Tax Returns (3yrs. Historical, if available)
- Most current aging of Accounts Receivable and Accounts Payable
- Employment growth projection-5 years

CERTIFICATION

It is hereby represented by the undersigned that to the best of my knowledge and belief no information or data contained in the application or in the attachments are in any way false or incorrect that no material information has been omitted, including the Financial Statements. The undersigned agrees that banks, credit agencies, and references are hereby authorized now, to give the Waterbury Development Corporation any and all information in connection with the matters referred to in this application. In addition, the undersigned agrees that funds provided pursuant to this application will be utilized exclusively for the purposes represented in this application, as may be amended.

Applicant's Full Name:	Co-Applicant's Full Name:
Applicant's Signature:	Co-Applicant's Signature:
Date:	Date:

NOTICE TO APPLICANT

The Federal Equal Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided that the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal agency that administers compliance with this law concerning this creditor is The Federal Deposit Insurance Corporation, 15 Braintree Hill Office Park, Braintree, MA 02184. The State agency which administers compliance with the State law is The Connecticut Commission on Human Rights and Opportunities, 1229 Albany Avenue, Hartford, CT 06112.



CREDIT REPORT AUTHORIZATION FORM

I hereby grant authorization to Waterbury Development Corporation (WDC), located at 83 Bank Street, 3rd Floor, Waterbury, CT 06702, to obtain my consumer credit report through a credit reporting agency or third party. I understand and agree that WDC will use the credit report for the purpose of evaluating my financial risk and payment history. I understand that use of my credit report will be in compliance with Paragraph 604 of the Fair Credit Reporting Act (FCRA).

I understand and agree that my consumer credit report may be obtained at the beginning of the loan application process and at any time the Waterbury Development Corporation deems necessary through the life of the loan.

My signature below authorizes the Waterbury Development Corporation to obtain my consumer credit report. Authorization is further granted to the credit reporting agency to use a photo static reproduction of this form if required to obtain any information necessary to complete my consumer credit report. Your consumer credit report is confidential and will not be transmitted, shared, and/or distributed.

Applicant's Full Name:	Co-Applicant's Full Name:
Applicant's Social Security Number:	Co-Applicant's Social Security Number:
Date of Birth:	Date of Birth:
Address:	Address:
City, State, Zip:	City, State, Zip:
Applicant's Signature:	Applicant's Signature:
Date:	Date: