

LOAN APPLICATION

Business Name _____

President/Owner Name _____

Person Completing Form (if different from above) _____

Email Address _____

Office Phone Number _____ Mobile Phone Number _____

Business Address _____

Type of Business _____ Business Incorporation Year _____

Annual Revenues (most recent year) _____ Net Earnings (most recent year) _____

Senior Lender _____ Legal Counsel _____

External Accountant/Tax Preparer _____

Loan Amount Requested _____

Please submit your completed application via email to Keith Chulumovich at kc@growmichiganfund.com.

Upon receipt a member of the Grow Michigan team will contact you to discuss your application. At that time, we may request additional documentation including:

- Previous three years of financial statements (audited, reviewed, or compiled)
- Previous three years of internal monthly financials, balance sheet and income statement
- Previous three years of Company tax returns
- Current Budget/Forecast
- A list of existing debt and significant leases, balances, terms, monthly debt service
- Company background information and/or marketing material
- Ownership or stockholders
- Details regarding the amount of financing needed, use of funds, etc.
- Collateral

How did you hear about us? Bank Attorney Accountant Other _____

This program is intended for Michigan-based businesses that have demonstrated operational success and are poised for growth but require additional capital to achieve their goals. Grow Michigan seeks companies with experienced management teams, positive financial performance, a clear use of funds, and a commitment to expanding their business, creating jobs, or pursuing strategic opportunities that strengthen Michigan's economy.