****

Thank you for your application.

If you have questions, please

contact an IFA Funding Manager.

Our office locations are listed at

the end of this form.

**ILLINOIS FINANCE AUTHORITY**

**APPLICATION FOR INDUSTRIAL REVENUE BOND AND**

**EXEMPT FACILITIES REVENUE BOND FINANCINGS**

**APPLICATION # \_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **COMPANY**
2. **Legal Name and Address of Borrower:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address City State Zip Code County

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person Title Telephone Number

**2. Name and Address of Principal Occupant or User (if different from #1)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address City State Zip Code County

**3. Type of Loan: Conduit: \_\_\_\_\_\_\_\_\_\_\_ Tax-Exempt: \_\_\_\_\_\_\_\_\_\_\_ Taxable: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Type of Business/Operation at subject location(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **SIC/NAICS Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SIC/NAICS Category: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. **Federal Tax ID Number or Borrower’s Social Security Number : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
3. **Form of Organization of Borrower(s)**

a. \_\_\_\_\_ Individual Proprietorship

b. \_\_\_\_\_ Partnership: \_\_\_\_\_General \_\_\_\_\_ Limited

\_\_\_\_\_ Illinois \_\_\_\_\_Other State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

c. \_\_\_\_\_ Corporation: \_\_\_\_\_ Private \_\_\_\_\_Public

State of Incorporation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. \_\_\_\_\_ Limited Liability Company:

State of Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Is the Company Wholly or Partly Owned by Any Other Business?**

**\_\_\_\_\_ No \_\_\_\_\_ Yes (Explain): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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1. **Names and address of principal shareholders (1% or more) and/or all general partners or members of any LLC that will own the project (or serve as a co-borrower):**

Name Address % of Ownership/Membership

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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1. If ownership of any property financed will be by a Land Trust, identify the trust and all beneficiaries, including the percentage of beneficial interest of each:

Trust: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Beneficiaries Address % of Beneficial Interest

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. **Management:**

**Please list those people who will be responsible for the management of the company.**

Percent Year Started

Name Position Ownership With Company

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. **History and Background of Business and Developer (or Project Owner)**

* Please list:

* Date established
* Dates of major changes in business
* Employee and sales growth
* Dates new product lines were established, and
* Other major influences on the business or products produced

b. (Applicable only to real estate projects) Please provide a detailed description of the developer’s performance history in the development and leasing of similar properties. In addition, include the following information: (Include all supplemental materials, if any, in Section F. Attachments).

* Type of projects
* Location
* Dates
* Type of user and building, etc.

1. **PROJECT**
2. **Project Description**

**Briefly describe all elements of the proposed project, including land acquisition, building construction, acquisition and/or renovation, equipment purchases and installation, etc. Estimate the project development timetable (including project commencement and completion dates). If the applicant will occupy less than 100% of the building, provide information regarding any unrelated third-party tenant(s), if any. Please provide the tenant name, type of business, amount of space to be leased, monthly and annual lease payment, and term of the underlying lease agreement (contract). Describe what the facility is to be used for and by whom.**

**13. Describe the products to be produced at the proposed facility by the applicant at the facility (and the activities to be undertaken by any tenants, as applicable).**

**14. Description of Machinery and Equipment to be Acquired with Proceeds of the Bond Issue:**

List all major equipment, or categories of equipment. Include the cost, and whether it is new or used.

State the amount of lead time necessary between placement of an order and delivery. (Include

attachments, if any).

Machinery & Equipment Lead Time New/Used Cost

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

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**15. Project Location: (attach additional locations as necessary, including the 9-digit Zip code for each site)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address City 9 –Digit Zip Code County

Is the project located in (a) an Illinois Department of Commerce and Economic Opportunity Enterprise Zone or (b) local Tax Increment Financing District? \_\_\_\_\_ No \_\_\_\_\_ Yes

Name of Illinois Enterprise Zone and/or Local Tax Increment Financing District:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Site Information:**

Number of acres or square feet: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Access Roads: \_\_\_\_ Yes \_\_\_\_ No Rail Siding: \_\_\_\_ Yes \_\_\_\_ No

Utilities Available:

\_\_\_\_\_ Water

\_\_\_\_\_ Electricity

\_\_\_\_\_ Sewer

1. **District Numbers: (Add attachment if necessary in order to list multiple project districts):**

**Source: Illinois State Board of Elections website (Find District) www.elections.il.gov/DistrictLocator/DistrictOfficialSearchByAddress.aspx**

U.S. Congressional \_\_\_\_\_\_\_\_\_\_ Illinois House \_\_\_\_\_\_\_\_\_\_ Illinois Senate \_\_\_\_\_\_\_\_\_\_

1. **Building Information:**

Existing Structure(s) New Construction

(or Addition)

Number of Buildings \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dimensions \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Square Feet \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Stories \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Construction Type:**

\_\_\_\_ Masonry

\_\_\_\_ Metal

\_\_\_\_ Other (Describe): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Square Footage Square Footage

**Type of Use:**

Office \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Retail \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Manufacturing \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Warehouse/Distribution \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Please describe fully the collateral to be offered to the Illinois Finance Authority or directly to Bondholders as security for the loan (i.e., first or second mortgage, first or second lien on equipment, personal guarantees, corporate guarantee, co-signer, etc.), if applicable. *Note:*** *This question is not applicable for Applicants whose Bonds will be secured by a Bank Letter of Credit [or other credit enhancement] or purchased as a direct investment by the Applicant’s Bank/Lender.*
2. **SOURCES & USE OF FUNDS**

**23. Summary of Project Costs Percent of Cost**

Land Acquisition…………………………………………… $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_

Building Acquisition……………………………………….. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_

Rehabilitation………………………………………………. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_

New Construction…………………………………………. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_

New Machinery & Equipment…………………………….. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_

Used Machinery & Equipment……………………………. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_

Architectural & Engineering……………………………….. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_

Legal & Professional………………………………………. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_

Other\* …………………………………………………….. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_

Other\* …………………………………………………….. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_

**Total Project Costs………………………………………….. $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 100%**

1. **Sources of Funds**

Bond Amount …………………………………………….…. $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_

Bank Financing……………………………………………… \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_

Other\*……………………………………………………….. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_

Other\*……………………………………………………….. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_

Equity………………………………………………………... \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_

**Total Source of Funds………………………………………. $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 100%**

**D. FINANCING**

**25. Existing Financing Arrangements:** List any bank line(s) of credit, other bank term loans, short-term debt, etc. Identify the bank(s) and account officer(s).

**26. Description of Financing Structure (select Item 26a, 26b, or 26c as applicable to your financing):**

**a. If Bank Letter of Credit Structure: If your Bank/Lender will be providing credit enhancement to facilitate a sale in the national capital markets, please identify your Bank/Credit Enhancer and the proposed terms of the Direct Pay Letter of Credit :** (if a Commitment, or Letter of Interest has been received, please attach copy).  
  
**(i)** **Name of Direct Pay Letter of Credit Bank**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Interest Rate Mode: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Term: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amortization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(b) Name of Proposed Investment Bank/Underwriter: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**b. If Bank Direct Purchase Structure: If your Bank/Lender will purchase the Bonds as a Direct Investment:** (if a Commitment, or Letter of Interest has been received, please attach copy).  
  
**Name of Bank/Lender that will serve as Direct Lender/Bond Investor:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Estimated Rate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Term: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amortization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**c. If Borrower has its own Investment Grade Rating and will sell Bonds based on your Company’s credit rating:**  
  
**Please identify your Company’s current credit ratings (as of the date of execution of this application). In addition to reporting the applicable rating and outlook, please note the date on which the rating was awarded or most recently affirmed, as applicable:**

Moody’s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ S&P: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fitch: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Estimated Interest Rate Mode (Fixed or Variable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Term: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amortization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supplemental Credit Enhancement (e.g., Bank Letter of Credit or Bond Insurance), if applicable: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**27. Guarantees or Additional Collateral (if applicable):**

1. For Non-rated Bonds to be sold into the market on a Non-Rated Basis (if applicable): If repayment of the Bonds (on bonds sold on a non-rated, unenhanced basis in the national capital markets) is to be guaranteed by an entity other than the Borrower, please list the name and address of the guarantor(s) and their relationship to the Borrower.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. (If applicable) If there will be personal guarantees pledged directly to the Bondholders, please complete Forms F-4

(Statement of Personal History) and F-5 (Personal Financial Statement).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**E. EMPLOYMENT**

1. **Current and Projected Employment:**

The purpose of the Illinois Finance Authority is to create new, permanent jobs and/or assist in the retention of existing jobs. The Authority places a great deal of emphasis on this section in arriving at their final decision regarding approval or disapproval of this application. We urge you to be as thorough and accurate as possible in arriving at your estimates.

**a. Total Current and Projected Employment, Annual Payroll, and Production Shifts**

1 Year After 2 Years After

Employment Current Project Project

Categories Employment Completion Completion

Obligor Tenant Obligor Tenant Obligor Tenant

Professional \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

Clerical and

Administrative \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

Skilled \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

Semi-Skilled \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

Unskilled \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

Other \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

**TOTAL** \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

Annual Payroll \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

Number of

Shifts Per Day \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_

**b. Employment and Tenant Information (applicable to Commercial Real Estate Projects Only)**

Tenant Amount Status Employment

Company and/or Lease Type $ Amt. Per Leased Term Of Intent Retained

Type of User (Gross or Net) Sq. Ft./Yr. (Sq. Ft.) Lease Pre-Leased New Total

\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

1. **Please list the assumptions used for the employment projections above in Item 27a or 27b:**
2. **If this application pertains to the retention of existing jobs, please state the number of**

**employees to be retained, and explain why these jobs would be eliminated or reduced**

**if the Bonds are not issued.**

1. **Please estimate the number of construction jobs to be created as a result of this project (both peak and average):**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Estimated number of months construction workers will be employed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **COMMUNITY IMPACT**

**ECONOMIC FEASIBILITY AND MARKETING INFORMATION**

1. **Economic and Community Impact:**

Describe the project’s overall impact on the surrounding community (i.e., increased traffic, generation of

retail sales taxes, real estate (property) taxes to the community, environmental impact, employment opportunities,

quality of life, etc.).

State why tax-exempt financing will help the borrower. Explain why IFA financing is necessary for this project

to be successful. (Include supplemental materials, if any.)

**For INDUSTRIAL projects**

Document the increased demand for your product(s) driving the need for the proposed expansion (e.g., turning away business; current order backlogs; and describe marketing methods to be used in the distribution of your product(s). Please identify your major customers, competitors, and suppliers (disclosure of your customers, competitors, and suppliers will remain confidential).

**For COMMERCIAL** **projects**

Provide a market study for the project which includes information on comparable properties or projects in the pertinent market area. Describe competitive projects and market rents in the area, access to the site and provide background profile on the management agent for the project or property. What impact will this project have on comparable properties within the market area? The Authority will request a copy of the final market study prepared in connection with the final bank financing.

1. **PROFESSIONAL REPRESENTATION**

**FOR THE BORROWER/APPLICANT**

Please attach contact information (i.e., company name; contact name/title; mailing address; contact direct telephone; fax; contact e-mail address) for the following participants in the proposed financing. If unknown at this time, indicate “To be determined” or “TBD”.

* Borrower’s Counsel
* Borrower’s Auditor/ Outside CPA
* Bond Counsel
* Business Advisor/Financial Advisor to Borrower
* Credit Enhancement (i.e., Bond Insurer or Letter of Credit Bank)
* Direct Bond Purchaser/Investor (Non-Letter of Credit Structure)
* Counsel to Credit Enhancer or Direct Bond Purchaser/Investor
* Underwriter/Placement Agent
* Counsel to Underwriter/Placement Agent:
* Bond Trustee
* Rating Agency(ies)
* Architect (applicable to construction/renovation projects only)
* General Contractor (applicable to new construction/renovation projects only)

1. **REQUIRED ATTACHMENTS (All Projects)**

* Signed, dated IFA Application form
* $1,500 non-refundable application fee, payable to “Illinois Finance Authority”, remitted by check or via wire transfer (please contact IFA for wire transfer instructions).
* Copies of applicable sales brochures, industry trade articles, general press articles
* Web site URL
* Copies of last 3 years of financial statements with footnotes as prepared by outside CPA (can be audited, reviewed, or compiled). If financial statements are not available for any of the past 3 years, applicant may complete Forms F-1(a) and F-1(b) instead (not required if CPA statements are submitted).
* 3 Year Forecast of Sales and Earnings Form F-2(a). Employee-related expenses should be consistent with phase-in of new project. A brief explanation for the underlying assumptions is optional. (The Authority’s staff are available to provide additional guidance.)
* 3 Year Forecast Balance Sheet is optional (Form F-2(b). (The Authority’s staff are available to provide additional guidance.)
* Complete a Statement of Personal History (Forms F-4) for any owner of 7.5% or more of the Applicant or Operating Company.
* *Required for Taxable Commercial/Rental Real Estate Projects Only:* Net Operating Income/Cash Flow Analysis.

1. **Supplemental Items Required Only for Non-Recourse Project Financings:**

* Non-recourse, start-up companies without a corporate guarantor should also include personal financial statements for each key employee and complete a Statement of Personal History (Form F-5) for owners of 7.5% or more of the Applicant or Operating Company.
* Internal feasibility study covering a minimum of 5-years or an “as-if completed” or other acceptable “benchmarking” appraisal is required to accompany applications for non-recourse project financings. If this report is not available at the time of application, it should be submitted to IFA prior to approval of the Final Bond Resolution by IFA’s Board of Directors. Details should be comparable to information to be disclosed to prospective lenders or investors.

1. **CERTIFICATION BY APPLICANT**

Applicants are hereby notified that the provisions of the Prevailing Wage Act (Ill. Compiled Statutes, 820 ILCS 130 et. seq) and the Preference to Illinois Citizens Act (Ill. Compiled Statutes. 30 ILCS 570 et seq) may apply to the project which is the subject of this application. Construction cost estimates should take into account the effect of said Acts.

The applicant certifies by signing the application in the space below that the site for the proposed construction is not located in a SPECIAL FLOOD HAZARD AREA as defined and designated by the Illinois Department of Transportation, Division of Waterways; and that an investigation has been made to determine that it is not in such an area.

Applicant hereby certifies that all information contained above and in exhibits attached hereto is true to his/her best knowledge and belief and are submitted for the purpose of obtaining financial assistance from the Illinois Finance Authority.

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

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Illinois Finance Authority**

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please return completed application form (and attachments) to an Illinois Finance Authority office below:**

*Mt. Vernon 2929 Broadway, Suite 7B, Mt. Vernon, IL 62864 618.244.2424 618.244.2433 fax*

*Springfield 500 E. Monroe St., 3rd Floor, Springfield, IL 62701 217.782.5792 217.782.3989 fax*

[*www.il-fa.com*](http://www.il-fa.com) *TTY: 1.800.526.0844 | VOICE : 1.800.526.0857*

**Offices of the Illinois Finance Authority**

*Chicago 160 N. LaSalle St. Suite S-1000, Chicago, IL 60601*

*Mailing Address: P.O. Box 641249, Chicago, IL 60664 312.651.1300 312.651.1350 fax*

**Not necessary if CPA-prepared Statements are provided**

**are provided Stat**

**Form F-1 (a)**

**ILLINOIS FINANCE AUTHORITY**

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preparer’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Three Year Historical Comparison of Sales and Earnings**

**Year Ending Year Ending Year Ending Interim**

**SALES/REVENUES $\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $**

Less: Cost of Goods Sold \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Less: Cost of Goods Sold-Depreciation \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Less: Cost of Goods Sold-Rent \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

**GROSS PROFIT $\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $**

Other Operating Income \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Selling Expense \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

General and Administrative \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Rent \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Officer’s Compensation \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Officers Bonus \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Pension Plan Contribution \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Profit Sharing Contribution \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL EXPENSES $\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $**

**OPERATING PROFIT $\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $**

Interest Income \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Interest Expense \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Other Income \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Other Expense \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

**PROFIT BEFORE TAXES &**

**EXTRAORDINARY ITEMS $\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $**

Extraordinary Income/Loss \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

**PROFIT BEFORE TAXES** $\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $

Less: Federal Income Taxes \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Less: State Income Taxes \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

**NET INCOME** **$\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $**

**Form F-1(b)**

**Not necessary if CPA-prepared Statements are provided**

**are provided Stat**

**ILLINOIS FINANCE AUTHORITY**

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Preparer’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Three Year Historical Comparative Balance Sheet**

**Year Ending Year Ending Year Ending Interim**

\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

**CURRENT ASSETS**

Cash **$\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $**

Accounts Receivable \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Inventory \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Prepaid Assets \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Other Current Assets \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL CURRENT ASSETS $\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $**

Land \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Building & Improvements \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Machinery & Equipment \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Leasehold Improvements \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Other Fixed Assets \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

GROSS FIXED ASSETS \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Accumulated Depreciation \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Other Assets \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL ASSETS $\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $**

**CURRENT LIABILITIES**

Short Term Debt **$\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $**

Current Portion – LTD \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Accounts Payable \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Accrued Liabilities \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Other Current Liabilities \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL CURRENT LIABILITIES $\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $**

Long Term Debt \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL LIABILITIES $\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $**

Net Worth \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Common Stock \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Paid In Capital \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Retained Earnings \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Treasury Stock \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL NET WORTH $\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $**

**TOTAL LIABS & NET WORTH $\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $**

**To be Completed by Applicant – Please Discuss with the Authority’s staff**

**Form F-2(a)**

**ILLINOIS FINANCE AUTHORITY**

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Three Year Forecast of Sales and Earnings**

Year Ending Year Ending Year Ending

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SALES/REVENUES $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Less: Cost of Goods Sold \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Less: Cost of Goods Sold-Depreciation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Less: Cost of Goods Sold-Rent \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**GROSS PROFIT $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Other Operating Income  **$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Selling Expense \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

General and Administrative \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rent \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Officer’s Compensation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Officers Bonus \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pension Plan Contribution \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Profit Sharing Contribution \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Depreciation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL EXPENSES $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**OPERATING PROFIT $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Interest Income \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Interest Expense \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Income \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Expense \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PROFIT BEFORE TAXES &**

**EXTRAORDINARY ITEMS $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Extraordinary Income/Loss \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PROFIT BEFORE TAXES $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Less: Federal Income Taxes \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Less: State Income Taxes \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NET INCOME**  **$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**To be Completed by Applicant – Please Discuss with the Authority’s staff**

**Form F-2(b)**

**ILLINOIS FINANCE AUTHORITY**

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Three Year Balance Sheet Forecast**

Year Ending Year Ending Year Ending

\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CURRENT ASSETS $\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Cash……………………………. \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Accounts Receivable…………... \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Inventory……………………… \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Prepaid Assets………………… \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Current Assets…………. \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL CURRENT ASSETS** **$\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Land………………………….. \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Building & Improvements…… \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Machinery & Equipment…….. \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Leasehold Improvements……. \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Fixed Assets………….. \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

GROSS FIXED ASSETS……. \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Accumulated Depreciation… \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Assets………………… \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL ASSETS** **$\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CURRENT LIABILITIES** **$\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Short Term Debt……………. \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Portion-LTD……….. \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Accounts Payable…………… \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Accrued Liabilities…………. \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Current Liabilities……. \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL CURRENT LIABILITIES** **$\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Long Term Debt……………. \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL LIABILITIES** **$\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Net Worth…………………. \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Common Stock……………. \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Paid in Capital…………….. \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Retained Earnings………… \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Treasury Stock……………. \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL NET WORTH** **$\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TOTAL LIABILITIES & NET WORTH** **$\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**For Commercial Real Estate Projects Only – Please Attach Years 4 and 5**

**Form F-3**

**ILLINOIS FINANCE AUTHORITY**

Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NET OPERATING INCOME/CASH FLOW FORECAST**

**FOR TAXABLE COMMERCIAL REAL ESTATE PROJECTS ONLY**

**Potential Gross Income** Year 1 Year 2 Year 3

\_\_\_\_\_\_\_\_square feet @ $\_\_\_\_\_\_\_\_\_/sq. ft. $\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_

office use

\_\_\_\_\_\_\_\_square feet @ $\_\_\_\_\_\_\_\_\_/sq. ft. $\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_

retail use

**Total Rent Collections**: $\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_

LESS Allowance for Vacancy and Income Loss ($\_\_\_\_\_\_\_\_\_ ) ($\_\_\_\_\_\_\_\_\_ ) ($\_\_\_\_\_\_\_\_­\_ )

Effective Gross Income $\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_

**LESS Operating Expenses:**

Real Estate Taxes……….. \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Insurance………………… \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Management…………….. \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Janitor…………………… \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Water……………………. \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Electricity……………….. \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Heat……………………… \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supplies…………………. \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Advertising……………… \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Accounting/Legal Fees….. \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Ground Maintenance……. \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Repairs & Maintenance…. \_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Building)*

**Total Operating Expenses$ \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Net Operating Income**  $ \_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_ **$\_\_\_\_\_\_\_\_\_\_**

**LESS Projected Annual Debt Service**  $\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_  **$\_\_\_\_\_\_\_\_\_\_**

**CASH FLOW** $\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_

**To be Completed by Owners of 7.5% or more of Borrower or Applicant**

**Form F-4**

|  |  |
| --- | --- |
| **ILLINOIS**  **FINANCE AUTHORITY**  STATEMENT OF PERSONAL HISTORY FOR IRB Projects | **INSTRUCTIONS:** This form must be completed by the proprietor (owner) if the applicant is a sole proprietorship, or by each general and each limited partner if the applicant is a partnership, or by each officer, each director, and each stockholder or member holding 7.5% or more of applicant’s voting stock, if the applicant is a corporation or a limited liability company. |
| 1. Name and address (Street, City, State and Zip Code)     Phone: ( ) | 1. a. Place of birth (City and State or Country)   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  b. Date of birth (Month, day, year)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  3. Citizen of United States? \_\_\_\_ Yes \_\_\_\_ No  4. Are you presently under indictment, on parole or probation?  \_\_\_\_Yes \_\_\_\_ No If Yes, please furnish details on a  separate sheet. |
|  | 1. Have you ever been charged with or arrested or convicted of any criminal offense other than a minor motor vehicle violation?   \_\_\_\_ Yes \_\_\_\_ No If Yes, furnish details on a separate  sheet. |
| 6. Have you ever been in receivership or adjudicated bankrupt? \_\_\_\_ Yes \_\_\_\_ No If Yes, furnish details on a separate sheet. | |
| 1. Starting with present address, list residence address for the past 15 years:   Date Address City State  \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ | |
| 1. Starting with present employer, list all employers during the last 15 years:   Date Address City State  \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ | |
| **Form F-4 continued**   1. Education Background:   School Attended Address Dates Graduated Degree  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_ | |

|  |
| --- |
| 1. Name and Address of Bank: \_\_\_\_ Checking \_\_\_\_ Savings   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. The information on this form will be used in connection with an investigation of your character. Any information you wish to submit that you feel will expedite this investigation should be set forth below, if needed. |
| Signature: Title: Date |

**NOTE: Only Required for New, Start-up Applicants**

**Form F-5**

**ILLINOIS FINANCE AUTHORITY**

**PERSONAL FINANCIAL STATEMENT**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| Name and Address – If joint statement for husband and wife, include both husband and wife’s full name. (John W. & Mary L. Smith) | |
| Assets Liabilities | |
| Cash on Hand and on Deposit…………… \_\_\_\_\_\_\_\_\_\_\_\_\_\_  U.S. Government Bonds………………… \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Accounts & Notes Receivable…………… \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Life Insurance – Cash Surrender Value only  (Do not deduct loans)………………… \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Stocks and Bonds  (Detail on Reverse Side)…………… \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Real Estate  (Detail on Reverse Side)…………… \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Automobile(s) – Present Value………. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Other Personal Property  (Detail on Reverse Side)…………… \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Other Assets  (Detail on Reverse Side)…………… \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Total Assets…………………………….. $ \_\_\_\_\_\_\_\_\_\_\_\_ | Accounts Payable…………………………… \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Notes Payable to Banks  (Detail on Reverse Side)………………. \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Notes Payable to others  (Detail on Reverse Side)……………………. \_\_\_\_\_\_\_\_\_\_\_\_\_\_    Installment Account – Auto  (Total Monthly Payment)………………… \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Loans on Life Insurance…………………… \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Mortgages on Real Estate  (Detail on Reverse Side)…………………… \_\_\_\_\_\_\_\_\_\_\_\_\_  Other Liabilities  (Detail on Reverse Side)…………………… \_\_\_\_\_\_\_\_\_\_\_\_\_  Total Liabilities………………………………... \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Net Worth……………………………………… \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Total Liabilities & Net Worth……………….. $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Source of Income (Describe below all Items Listed) Contingent Liabilities | |
| Salary (annually)……………………………….. \_\_\_\_\_\_\_\_\_\_\_\_\_  Investment Income (annually)………………… \_\_\_\_\_\_\_\_\_\_\_\_\_  Real Estate Income (annually)………………… \_\_\_\_\_\_\_\_\_\_\_\_\_  Other Income  (annually – describe below)………………… \_\_\_\_\_\_\_\_\_\_\_\_\_ | As Endorser or Co-Maker…………………… \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Legal Claims & Judgments…………………… \_\_\_\_\_\_\_\_\_\_\_\_\_  Provision for Fed. Income Tax……………….. \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Other Contingent Liabilities…………………… \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Form F-5**

**Personal Financial Statement Continued**

|  |  |  |  |
| --- | --- | --- | --- |
| Face Value  Of  No. Shares | Names of Securities | Cost | Market Value as of Statement Date  Quotation Amount |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**REAL ESTATE**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Location and Description | Year Purchased | | Cost | Assessed  Value | Fire  Insurance | Present  Value | Mortgage  Amount When Due | Yearly Gross  Rental Income |
|  | |  | $ | $ | $ | $ | $ | $ |
|  | |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |

|  |
| --- |
| Other Personal Property (Describe and if any is mortgaged, state name and address of mortgage holder and amount of mortgage,  terms of payment and if delinquent, describe delinquency.) |
| Other Assets (Describe in detail) |
| Other Liabilities (Describe in detail) |

**Form F-5**

**Personal Financial Statement Continued**

**LIFE INSURANCE**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Company | Face Amount  Of Policy | Total Cash  Surrender  Value | Total Loans  Against  Policy | Beneficiary | To Whom Policy is Assigned |
|  | $ | $ | $ |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

In submitting the foregoing statement, the undersigned guarantees its accuracy with the intent that it be relied upon by the Illinois Finance Authority in its decision whether or not to grant approval of accompanying loan application.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return completed application form (and attachments) to an Illinois Finance Authority office below:

*Mt. Vernon 2929 Broadway, Suite 7B, Mt. Vernon, IL 62864 618.244.2424 618.244.2433 fax*

*Springfield 500 E. Monroe St., 3rd Floor, Springfield, IL 62701 217.782.5792 217.782.3989 fax*

[*www.il-fa.com*](http://www.il-fa.com) *TTY: 1.800.526.0844 | VOICE : 1.800.526.0857*

**Offices of the Illinois Finance Authority**

*Chicago 160 N. LaSalle St. Suite S-1000, Chicago, IL 60601*

*Mailing Address: P.O. Box 641249, Chicago, IL 60664 312.651.1300 312.651.1350 fax*