

ECONOMIC DEVELOPMENT DEPARTMENT

100 S. Monroe, Eagle Pass, Texas 78852 • Phone: (830)773-1111

Revolving Loan Fund Application

Revised Date: August 9, 2022

\$20 application fee*

Closing fees are \$250 and will be added to the final approved loan amount

NO INCOMPLETE APPLICATIONS WILL BE ACCEPTED. ALL REQUIRED DOCUMENTATION MUST BE

TURNED IN WITHIN 30 DAYS OF REQUEST FOR ADDITIONAL DOCUMENTATION. Failure to submit all

required docur	nents ı	will aut	omatically di	isqualify your appli	cation.					
Business Nan	ne			ederal Tax ID#/ IN						
Ammliaam4 Na				mail:						
Applicant Na	ıme									
Telephone#		G!		ate Established						
		City	of Eagle Pass	License #						
Mailing Address					Structure	Sol	9			
C						Pro	prietorship			
							nership			
							ited Liability			
						Cor	•			
							orporation			
							orporation			
		Indus	stry			<u> </u>	•			
			•							
			Construction Retail Finance, Insurance Services							
		Food/	Food/Beverage Tourism/Lodging Manufacturing Transportation Real Estate Other:							
]	Real Estate	Other:	<i></i>	U	1			
			_			_				
Ownership	SSN		Gender	Race/Ethnicity	Telephone	Address	%			
Name					_		Owned			
_										
Project Des	criptio	on (atta	ached separ	ate sheets if nece	essary)					



**PLEASE ATTACH CURRENT FISCAL YEAR BUDGET AND PREVIOUS YEAR'S FINANCIAL STATEMENTS (if applicable) **

Project Expenses

Expenses		Sources o Financing				
Source	Total Cost	Bank	RLF	Borrower	Other	
Fire Suppression						
Working Capital Construction						
Expansion/Repairs						
Equipment						
Inventory						
Land Acquisition						
Accounts Payable						
Loan Fees						
Other						
TOTAL						

Liabilities

Source	Loan Amount	Loan Date	Current Balance	Interest Rate	Maturity Date	Monthly Payment	Security
TOTAL							

Credit

Lender	Name	Telephone	# Of Years Associated
Bank			
Bank			
Credit Card			



PERSONAL FINANCIAL STATEMENT							
and each general partner,	or (3) each stockholder	each limited partner who ov owning 20% or more of voting rsons or entity providing a gu	ng stock and each				
Name Business Phone ()							
Residence Address Residence Phone ()							
City, State, & Zip Code							
E-Mail Address							
Business Name of Applie	cant/Borrower						
As	sets	Liab	ilities				
Cash on hand & in Banks	\$	Accounts Payable	\$				
Savings Accounts	\$	Notes Payable to Banks & Others	\$				
IRA or Other Retirement Account	\$	Installment Account (Auto) Monthly Payment	\$				
Accounts & Notes Receivable	\$	\$					
Life Insurance – Cash Surrender Value Only	\$	Installment Account (Other) Monthly Payment	\$				
Stocks & Bonds	\$	\$ Loan on Life Insurance	\$				
Real Estate	\$	Mortgages on Real Estate	\$				
Automobile – Present Value	\$	Unpaid Taxes	\$				
Other Personal Property	\$	Other Liabilities	\$				
Other Assets	\$	TOTAL LIABILITIES	\$				
TOTAL ASSETS	\$	NET WORTH (Total Assets – Total Liabilities)	\$				
10 THE HODE IO		TOTAL LIABILITIES- NETWORTH	\$				



Section 1. Source of Incom-		Contingen	t Liabilitie	es		
Salary Net Investment Real Estate Income Other Income (Describe Below)	\$\$ \$\$		As Endorser Co-Maker Legal Claims Judgments Provision for Federal Incor Tax Other Specia Debt	\$ \$ s	\$ \$ \$ \$	
Description of Other Incom	ne in Section	1.				
Alimony of child support paymsuch payments counted toward Sect. 2 Personal Amounts (total income.					
attachment must be identified a Name and Address of Noteholder(s) and/or Name of Credit Card Company	s a part of this Original Bal.	Current Bal.	Pmt. Amount	Frequency	How Secured or Endorsed Type of Collateral	

Section 3. Stocks and Bonds. (Use attachments if necessary. Each attachment must be identified as part of this statement & signed).						
Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value	



Section 4. Real Estate Owned. (Use attachments necessary. Each attachment must be identified as part of this statement and signed).								
ting statement ar	ia signea).	Prop	erty A		Property B		Property	C
Type of Proper	rty							
Name of Title	Holder							
Address								
Date Purchase	d							
Original Cost								
Present Marke	t Value							
Name & Addro Mortgage Holo								
Mortgage Acco	ount							
Mortgage Bala	ince							
Amount of Pay Month/Year	ment per							
Section 5. Other Personal Property & Other Assets (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and if delinquent, describe delinquency)								
Section 6. Unpaid Taxes. (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches). (In order to qualify for the City's Revolving loan fund (RLF, you must be caught up on all taxes due).								



Section 7. Other Liabilities.	Describe in detail)	
Section 8. Life Insurance Hel Insurance company and beneficiaries		urrender value of policies-name of
Lauthorize Lender to make inquiries	as necessary to verify the accurac	y of the statements made and to determine
my creditworthiness. I certify the about of the stated date(s). These statement	eve and the statements contained is are made for the purpose of eith result in forfeiture of benefits an	n the attachments are true and accurate as er obtaining a loan or guaranteeing a loan. d possible prosecution by the U.S. Attorney
Signature:	Date:	Social Security Number:
		N/A
		N/A
Section 9. References (Please phone number and address.)	fill out complete information f	For all 3 references, including full name,
First and Last Name:	Phone:	Address:
First and Last Name:	Phone:	Address:
First and Last Name:	Phone:	Address:



	I	
I (we) understand that the following questions are	re addressed to me (us),	and I (we) have answered them as
appropriate.		
Yes No		
1. Are you named as beneficiary of a tru	ust, will, or estate?	
2. Are any of the assets listed herein he	ld under a trust agreeme	ent of any type, held in an
estate, or any other name or capacity? Please det	ail in "Additional Rem	arks" below.
3. Are any of the assets listed herein on	deposit, located, or oth	erwise held outside the
United States of America?		
4. Do any of your assets secure any deb	ts that have not been re	ported on the following
schedules?		
5. Are any of the assets listed herein loc	cated in any other comn	nunity outside of Texas.
6. Are any of your real estate properties	used by you in your bu	usiness?
7. Have you ever filed for personal bank	kruptcy, had property y	ou owned foreclosed, or
made a settlement or an assignment for the bene	fit of creditors?	
8. Has any corporation or partnership in	which you are (were)	a major owner or a general
partner ever filed bankruptcy, had property it ow	ned foreclosed, or mad	e a settlement or
assignment for the benefit of creditors?		
9. Are you, or any corporation or partner	erships in which you are	e a major owner or general?
partner, a party to any suit or legal action, or are	there any unsatisfied ju	udgments against
you?		
10. Personal income tax returns have be	een filed through	(Enter Year). Are any

income tax returns, whether personal or that of any corporation or major partnership that



you are a major owner of or a general partner, currently being audited or contested?
11. Are you an officer, director, or principal shareholder of a financial institution?
12.
I (we) have explained fully under "Additional Remarks" on this page (or an attachment) my (our)
"Yes" answers to the foregoing questions.
Additional Remarks
I authorize the City Eagle Pass to make inquires as necessary to verify the accuracy of the statements
made and to determine my credit worthiness. I certify the above information and statements contained in the
attachments are true and accurate as of the stated date(s). These statements are made for the purpose of either
obtaining a loan or guaranteeing a loan.
Signed:
Date:
Signed: Date:



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There is a \$20 closing application