SOUTHEAST MISSISSIPPI COMMUNITY INVESTMENT CORPORATION LOAN APPLICATION

Applicant(s) must complete all Sections.

Application fee of \$100 must be received before application can be processed.

DESCRIPTION OF APPLICANT(S): Check one: Individual,			
Corporation,	LLC,	_ Partnership,	other (please specify
INFORMATION ON .	·		
A. Name, Address, Pho	one # and Email	Address of Applic	ant(s):
B. Name, Address, Pho	one # and Email	Address of Each P	rincipal if Applicant is
other than Individual: _			
INFORMATION ON 2	BUSINESS TO	BE ASSISTED:	
A. Name and Address of	of Business (if d	ifferent from above	e):
B. Nature of Business:			
C. Telephone Number:			
E. Participating Bank (if Applicable):		
`	,		
G. Loan Officer's Telep	phone Number (if Applicable):	
H Taypayer Identificat	ion Number (TI	NI).	

71. Bitel Hoject Beschiption:		
B. Total Cost of Project: \$		
C. Total Loan Amount Requested:	\$	
D. Job Impact (Full Time Equivale	ent):	
Number Existing	Number Created	Total
E. Projected Use of Funds:		
1. Land Acquisition:	\$	
 Land Acquisition: Land Improvements: 		
•	\$	
2. Land Improvements:	\$ \$	
2. Land Improvements:3. Purchase and/or Remodel:	\$ \$ \$	
 Land Improvements: Purchase and/or Remodel: New Construction: 	\$ \$ \$	
 Land Improvements: Purchase and/or Remodel: New Construction: Equipment: 	\$ \$ \$ \$	
 Land Improvements: Purchase and/or Remodel: New Construction: Equipment: Furniture and Fixtures: 	\$ \$ \$ \$ \$	
 Land Improvements: Purchase and/or Remodel: New Construction: Equipment: Furniture and Fixtures: Working Capital: 	\$ \$ \$ \$ \$	
 Land Improvements: Purchase and/or Remodel: New Construction: Equipment: Furniture and Fixtures: Working Capital: Contingencies: 	\$ \$ \$ \$ \$ \$	

V. REQUIRED ATTACHMENTS:

A. Current personal financial statement for each Applicant or for each Principal of a non-individual Applicant.

В.	. Business's financial statements, balance sheets, and profit and loss statements fo		
	preceding two (2) years. For new businesses, please provide Federal Tax		
	Returns for two (2) years, if financial statements are not available.		
C	All Applicants must include at least two (2) years' projected profit and loss		

- C. All Applicants must include at least two (2) years' projected profit and loss statements and cash flow statements for the Business.
- D. Completed Credit Consent Form (attached).
- E. List of ownership if 20% or more, please include Social Security numbers and residency for the last two (2) years.

VI. If the answer is "Yes" to any of the following questions, please explain on an attached sheet.

1.	Are there any outstanding judgments against any Applicant or any principals of			
	Applicant? Yes No			
2.	Have Applicant(s) or any Principals of an Applicant filed for bankruptcy			
	protection or been deemed bankrupt within the past 7 years? Yes No			
3.	Have Applicant(s) or any Principals of an Applicant had property foreclosed upon			
	or given title or deed in lieu thereof in the past 7 years? Yes No			
4.	Is any Applicant or any Principal of an Applicant a party to a lawsuit?			
	Yes No			
5.	Has any Applicant or any Principal of an Applicant been obligated, directly or			
	indirectly, on any loan which resulted in foreclosure, transfer of title in lieu of			
	foreclosure, or judgment? Yes No			
6.	Is any Applicant or any Principal of an Applicant presently delinquent or in			
	default on any Federal debt or any other loan, mortgage, financial obligation,			
	bond, or loan guarantee? Yes No			
7.	Is any Applicant or any Principal of an Applicant obligated to pay alimony, child			
	support, or separate maintenance? Yes No			
8.	Is any part of the down payment borrowed? Yes No			
9.	Is any Applicant or any Principal of an Applicant a co-maker or endorser on a			
	note? Yes No			

ACKNOWLEDGEMENT:

No assistance shall be provided to a small business that discriminates against any employee(s) because of race, religion, color, national origin, sex or age.

All Applicants and any principals of an Applicant agree to promptly respond to all requests from the Southeast Mississippi Community Investment Corporation concerning servicing activities, including but not limited to semiannual job request statements, semiannual and year-end financial statements, updated personal financial statements, copies of insurance declarations, and property tax receipts.

CERTIFICATION/AUTHORIZATION:

I/we hereby certify that, to the best of my/our knowledge, the information included in this application package for the purpose of obtaining a loan from the Southeast Mississippi Community Investment Corporation is true and correct as of the date set forth below, and I/we agree to promptly notify the SEMCIC of any change in such information as soon as I/we become aware of same.

I/we hereby authorize SEMCIC to proceed with verification of my/our personal/company credit, the value of the security for this loan, criminal background checks and other matters relating to this application.

Applicant:		
	ne:	
Title: _		
Principal's Signature		Date
Principal's Signature		Date
Individual Applicants:		
Signature		Date
 Signature		Date
Signature		Date

CREDIT CONSENT FORM

Loan Applicants and principals of any Applicant specifically authorize, acknowledge, understand

All loan applications through the Southeast Mississippi Community Investment Corporation must include a credit report; this credit report must remain in the file for the life of the loan.

Certain state or federal agencies or participating organizations may require the Southeast Mississippi Community Investment Corporation to transmit to them a copy of the loan participant's credit report.

and agree that the Southeast Mississippi Community Investment Corporation may supply this credit report information to the required agencies as part of the loan application process. Signed this ______ day of ______, 20____. Name of Applicant or Principal (please print) Name of Applicant or Principal (please print) SSN SSN Date of Birth Date of Birth By: (Signature) By: (Signature) Name of Non-Individual Applicant TIN (Signature) By:

Title

JOB COMMITMENT CERTIFICATION

	do(es) hereby agree and certify that	
	shall create new jobs at	
	located in	
County, Mississippi, within twenty-four months	of a loan closing with the Southeast Mississipp	
Community Investment Corporation on	·	
	further acknowledges that failure to do so	
without acceptable reasons shall give the Southe		
Corporation the option of declaring the loan in d	efault and demand payment in full.	
	does further agree that	
	shall respond semi-annually to the	
Southeast Mississippi Community Investment C	orporation's request for information on the total	
number of employees, current financial conditio	n, insurance coverage in place, tax payment	
status and related items.		
This the, 20_		
, 20_		
Name of Applicant or Principal (please print)	Name of Applicant or Principal (please print)	
By: (Signature)	By: (Signature)	
Name of Non-Individual Applicant		
By: (Signature)		
Title		

SOUTHEAST MISSISSIPPI COMMUNITY INVESTMENT CORPORATION

APPLICANT WAIVER AND RELEASE

In exchange for the valuable consideration provided by the Southeast Mississippi Community Investment Corporation (hereinafter "SEMCIC"), and as a condition of my application for the SEMCIC loan program, I represent, covenant and agree, on behalf of Applicant, myself and my successors, assigns, heirs and any other person claiming by, under or through me or Applicant, as follows:

- 1. I acknowledge that application for the SEMCIC loan program requires the compilation and processing of certain sensitive and confidential financial and personal information related to me and my business. I further acknowledge that, as part of the loan application process, I have given SEMCIC permission to investigate and retrieve certain information about me and/or the Applicant entity, including credit and criminal history information. I further acknowledge that all such application and background information may be provided to the Board of Directors, staff, designees and agents of SEMCIC (the "Released Parties") for review, analysis and consideration as part of the deliberations in determining whether to make a loan under the SEMCIC program.
- 2. I, on behalf of myself and Applicant, waive all claims against any of the Released Parties for any injuries, damages, losses or claims, whether known and unknown, which arise during or result from the application for or participation in the SEMCIC loan program, regardless of whether or not the loan was granted, and regardless of whether or not caused in whole or part by the negligence or other fault of any of the Released Parties. I, on behalf of myself and Applicant, release and forever discharge the Released Parties from all such claims.
- 3. I further agree, on behalf of myself and Applicant, to indemnify and hold the Released Parties harmless from all losses, liabilities, damages, costs or expenses (including but not limited to reasonable attorneys' fees and other litigation costs and expenses) incurred by any of the Released Parties as a result of any claims or suits that I (or anyone claiming by, under or through me) may bring against any of the Released Parties to recover any losses, liabilities, costs, damages, or expenses which arise during or result from my application for or participation in the SEMCIC loan program, regardless of whether or not the loan was granted, and regardless of whether or not caused in whole or part by the negligence or other fault of any of the Released Parties.

4. I hav execute it voluntarily	•	d this Agreement. I understand it fully and I	
EXECUTED this	day of		
Applicant		Applicant Signature	_