

# CAPITAL ACCESS PROGRAM – Loan Enrollment Form

ENROLMENT

## 1. Lender Information:

Name of Lender: \_\_\_\_\_

Lender's Address: \_\_\_\_\_

## 2. Loan Information:

Loan Date: \_\_\_\_\_ Loan Number: \_\_\_\_\_

Loan Amount: \$ \_\_\_\_\_ Loan Amount to be Guaranteed: \$ \_\_\_\_\_

Loan Description (Purpose, Terms, Maturity, Rate, and Collateral): \_\_\_\_\_

## 3. Reserve/Premium Information: (Combined Borrower and Lender Contribution, min 3% to max 7%)

Borrower Reserve: \$ \_\_\_\_\_ Lender Reserve: \$ \_\_\_\_\_

## 4. Borrower Information:

Name of Borrower: \_\_\_\_\_

Borrower's Address: \_\_\_\_\_

## 5. Business Information

Incorporation Date: \_\_\_\_\_ Years in Business: \_\_\_\_\_ Is this a Startup Business? (Y/N): \_\_\_\_\_

Census Tract: \_\_\_\_\_ NAICS Code: \_\_\_\_\_ Minority/Female Owned?: (Y/N): \_\_\_\_\_

Annual Revenues Last Fiscal Year: \_\_\_\_\_

Business Employment Numbers: Jobs Retained: \_\_\_\_\_ Jobs Created: \_\_\_\_\_ Fulltime Employees: \_\_\_\_\_

## 6. Existing Loans to Borrower NOT Previously Enrolled into Capital Access (Loan# and Amount):

1 \$ \_\_\_\_\_ 2 \$ \_\_\_\_\_

3 \$ \_\_\_\_\_ 4 \$ \_\_\_\_\_

## 7. Loans Previously Enrolled into Capital Access (Loan# and Amount):

1 \$ \_\_\_\_\_ 2 \$ \_\_\_\_\_

3 \$ \_\_\_\_\_ 4 \$ \_\_\_\_\_

## 8. Refinancing of Existing Capital Access Loans ONLY

a. 1. Loan#: \_\_\_\_\_

2. Original Guaranty Amount: \$ \_\_\_\_\_

3. Loan Balance Prior to Renewal: \$ \_\_\_\_\_

4. Amount of Loan Renewal: \$ \_\_\_\_\_

5. New Guaranty Amount: \$ \_\_\_\_\_

b. If (a.5.) is Greater than Line (a.2.), additional reserve funds are required for the difference in the Original Guaranty Amount and the New Guaranty Amount.

## 9. Authorization: Lender makes the representations and warranties specified in Section 2.2 of the Agreement.

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name and Title: \_\_\_\_\_

### FOR ADFA USE ONLY

% Borrower and Lender Reserve Contribution: \_\_\_\_\_

Check# \_\_\_\_\_ Date Verified: \_\_\_\_\_

Previous CAP Enrolled Loans Verified: 1 \$ \_\_\_\_\_ 2 \$ \_\_\_\_\_

3 \$ \_\_\_\_\_ 4 \$ \_\_\_\_\_

ADFA Reserve Contribution: \$ \_\_\_\_\_ ADFA Transfer Amount: \$ \_\_\_\_\_

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

Completed Document should be forwarded to: Lanita Wasson, ADFA Program Coordinator  
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