

CDC Small Business is part of Momentus Capital. Find out more information at momentuscap.org

Commercial Real Estate Loan

Applicant Instructions

As a requirement of your commercial real estate loan application, please complete this document. In getting a loan with a mission-based lender, part of the pre-qualification process includes providing information about how the loan will impact jobs at your company and benefit your local community.

Please submit the completed form to your contact at CDC and if you have any questions, please reach out to your loan officer.

General Information

Contact information for the person responsible for completing this questionnaire

First and Last Name	
Phone	
Email	

Information about the company submitting this questionnaire

Company Name	
Date Submitted	
Date Business Commenced	
Organization Type	

Project location

Street	
City, State	
Zip Code	

Company Ownership

Owner Name	Ownership %	Title

Affiliate Companies: Provide the name of any other entities which you control or have $\geq 20\%$ ownership. If the affiliate is a real estate holding company, please provide property address and tenant information (tenant name, monthly lease income, and lease expiration).

Affiliate Company Name	
Your ownership %	
Management team names & roles	
Detailed explanation of business operations	
Tenant Information if necessary	

Affiliate Company Name	
Your ownership %	
Management team names & roles	
Detailed explanation of business operations	
Tenant Information if necessary	

Affiliate Company Name	
Your ownership %	
Management team names & roles	
Detailed explanation of business operations	
Tenant Information if necessary	

Use of Funds & Loan Amount Requested

① Land & Building Purchase (or refinance of Land/Building)	\$
② Construction/Tenant Improvements	\$
③ Other (please specify)	\$
Sum of 1-3 = TOTAL PROJECT AMOUNT	\$
Minus BORROWER CONTRIBUTION (discuss with your Loan officer what is required)	\$
Equals = AMOUNT OF LOAN REQUEST	\$

About the Business: (History of company, when was it established, detailed explanation of products/services offered, etc.)

Competition: (List competitors)

Competitive Advantage:

Customers: (List Top clients and the % of business you do with them?
Any concentration of accounts? If so, how long have you been doing business with them?)

Management Team: (Who are the owners, and their responsibilities, years in the industry, education, training, etc. and what is your succession plan? Please also include the names and roles of any other executive managers)

Business strategy: (How do you acquire clients/grow revenues?)

Revenue

Annual Gross Revenue of Business:	\$
-----------------------------------	----

Facility Overview

Square Footage of facility:			
Square Footage space to be occupied by applicant business:			
Identification of 3 rd party tenant(s)			
Name of Tenant	Square footage occupied	Monthly Rent	Maturity date of lease

Community Impact

Overview

Please indicate the current and projected number of full-time equivalent (FTE) jobs that will be created or retained as a result of securing this financing.

*Control is defined as 50% or greater direct ownership or primary officer or managing position.
One FTE is a 35-hour or more work week.*

Projected number of permanent jobs created due to the financing	
Current number of permanent employees:	
Is Applicant minority-owned-controlled*? (Y/N)	
IS Applicant woman-owned/-controlled*? (Y/N)	
Is Applicant veteran-owned/-controlled*? (Y/N)	
Does the Applicants board ownership have >50% minority membership? (Y/N, N/A)	
% of current employees who are racial/ethnic minorities (Hispanic, African American, Asian, Native American):	
% of current employees who are women:	

Projected jobs to be created due to the financing

Job Category	Full / Part-Time	Salary/ wage	Benefits (Y/N)	Permanent / Temporary	No. of Jobs	Is a four-year degree required?
Ex: Manager	Full-Time	\$16/hour	Y	Permanent	5	N

Current Employees

Please fill out this table OR Attach current payroll including position, salary and benefits, as shown in the table.

Job Category	Full / Part-Time	Salary/ wage	Benefits (Y/N)	Permanent / Temporary	No. of Jobs	Is a four-year degree required?
Ex: Manager	Full-Time	\$16/hour	Y	Permanent	5	N

Employee Benefits

Please indicate which benefits are offered to current and projected full-time equivalent (FTE) and part-time equivalent (PTE) employees by marking "Y" or "N" in each box.

Benefit	Offered to FTEs?	Offered to PTEs?
Paid Holidays		
Paid Vacation		
Paid Sick Days		
Health Insurance		
Dental Insurance		
Insurance for Dependents		
Short-Term Disability		
Long-Term Disability		
Life Insurance		
Maternity/Paternity Leave		
401(k) / Other Retirement		
Stock Ownership		
Child Care		
Education / Training		

Impact

Anticipated Impacts of Financing on Business Growth

Please answer the questions below regarding the operational impact this building will have on your business

- 1** What are the main benefits of acquiring this new building?

- 2** Is this a relocation or expansion?

- 3** How many square feet are you in now? What size of building you are going to?

- 4** When does your current lease(s) expire? What is your monthly rent that will go away?

- 5** How far away is the building from your current location?

A: Will this affect your clients?

B: How will that affect you retaining your employees?

Please describe barriers your organization has faced to expansion and modernization, particularly those related to property expenses (i.e. burdensome or fluctuating rent, inability to control building alterations, lack of income from property appreciation, etc.). How will this loan allow you to surpass these barriers? How will it impact your ability to promote growth in your local community in the next 5-10 years and in the long-term future?

--	--

Applicant Signature	
Name and Title	
Date	