Application For Small Business Development Loan Program

City of La Crosse 400 La Crosse Street La Crosse, WI 54601-3396 (608) 789-7512 Fax: (608) 789-7318

Project Information					
Name: Evergreen Child Care		Tax ID Number:			
Address: 1229 16th Street South					
Contact Person: Katelyn G Pendleton	Telephone Number:				
Owner Information					
Name: Katelyn G. Pendleton	Social Security Number:				
Home Address: 1229 16th Street South, La C	Crosse, W	I, 54601			
Co-owner Information (if applicable)					
Name:	Social Security Number:				
Home Address:					
Business/Developer Information					
Name: Evergreen Learning Center LLC					
Address: 1229 16th Street South, La Crosse, WI 54601					
Project Description	Procedus de Belger de Bêrdîlê Girê în dese Procedus Lê Dêrk De Lê dese în de Arbeit de Sêr				
Provide a brief description of the project:					
Evergreen Child Care is the only center in the area serving organic food, offering a cloth diaper service, and					
providing holistic, family-based care. In our current location, we are unable to accomidate the large number					
of clients that want to enroll with us. Our need to expand is very clear, and also provides an opportunity to					
fill a present need in the La Crosse community. There are currently no child care centers operating in the downtown					
La Crosse area, and our proposed location of 712 Main Street is an ideal location. To make this project happen,					
Evergreen Child Care plans to lease the building at 712 Main Street, with the intent to purchase at a later date,					
update the building to suit our needs as a child care	e center, and	purchase materials to become operational.			

Project Information

Is this a new business/project? The business is existing, the project will be a relocation/ expansion.

Is a minority owned/operated business(es) involved in this project? Yes

If yes, please explain.

100% Woman owned business

Which architectural firm will provide the architectural analysis? SGI

Which architectural firm will provide the working plans? SGI

Will persons/businesses be displaced as a result of this project? No

Have you requested money from public lenders for this project? Yes

Project Analysis and Justification

The following items will be needed for project analysis and justification:

- Detailed project plan, including architectural analysis and competitive bids
- Business plan (long-term goals)
- Timetable
- List of the principal players and their relationships to the business operation
- Articles of Incorporation
- Balance sheet (current) (on Microsoft Excel disk if possible)
- Operating (profit/loss) statements for last three years (with percentage breakdown) (on Microsoft Excel disk if possible)
- Five-year projected cash flow statement (with percentage breakdown) (on Microsoft Excel disk if possible)
- Previous years' Federal Income Tax Returns (personal and business)
- Personal financial statements of officers
- Copies of correspondence from two lending institutions regarding availability of funds
- List of current employees and their job titles
- List of titles and descriptions of projected jobs
- Cover letter which requests specific loan terms and conditions

Balance sheets, operating statements, and projected cash flow statements should also be submitted electronically in table form to decrease application processing time.

Employment/Job Creation One permanent full-time, low/moderate income job must be created for each \$35,000 of public investment. At least 51% of all jobs which are created as a result of special economic development activity must be filled by members of low/moderate income families. Current Projected Full-time Part-time Full-time Part-time 8 Employees All new employees must be income certified. An income certification form is attached to the back of this application. Provide the list of job titles for jobs to be created. \$ 45,000 Amount desired from Small Business Development Loan Program _{\$} 60,000 Amount desired from lending institution 10,000 Owner/developer cash contribution Other sources (attach explanation) TOTAL PROJECT COST \$ 115,000 SOURCES OF FUNDS Uses of Funds Bank City Equity Other **Total** 10,000 10,000 Acquisition Real Estate 45,000 45000 Acquisition Equipment 35,000 35,000 Rehabilitation 15,000 15000 Soft Costs (taxes, legal, interest, architectural)

45,000

TOTAL

10,000

50,000

115000

APPLICATION CERTIFICATION

I hereby certify that all information provided on and accompanying this application is complete and accurate. I also

03/04/2016	Kately Frontier
Date	Applicant's Signature
	Evergreen Child Care
•	Name
	Katelyn G. Pendleton
	Title
	Owner/ Director
	Company

EXHIBIT B INCOME ELIGIBILITY CERTIFICATION

When federal financial assistance is provided for special economic development activities, jobs for low and/or moderate income families must be created and demographic information must be collected. The following chart provides the range of annual gross household income limits which define very low, low and moderate income households.

Please compare your annual gross household income before being hired by the project business with the figures on the chart and complete the form.

		Income Limits					
Numb	er of Residents	(As of 2012)					
_		*					
1	\$0 to \$14,350	\$14,351 to \$23,950	\$23,951 to \$38,300	Greater than \$38,300			
2	\$0 to \$16,400	\$16,401 to \$27,400	\$27,401 to \$43,800	Greater than \$43,800			
3	\$0 to \$18,450	\$18,451 to \$30,800	\$30,801 to \$49,250	Greater than \$49,250			
4	\$0 to \$20,500	\$20,501 to \$34,200	\$34,201 to \$54,700	Greater than \$54,700			
5	\$0 to \$22,150	\$21,601 to \$36,950	\$36,951 to \$59,100	Greater than \$59,100			
6	\$0 to \$23,800	\$23,801 to \$39,700	\$39,701 to \$63,500	Greater than \$63,500			
7	\$0 to \$25,450	\$25,451 to \$42,450	\$42,451 to \$67,850	Greater than \$67,850			
8	\$0 to \$27,100	\$27,101 to \$45,150	\$45,151 to \$72,250	Greater than \$72,250			
03/04/2016							
	As of $03/04/2016$, there are 2 members in my household and						
(Date of Employment) (Number)							
the annual gross household income is at the corresponding income limit above (circle one).							
V							
Please check here X if your household has a female head of household.							

Report your ethnicity (non-Hispanic or Hispanic) and race (1 of 10).

				Dem	ographic In	ormation	1			
Race →	White	Black/	Asian	American	Native Hawaiian/	Am. Ind. &	Asian &	Black/	American In, &	Other
Race		African		Indian	Other Pacific	White	White	African Am. &	Black/ African	Multi-
Ethnicity 4		American			Islander			White	American	Racial
Neu-Hispanic	1									
Hispanie										
								1	. ,	

Katelyn G Pendleton	Signature of Employee		
Name of Employee (please print)			
Owner/ Director	Evergreen Child Care		
Employee Job Title	Name of Employer		
Circle: Full-time Part-time			
03/04/2016			
Date	Social Security Number		
	Name of Employee (please print) Owner/ Director Employee Job Title Circle: Full-time Part-time 03/04/2016		

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