

City of Sargent

106 North 2nd Street
P.O. Box 40
Sargent, NE 68874-0040
Phone (308) 527-4200
Fax (308) 527-3745

Economic Development Reuse Funds

1. Completed credit application
2. Completed business plan covering things like:
 - a. Management
 - i. Who are the employees and what are their backgrounds?
 - b. Marketing
 - i. Define your trade area
 - ii. Identify customers and competitors.
 - iii. Identify new products/services and the demand for these products/services.
 - c. Customer Relations
 - i. How will you start and / or increase your customer base?
 - d. Financial Data
 - i. Copies of your balance sheets, income statements, and cash flow statements and income tax returns for the last one – three years.
 - e. Advertising/Promotion
 - i. How do you plan on advertising?
 - f. Goal Setting
 - i. What are your short-term business goals?
 - ii. What are your long-term business goals?

CREDIT APPLICATION

Date _____ Amount Requested _____

Brief Description of Project: _____

Type of Business: Sole Proprietor _____ Partnership _____ L.L.C. _____ Corporation _____
(Please include copy of partnership agreement or articles of incorporation.)

FULL NAME OF APPLICANT _____ S.S. # OR Federal I.D. # _____
MAILING ADDRESS _____ STREET ADDRESS _____
CITY _____ STATE _____ ZIP _____ PHONE _____

(Provide above information for all Partners or Corporate Officers.)

BUSINESS INFORMATION

Name of Business: _____
Years in Business: _____
Mailing Address: _____

OUTSTANDING DEBTS:

Name and Address of Creditor	Security	Original Amount	Balance	Monthly Prmts
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Total Balance Owed \$ _____

CREDIT REFERENCES (Banks, Finance Companies, Stores, etc.)

Name and Address	Phone Number	Years Associated
_____	_____	_____
_____	_____	_____
_____	_____	_____

The applicant certifies that all the above statements are true and correct and are given for the purpose of obtaining the credit. The City of Sargent is authorized to verify the statements contained herein and all information contained on this application will be held in confidence.

Signature _____ Title _____ Date _____
Signature _____ Title _____ Date _____
Signature _____ Title _____ Date _____