

# Nebraska Enterprise Fund (NEF) Loan Pre-Application



Complete as much as possible for pre-application consideration, **for assistance call 402.685.5500.**

*Feel free to use short concise answers, lists OR attached documentation to answer items below.  
Type in MS Word or print and complete by hand, return to NEF representative.*

## Pre-Application

Business Name	
Applicant/Owner(s) Names: <i>(name of partners/co-owner/spouse and % of business owned)</i>	_____ _____
Applicant Phone #	Home Phone #: _____ Cellular Phone#: _____
Business Address	Street: City: State: ZIP:
County	
Business Federal EIN#:	EIN#: _____
Dunn & Bradstreet	DUNS#: _____
Business Phone	
Email/website	
Business Ownership Structure	Sole Proprietor: ____; LLC:____; Sub-chapt Corp. S____; Corporation:____; Partnership:____; Other (describe):_____
Is this a Home Based Business	Y__ N__
Type of Business Activity	_____ _____
Business Start Date	
Owner(s) Experience	_____ _____
Employment Information	# of employees - excluding owner(s) Full Time :____ Part Time :____ How many employees might be added if loan approved: _____
Financial Overview	Current Year Gross Revenues/Sales: \$ _____ Current Year-to-Date net income (loss) for this year \$ _____ Avg. Monthly Sales: \$ _____
Owner Information	Owner monthly or yearly draw from business: \$ _____ Owner salary monthly \$ _____ Does the business provide health insurance to the owner(s) Y__ N__ Does the owner(s) have health insurance from another source? Y__ N__
Bank Information	Bank: _____ Name of Banker : _____

	Does the business currently have other bank loans and debt? Y__ N__ List bank loans, credit accounts, credit cards and other loans
Creditor Information	Creditor _____ Amount \$ _____ Creditor _____ Amount \$ _____ Creditor _____ Amount \$ _____ Creditor _____ Amount \$ _____
Loan amount requested:	List loan purposes /uses by \$ amount.  \$ _____ for Purpose? _____ \$ _____ for Purpose? _____ \$ _____ for Purpose? _____  Total Amount of business loan requested? \$ _____  Requested loan terms (in months) _____
Project Details	Total Project Cost (NEF and other sources of funding total amount) \$ _____ Amount Owner(s) personal investment (cash or equity added) \$ _____ Loan Amount requested (Project cost minus owners investment) \$ _____
Background:	Does the applicant or any principal of the business have any outstanding judgments, lawsuits, tax liens, or disputes Y__ N__ ; Describe: _____  Have the owner(s) ever filed bankruptcy? Y__ N__ ; If yes, when? _____
Assistance request:	The owner(s) of this business certify that the info provided in this application is correct/accurate.  The owners(s) are seeking; a) Loan in the amount of \$ _____  b) Technical Assistance during the application for the above loan and during the term of the loan if the loan is made to this business.  We waive all claims against NEF personnel, and that of its resource partners and host organizations, arising from Technical Assistance.  Owner signature(s): [digital signature can be typed below with date]  _____  _____  Date: _____

**Nebraska Enterprise Fund  
CREDIT History Search Authorization**



*All business co-owners, principals & guarantors, must supply a signed credit history permission sheet.*

Name	Date
DBA	Driver's License #
Address	City
State	Zip Code
Telephone	E-mail
FAX	Social Security #
Date of birth	Federal I.D. #
Employment	
Include employer's address:	

I agree to give full authorization to the Nebraska Enterprise Fund (NEF), of Oakland, Nebraska, to perform a credit history search on my past and current credit history. I give full authorization to NEF to utilize the information that I have supplied on this form for the purpose of performing a credit history search.

You may supply a brief paragraph stating your reasons if you are unwilling to authorize NEF to perform a credit search.

Print Applicant(s) Full Name: \_\_\_\_\_

Social Security number of applicant(s): \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***Complete duplicate sheet for all business co-owners, principals & guarantors.***  
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