



U.S. Department of Transportation
Office of Small and Disadvantaged Business Utilization
Short Term Loan Program

OMB Approval Number: 2105-0555
Expiration Date: 10/28/2008
Form DOT 2301-1

APPLICATION FOR LOAN GUARANTEE

1. Full Legal Name of DBE Company:			2. DBE Primary Contact Name:		3. TIN (Federal Tax ID No.):	
4. Legal Structure of Applicant: a. <input type="checkbox"/> Sole Proprietorship b. <input type="checkbox"/> LLC c. <input type="checkbox"/> LLP d. <input type="checkbox"/> General Partnership e. <input type="checkbox"/> Corp. f. <input type="checkbox"/> S. Corp g. <input type="checkbox"/> Other				5. Participating Lender Name:		
				6. Applicant 's Email Address:		
7. Full Street Address of Primary Business Location:				14. a. D&B#: _____ b. NAICS Code: _____		
8. City:	9. State:	10. Zip:	11. DBE Contact telephone:		15. Number of Employees: (Including subsidiaries and affiliates) 15a. At Time of Application: _____ 15b. If STLP Loan is Approved: _____	
12. County:		13. Fax Number:		15c. Subsidiaries or Affiliates: (Separate for above) _____ 15d. Total: _____		
16. Bank of Business Account:			17. Bank Officer's telephone:		18. Bank Officer's fax:	
19. DBE's Bank Officer's Name:				20. Bank Officer's E-Mail Address:		
21. DBE's Business Account Bank Address:				22. Date DBE Business Established:		

PART A – ACCOUNTS RECEIVABLE - LINE OF CREDIT USE

22. ACCOUNTS RECEIVABLE

Note: For the purposes of this application, Accounts Receivable are monies which are owed to a company by a customer for products and/or services provided on credit through an executed transportation-related contract(s) and are treated as a Current Asset on the Balance Sheet. An Accounts Receivable Aging Report is a periodic report showing all outstanding receivable balances, broken down by customer account and month(s) due.

a. How do you plan to use this Line of Credit: (Enter gross dollar amounts rounded to the nearest hundreds)	Accounts Receivable Line Request: (Transportation only)
b. For Highway Project: Contract #	\$
c. For Transit Project: Contract #	\$
d. For Airport Project: Contract#	\$
e. For Other Transportation-related contracts: Agency & Contract #	\$
f. Accounts Receivable	\$
g. Payroll (including Accounts Payable)	\$
h. Inventory/Materials Purchase	\$
i. Other	\$
Total <u>LINE OF CREDIT</u> Requested:	\$

PAPERWORK REDUCTION ACT PUBLIC BURDEN STATEMENT

A Federal agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a current valid OMB control number. The OMB Control No. for this information collection is 2105-0555. The information requested on this form is being collected and disseminated by the U.S. Department of Transportation, Office of the Secretary as a courtesy to the public. Public burden reporting for this collection of information is estimated to be 60 minutes per response, including time for reviewing instructions, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to: OSDBU, Rm 9414 S-40, 400 7th Street, SW, Washington, DC, 20590.

PART B - LIST ALL COLLATERAL

USE ADDITIONAL PAGES, IF NECESSARY, AND LABEL AS EXHIBITS
ALL EXHIBITS MUST BE SIGNED AND DATED BY PERSON SIGNING THIS FORM

SECTION I – TRANSPORTATION CONTRACTS TO BE ASSIGNED AS COLLATERAL:

23. IDENTIFY THE COLLATERAL AND ITS VALUE

The Transportation related contract(s) supporting the line of credit application will be the first source of collateral and repayment: Describe the Transportation-related contract by contract number and amount (Discount any retainage held by agency or prime).

Contract #	Agency/Prime/Subcontractor	Contract Amount	Start Date	Estimated Completion Date
A		\$		
B		\$		
C		\$		
D		\$		
E		\$		

SECTION II DESCRIPTION ACCOUNTS RECEIVABLES

24. LIST ACCOUNTS RECEIVABLE

Accounts Receivable: (Identify by contract #)	Amount:	Accounts Receivable aging: (i.e., 30 days)
A	\$	
B	\$	
C	\$	
D	\$	
Total	\$	

SECTION III DESCRIPTION(S) – INVENTORY OR MACHINERY/EQUIPMENT (see question 23b & 23c)

25. DESCRIPTIONS OF INVENTORY (if applicable)

List Type of Inventory	Lien Holder (if any)	Amount of Lien	Value of Property
A		\$	\$
B		\$	\$
C		\$	\$
D		\$	\$

SECTION V – OTHER BUSINESS PROPERTY

26. LIST BUSINESS PROPERTY

Description – Show Manufacturer, Model, Serial No.	Year Acquired	Original Cost	Market Value	Current Lien Balance	Name of Lien Holder
A		\$	\$	\$	
B		\$	\$	\$	
C		\$	\$	\$	
D		\$	\$	\$	
E		\$	\$	\$	
Total		\$	\$	\$	

SECTION IV – REAL ESTATE

27. LIST OF PARCELS OF REAL ESTATE (if applicable)

Attach a copy of the deed(s) containing a full legal description of the land and show the location (street address) and city where the deed(s) is recorded. Following the address below, give a brief description of the improvements, such as size, type of construction, use, number of stories, and present condition (use additional sheet if more space is required).

	Address	Year Acquired	Original Cost	Market Value	Amount of Lien	Name of Lien Holder
A			\$	\$	\$	
B			\$	\$	\$	
C			\$	\$	\$	
D			\$	\$	\$	

PART C – INDEBTEDNESS (Business)

28. LIST OUTSTANDING DEBT

Outstanding Debt Item (Type of Credit)	Original Amount	To Whom Payable	Repayment Terms	Balance Due	Current or Past Due
1	\$			\$	
2	\$			\$	
3	\$			\$	
4	\$			\$	
5	\$			\$	
6	\$			\$	
7	\$			\$	
8	\$			\$	
9	\$			\$	
10	\$			\$	
Grand Total	\$			\$	\$

GOVERNMENT INDEBTEDNESS: Describe any debt owed to any governmental authority, including Federal, State, or local taxes, FICA, etc.

Outstanding Debt Item	Original Amount	Agency	Settlement/Workout Plan - Date Approved	Balance Due	Current or Past Due
1	\$			\$	
2	\$			\$	
3	\$			\$	

PART D – MANAGEMENT/OWNERSHIP INTEREST

29. MANAGEMENT: (To be completed by Proprietors, partners, members, officers and/or directors, and all holders having 20% or greater interest of outstanding ownership – 100% of ownership must be shown). Use separate sheet if necessary.

Name and Social Security Number and Position Title	Complete Address	% Owned	Annual Compensation Amount	Sex
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The ethnic/racial data are collected for statistical purpose only. It has no bearing on the credit decision to approve or decline this STLP Loan Guarantee application. One or more boxes may be selected.

A				
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Race: a1. American Indian/Alaska Native a2. Black/African–Amer. a3. Asian a4. Native Hawaiian/Pacific Islander
a5. White WOB a6. Hispanic/Latino a7. Not Known

B				
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Race: b1. American Indian/Alaska Native b2. Black/African–Amer. b3. Asian b4. Native Hawaiian/Pacific Islander
b5. White WOB b6. Hispanic/Latino b7. Not Known

C				
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Race: c1. American Indian/Alaska Native c2. Black/African–Amer. c3. Asian c4. Native Hawaiian/Pacific Islander
c5. White WOB c6. Hispanic/Latino c7. Not Known

D				
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Race: d1. American Indian/Alaska Native d2. Black/African–Amer. d3. Asian d4. Native Hawaiian/Pacific Islander
d5. White WOB d6. Hispanic/Latino d7. Not Known

30. AFFILIATION

- a. Are there any affiliated businesses? (Businesses that share common ownership with the applicant)
If yes, please provide the business name(s) and current financial statements (dated within 90 days of application):
 Yes No
- b. Are you now (or have you ever been) subjected to any claim for additional taxes? If yes, please explain:
 Yes No
- c. Are any federal, state or local taxes now past due? (If so, DOT cannot accept this application until paid in full and proof is provided, See DOT form on Personal History Statement).
 Yes No
- d. Are any liabilities other than taxes now past due? If yes, explain: (If so, DOT cannot accept this application until paid in full and proof is provided, See DOT form on Personal History Statement).
 Yes No
- e. Are there currently any bankruptcy, insolvency proceedings, or pending lawsuits? (If so, DOT cannot accept this application until paid in full and proof is provided, see DOT form on Personal History Statement).
 Yes No

31. CONTINGENT LIABILITIES: (Identify and provide documents)

a. As Guarantor, Endorser, or Co-Maker:
Org. Amount \$ _____ Bal. Amount: \$ _____ As of Date: _____

b. Other Contingent Debts: (contracts, leases, etc.):
Org. Amount \$ _____ Bal. Amount: \$ _____ As of Date: _____

PART E – DBE INFORMATION

The definition of a Disadvantaged Business Enterprise (DBE), which includes women-owned businesses and minority owned businesses, are set forth in 49 Code of Federal Regulations Parts 23.

The applicant, _____ certifies that it is a Disadvantaged Business Enterprise and that the contract or contracts to be financed are transportation-related contracts. **The applicant understands that this is a Revolving Line of Credit loan guaranty application for Accounts Receivable financing.** For the purposes of this application, an accounts receivable is money which is owed to a company for products and services provided on credit by means of a written contract or purchase order **for eligible transportation-related contracts only** and is treated as a current asset on a balance sheet.

2. BASIS FOR DBE STATUS: (Check as appropriate)

- a. Female b. Asian c. Black d. Hispanic e. Indian/Alaskan f. Other:

Name of Agency which Certified your Business as a DBE: _____

State: _____ **Certification Expiration/Renewal Date:** _____

33. OTHER FEDERAL GOVERNMENT CERTIFICATION:

a. Section 8(a)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
b. Small Disadvantaged Business (SDB)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
c. HUBZone	<input type="checkbox"/> YES	<input type="checkbox"/> NO
d. Disabled Service Veteran (DSV)	<input type="checkbox"/> YES	<input type="checkbox"/> NO

PART F – CERTIFICATION AND SIGNATURE OF APPLICANT

34. CERTIFICATION

In submitting the foregoing application, the undersigned guarantees its accuracy with the intent that it be relied upon by the STLP Bank and the U.S. Department of Transportation in extending credit to undersigned and warrants that the undersigned has not, knowingly, withheld any information that may affect its credit risk, and the undersigned expressly agrees to immediately notify said bank and the U.S. Department of Transportation, in writing, of any material change in its financial condition.

Signature of Preparer: (If other than applicant): _____ Type Name of Preparer: _____

Address of Preparer: _____

If applicant is a proprietorship or partnership, sign below:

Name: _____ Title: _____ Date: _____

If applicant is a corporation or limited liability company, sign below (Include copy of resolution authorizing you to act on its behalf with regard to this STLP Loan Guarantee application)

Name: _____ Title: _____ Date: _____ (Corporate Seal)

Note: You must attach a copy of resolution of the Board of Directors authorizing you to submit this loan guaranty application.

35. LIST THE APPLICANT’S ATTORNEY, ACCOUNTANT AND INSURANCE COMPANY NAME AND AGENT

a. ATTORNEY’S NAME:	TEL:	E-MAIL:
b. ACCOUNTANT’S NAME:	TEL:	E-MAIL:
c. INSURANCE COMPANY NAME:	TEL:	E-MAIL:
d. INSURANCE AGENT’S NAME:	TEL:	E-MAIL:
e. BOND AGENT	TEL:	E-MAIL:

36. TECHNICAL ASSISTANCE

List the name(s) and occupation of anyone who assisted in the preparation of this form, other than the applicant. You may secure free assistance in the preparation of this loan application from any DOT Minority Resource Center. For the Center nearest you call toll free: 1-800-532-1169.

Name and Occupation:	Address:	Total Fees Paid:	Fees Due:
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THE FOLLOWING APPLICATION EXHIBITS MUST BE COMPLETED WHERE APPLICABLE. ALL QUESTIONS AND ANSWERS ARE MADE A PART OF THE APPLICATION.

You must provide an original and one copy (Photocopy is Acceptable) of this Application Form, and all Exhibits to the participating Lender. You must also:

- a. Submit DOT Form, Statement of Personal History and a Personal Financial Statement, for each individual that the DOT Form(s) requires for those who have an ownership interest in the businesses of 20 percent or more.
- b. If your collateral consists of (A) Land and Building, (B) Machinery and Equipment, (C) Furniture and Fixtures, (D) Accounts Receivable, (E) Inventory, (F) Other, please provide an itemized list (label Exhibit A) that contains serial and identification numbers for all articles that had an original value of greater than \$5000. Include a legal description of real estate offered as collateral.
- c. Furnish a signed current personal balance sheet (the DOT Form may be used for this purpose) for each stockholder (with 20 percent or greater ownership), partner, officer, and owner to include each proposed guarantor. Include the assets and liabilities of the spouse and any close relatives living in the household. Also, include your Social Security number. Include three years of personal income tax returns, signed and dated. (Note: applicants shall complete IRS form 4506 and IRS form 4506 T as a condition of the loan approval. The date should be the same as the most recent business financial statement. Label it Exhibit B.
- d. Include the financial statements listed below: 1, 2, and 3 (for the last three years). For items 4-9 (as of the date of application). Financial statements must be current within 90 days of filing the application. Label it as Exhibit C. Contact DOT for referral if assistance with preparation is needed. **Note:** You must include three years of the business financial statements and three years of business tax returns. All information must be signed and dated.
 1. Balance Sheet
 2. Profit and Loss Statement (if not available, explain why and substitute Federal income tax forms).
 3. Reconciliation of Net-Worth
 4. Aging of Accounts Receivable and Payable (summary not detailed).
 5. Detailed cash flow projections covering the term of the line of credit. The projections must be prepared on a monthly basis and to include all assumptions and supporting information.
 6. Applicant's current statement of work in progress
 7. List of completed contracts over the past twelve (12) months
 8. A copy of each transportation-related contract or subcontract for which the requested line of credit is intended.
 9. Current aging of accounts payable
 10. Detailed list of plant, property equipment and related loans secured by such assets
 11. Detailed list on any other collateral offered to secure this line of credit
- e. **Note:** Business financial statements should be prepared by an independent CPA firm and include the accountant's cover letter, balance sheet, operating statement and any additional statements and schedules and any accompanying notes. If the latest financial statements are more than 90 days old, interim financial statements are to be furnished and may be prepared by management. DOT reserves the right to make as a condition of the loan, submission of an updated, reviewed financial statement within 90 days of closing on any line of credit exceeding \$150,000.00. (Label it Exhibit D)
- f. A copy of the Certification as a Disadvantaged Business Enterprise or a copy of the U.S. Small Business Administration certification as a Small Disadvantaged Business.
- g. Provide a brief description similar to a resume of the education, technical and business background for all the people listed under Management.
- h. Submit the names, addresses, Tax I.D. numbers (EIN or SSN), and current personal balance sheet(s) of any co-signers and/or guarantors for the loan who are not otherwise affiliated with the business as Exhibit F.
- i. Do you or your spouse or any member of your household, or anyone who owns, manages or directs your business or their spouses or members of their households work for the U.S. Department of Transportation, or any of its recipients (State Transportation, Airport, Transit agency or any Federal Agency, or the STLP lender)? If so, please provide the name and address of the person and the office where employed.
Check here: Yes No
- j. Does your business, its owners, or majority stockholders own or have a controlling interest in other businesses? Check here: Yes No
If yes, please provide the names and the relationship with your company, along with a current balance sheet and operating statement for each.
- k. If your business is a franchise, include a copy of the franchise agreement and a copy of the FTC disclosure statement supplied to you by the Franchisor.
- l. If your business is a corporation, partnership, or sole proprietorship, include certificate of incorporation, articles of incorporation, partnership agreement, or other evidence of formation and registration of the business entity to include a current certificate of good standing.
- m. Brief history of the company and resumes of all operating officers.
- n. Letters of reference/performance/track record (**Note: The letter may be a track record from the Borrower's bank, suppliers and/or performance from prior contracts or source of your transportation-related contract i.e. agency or prime contractor.**)

FOR CONSTRUCTION CONTRACTS- APPLICANT MUST PROVIDE PROOF OF PAYMENT AND PERFORMANCE BONDS AS REQUIRED
- o. Copy of payment and performance bond for each transportation-related contract.
- p. Check your application for completeness.

AGREEMENTS AND CERTIFICATIONS

I authorize the DOT to have its agent, the participating STLP bank or Surety Company, to conduct such credit and personal history report and information checks about me as may be needed in order for the DOT to carryout its fiduciary responsibilities and such other due diligence as may be necessary for the purpose of determining my eligibility for the programs authorized by the DOT and its Minority Resource Center under 49 U.S.C. 332.

CAUTION: Knowingly making a false statement on this form is a violation of Federal Law and could result in criminal prosecution, significant civil penalties, and a denial or your DOT loan guarantee or surety bond guarantee, as well as other DOT program participation. A false statement is punishable under 18 USC§ 1001 by imprisonment of not more than five years and/or a fine or not more than \$10,000.

CERTIFICATION: Agreements of non-employment of DOT personnel: I agree that if DOT approves this loan application I will not, for at least two years, hire as an employee or consultant, anyone that was employed by DOT during the one year period prior to the disbursement of the loan.

I certify:

(a) I have not paid anyone connected with the Federal Government for help in getting this loan. I also agree to report to the DOT Office of the Inspector General, Washington, DC 20590 any Federal Government employee who offers, in return for any type of compensation, to help get this loan approved.

(b) All information in this application and the exhibits are true and complete to the best of my knowledge and are submitted to DOT for credit underwriting, whereby DOT guarantees the loan up to 75%. I agree to pay for or reimburse the bank for the cost of any surveys, title or mortgage examinations, appraisals, credit reports, etc., performed by bank personnel.

(c) The prospective borrower certifies, by submission of this application, that neither it nor its principals are presently debarred, suspended, proposed for disbarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.

By: _____

APPLICANT'S CERTIFICATION

By my signature, I certify that I have read and received a copy of the "STATEMENTS REQUIRED BY LAW AND EXECUTIVE ORDER," which was attached to this application. My signature represents an agreement to comply with the approval of this loan request and to comply, whenever applicable.

Each proprietor, each General Partner, each Limited Partner or Stockholder owning 20 percent or more, each Guarantor and the spouse of each Guarantor must sign. Each person should sign only once.

Business Name: _____

By: _____
Signature and Title

38. GUARANTORS:

Signature and Title

Date

Signature and Title

Date

Signature and Title

Date