

Town of Richmond TIF Business Loan Program

Personal Financial Statement

as of _____

Who should complete this form: If the business is a 1) Sole proprietorship – the proprietor; 2) Partnership – each partner; 3) Corporation – each officer; Also, any other person or entity co-signing the loan.

Name: _____ Phone: _____

Address: _____ Business Name: _____

ASSETS (omit cents)		LIABILITIES (omit cents)	
Cash on hand and in banks		Accounts payable	
Savings accounts/IRA		Notes payable: banks & others (Describe in Section 2)	
Accounts & notes receivable (Describe in Section 6)		Installment account (auto): Monthly payment amount(s)	
Life insurance - Cash		Installment account (other): Monthly payment amount(s)	
Surrender value only		Loans on life insurance	
Stocks & bonds (Describe in Section 3)		Mortgages on real estate (Describe in Section 4)	
Real Estate (Describe in Section 4)		Unpaid taxes (Describe in Section 7)	
Automobile – present value		Other liabilities (Describe in Section 8)	
Other personal property (Describe in Section 5)		Total liabilities	
Other assets (Describe in Section 6)		Net worth	
TOTAL		TOTAL	

SECTION 1: INCOME & LIABILITIES

Sources of Income		Contingent Liabilities	
Salary		As Endorser or Co-Maker	
Net Investment Income		Legal Claims & Judgements	
Real Estate Income		Provision for Fed. Income Tax	
Other Income (Describe)		Other Special Debt	
Description of Items Listed in Section 1			

SECTION 2: NOTES PAYABLE TO BANKS AND OTHERS

Name & Address of Noteholder	Original Balance	Current Balance	Payment Amount	Terms (monthly, etc.)	How Secured or Endorsed – Type of Collateral

SECTION 3: STOCKS & BONDS (Use separate sheet if necessary)

Number of Shares	Cost	Names of Securities	Market Value Quotation/Exchange	Amount	Date

SECTION 4: REAL ESTATE OWNED (List each parcel separately. Use supplemental sheets if necessary & identified as a supplement to this statement and sign.)

Address/Type of Property	Title is in the name of	Date Purchased	Original Cost	Present Value	Mortgage Balance	Amount of Payment	Status of Mortgage

SECTION 5: OTHER PERSONAL PROPERTY (Describe, and if any is mortgaged, state name & address of mortgage holder, amount of mortgage, terms of payment, and if delinquent, describe delinquency.)

SECTION 6: OTHER ASSETS, NOTES AND ACCOUNTS RECEIVABLE (Describe.)

SECTION 7: UNPAID TAXES (Describe in detail as to type, to whom payable, when due, amount, and what, if any, property the tax lien attaches.)

SECTION 8: OTHER LIABILITIES (Describe in detail.)

SECTION 9: LIFE INSURANCE HELD (Give face amount of policies, name of company, and beneficiaries.)

The Town of Richmond or its servicing agent is authorized to make all inquiries deemed necessary to verify the accuracy of the statements made herein and to determine my/our credit-worthiness. I/We certify that the above and the statements contained in the schedules herein are a true and accurate statement of my/our financial condition as of the date stated herein.

Signature

Signature

Date

Social Security Number

Social Security Number