

**Community**  
Futures



St Paul-Smoky Lake  
Region

**Corporate Head Office**

P.O. Box 1484  
4802 – 50 Avenue  
St. Paul, AB T0A 3A0  
T. 780.645.5782  
F. 780.645.5782  
[admin@cfpsl.ca](mailto:admin@cfpsl.ca)  
[www.cfpsl.ca](http://www.cfpsl.ca)

## Loan Application

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

Business Name: \_\_\_\_\_

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

Address: \_\_\_\_\_

Location: \_\_\_\_\_

Phone/Fax/Cell: \_\_\_\_\_

Email: \_\_\_\_\_

**COMMUNITY FUTURES ST. PAUL - SMOKY LAKE REGION**

**Schedule of Fees and Charges**

The following table of fees will be used by the Corporation effective April 1, 2021.

**Negotiation/Processing Fees**

- ❖ 1% of the principal amount of any loans, loan guarantees, and equity investments.

**Interest Rate Charges – Loans**

- ❖ Preferred Risk – Base Rate\*
- ❖ Good Risk – Base Rate\* plus 1%
- ❖ Fair Risk – Base Rate\* plus 2%

*\*Base Rate is 3% above the bank prime rate*

**Other Fees**

Legal Fees .....	Cost Recovery
Business Plan Assistance .....	First hour free - \$50.00 per hour thereafter
Amendment Fees .....	\$50.00
Security Registrations .....	Cost Recovery
Credit Information .....	Cost Recovery
NSF Cheques .....	\$25.00

Note: Fees may be waived or amended in certain circumstances.  
These decisions are made in consultation with the General Manager.

\*\*\*\*\* Please check the box if you are interested in knowing more about our \*\*\*\*\*  
\*\*\*\*\*Entrepreneurs with Disabilities Program \*\*\*\*\*

**LOAN APPLICATION**

1. Name of Applicant (s): \_\_\_\_\_

Telephone: \_\_\_\_\_

Cell: \_\_\_\_\_

Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Business Name: \_\_\_\_\_

2. Mailing Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

\_\_\_\_\_

3. Business Address: - as above or - \_\_\_\_\_ Postal Code: \_\_\_\_\_

\_\_\_\_\_

4. (a) Nature of Business (e.g. Manufacturing, retail, wholesale) \_\_\_\_\_

(b) List of services or products business will be providing \_\_\_\_\_

\_\_\_\_\_

5. Legal Status of Business:

Sole Proprietor \_\_\_\_\_ Limited Company \_\_\_\_\_

Partnership \_\_\_\_\_ Co-operative \_\_\_\_\_

6. If a Limited Company:

(a) Registered or to be registered in the Province of \_\_\_\_\_

(b) Attach a copy of Certificate of Incorporation or trade name if available

7. Anticipated Business Start Date: \_\_\_\_\_

8. (a) **Amount of Loan requested** \$ \_\_\_\_\_

Forecasted Monthly Payments \$ \_\_\_\_\_

Repayable over \_\_\_\_\_ Years / Months

**(b) Estimated Program Costs**

Land and Building	\$ _____
Machinery/Equipment	\$ _____
Furniture/Fixtures	\$ _____
Vehicle	\$ _____
Working Capital	\$ _____
Refinance existing debt	\$ _____
Other ( <i>specify</i> ) _____	\$ _____
<b>TOTAL</b>	<b>\$ _____ (<u>must equal Financing Total</u>)</b>

**(c) Method of Financing Program**

Owner's Contribution	\$ _____
CF Loan Requested	\$ _____
Bank Loans	\$ _____
Other Loans	\$ _____
<b>TOTAL</b>	<b>\$ _____ (<u>must equal Costs Total</u>)</b>

9. Collateral/Security offered for this loan (include year, make/model, serial numbers)

---

---

---

10. Name of Clients Bank(s) \_\_\_\_\_

Branch Address \_\_\_\_\_

Contact Name at Bank \_\_\_\_\_

Telephone \_\_\_\_\_

Existing Business Loans, if any \$ \_\_\_\_\_

## STATEMENT OF PERSONAL FINANCIAL AFFAIRS (*APPLICANT 1*)

Surname:	First Name:	Middle Name:	Social Insurance Number:	
Telephone: (H)	(W)	(C)	Date of Birth	Driver's License
Present Address:	City:	Province:	Postal Code:	How Long:
Previous Address ( <i>if less than 3 years at present address</i> )	City:	Province:	Postal Code	How Long:

### PERSONAL FINANCIAL STATEMENT

ASSETS:	\$	BANK/HOLDER	LOCATION
Cash – Account #			
Cash – Account #			
Cash – Account #			
Real Estate (present value)			
Automobile: Make:                      Yr.:			
Automobile: Make:                      Yr.:			
Other Item: Make:                      Yr.:			
Stocks, Bonds, Etc. (cash value)			
Household/Personal Effects			
Other:			
<b>TOTAL ASSETS (A)</b>			

LIABILITIES	TERM/ MATURITY	MONTHLY PYMT	BALANCE (\$)	BANK/ HOLDER	LOCATION
Overdraft					
Mortgages					
Bank Loan					
Bank Loan					
Credit Card					
Credit Card					
Other:					
<b>TOTAL LIABILITIES</b>					
<b>NET WORTH</b>					
			<b>(B)</b>		
			<b>(A) – (B) =</b>		

I hereby certify that the information provided is correct and permission is hereby granted for the designated lending institution to conduct a credit investigation.

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_



## STATEMENT OF PERSONAL FINANCIAL AFFAIRS (*APPLICANT 2*)

Surname:	First Name:	Middle Name:	Social Insurance Number:	
Telephone: (H)	(W)	(C)	Date of Birth	Driver's License
Present Address:	City:	Province:	Postal Code:	How Long:
Previous Address ( <i>if less than 3 years at present address</i> )	City:	Province:	Postal Code	How Long:

### PERSONAL FINANCIAL STATEMENT

ASSETS:	\$	BANK/HOLDER	LOCATION
Cash – Account #			
Cash – Account #			
Cash – Account #			
Real Estate (present value)			
Automobile: Make:                      Yr.:			
Automobile: Make:                      Yr.:			
Other Item: Make:                      Yr.:			
Stocks, Bonds, Etc. (cash value)			
Household/Personal Effects			
Other:			
<b>TOTAL ASSETS (A)</b>			

LIABILITIES	TERM/ MATURITY	MONTHLY PYMT	BALANCE (\$)	BANK/ HOLDER	LOCATION
Overdraft					
Mortgages					
Bank Loan					
Bank Loan					
Credit Card					
Credit Card					
Other:					
<b>TOTAL LIABILITIES</b>					
<b>NET WORTH</b>					
			<b>(B)</b>		
			<b>(A) – (B) =</b>		

I hereby certify that the information provided is correct and permission is hereby granted for the designated lending institution to conduct a credit investigation.

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_





**The Applicant(s):**

---

- Agrees to provide necessary information that Community Futures St. Paul - Smoky Lake Region requires to facilitate consideration of this application for financial assistance.
- Authorizes Community Futures St. Paul - Smoky Lake Region to disclose the details of this application and the affairs of his/her business to such persons, firms, and banks as may be necessary to facilitate consideration of the application for financial assistance.
- Certifies that the statements and information made herein, and those attached which form part of this application, are true and correct.
- Understands that any false or misleading information given in this application or any accompanying materials may result in rejection of this application; or, it later determined, may result in immediate demand for repayment of the loan in full, together with interest accrued thereon.
- Is responsible for all costs incurred in the process of completing the loan.
- Authorize Community Futures St. Paul - Smoky Lake Region the option to make a public announcement, at my/our cost, relating to their involvement in this project, if loan is approved.
- To obtain funds your Head Office must be located in the St. Paul - Smoky Lake county region. Should the business move from the area during the course of the loan, the loan would become due and payable in full on the date of relocation.

1. The Applicant(s) declares that:

- (a) Neither she/he nor any partner(s), shareholder(s) or officer(s) is the father, mother, stepmother, stepfather, foster parent, brother, sister, stepbrother, stepsister, spouse, common-law spouse, child, child of a common-law spouse, stepchild, ward, father-in-law, mother-in-law, nor in any way, related to an employer or a member of the Board of Directors of Community Futures St. Paul - Smoky Lake Region.
- (b) There is no litigation in course or threatened, not any proceedings before any court, tribunal, government board or agency now in course or threatened, and that there is no unexecuted judgment rendered against the Applicant(s), except:  
  
\_\_\_\_\_  
  
\_\_\_\_\_

2. The Applicant(s) understands/agrees that:

- (a) The terms and conditions of any financing which may be authorized will be set forth in a letter of offer, for agreement and acceptance by the Applicant(s).
- (b) The interest on any financing authorized will be no less than the prevailing rate of conventional commercial lenders.
- (c) Community Futures St. Paul - Smoky Lake Region shall have the right to make any enquires of such persons, firms or corporations as it deems necessary until all amount owed by the Applicant(s) are fully paid.

3. The Statements made herein are for the express purpose of obtaining financing from Community Futures St. Paul - Smoky Lake Region and are to the best of my/our knowledge and belief true and correct. The Applicant(s) understands that additional information, if required in support of this application, must be supplied to Community Futures St. Paul - Smoky Lake Region before consideration can be given to this application.

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

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

---

**INFORMATION COLLECTION NOTICE AND AUTHORIZATION:**

When you first become a client of Community Futures St. Paul - Smoky Lake Region or when you apply to become a client, we will collect the information requested in this loan application and use it to:

- Confirm your identity
- Check your credit history
- Open an account with our office
- Provide ongoing services
- Enforce on our security, if necessary

We may disclose your personal information:

- To a person who we are satisfied is requesting information on your behalf
- To other business units in Community Futures to help serve you better
- To our Legal Counsel
- To a credit reporting agency
- When permitted or required by law
- To a public authority if, in our reasonable judgment, there appears to be an imminent danger which could be avoided by disclosing the information.

The gathering and disclosing of all information shall be governed by the provisions of the *Freedom of Information and Protection of Privacy Act*.

**I hereby authorize** Banks, Credit Agencies, and all Credit Bureaus to disclose all information concerning our affairs to Community Futures St Paul – Smoky Lake Region and Community Futures St. Paul – Smoky Lake Region is likewise authorized to divulge information concerning our private affairs in response to normal credit inquiries from trade and other creditors. Community Futures St. Paul – Smoky Lake Region is authorized to release any or all information concerning this loan to any party or parties they deem fit, which may include a general news release to the public or otherwise.

All the information provided to Community Futures St. Paul – Smoky Lake Region in this Loan Application is true and current. I agree to and acknowledge all of the above terms. I have also read the above Information Collection Notice and give me consent for Community Futures to collect and disclose my personal information in the matter stated above.

\_\_\_\_\_  
Print Name – Applicant 1

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name – Applicant 2

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

At times Community Futures St. Paul – Smoky Lake Region will promote businesses in marketing and educational efforts. If you do not consent to Community Futures St. Paul – Smoky Lake Region referring your business in these efforts, please check the box below.

I do not permit Community Futures St. Paul – Smoky Lake Region to use my client information in marketing efforts and promotion material.