



LIBERTY BANK

Academy for Small Business

TELL US ABOUT YOURSELF

Name: _____
 Telephone: _____
 Address: _____
 City, State, Zip: _____
 Email: _____
 Employer: (if applicable) _____

TELL US ABOUT YOUR BUSINESS

Business Name: _____
 Business Address: _____
 Telephone: _____
 City, State, Zip: _____

Type of Business: Manufacturing Construction Service Technology Other

EIN: _____

Email: _____

Website: _____

Business Structure: Sole Proprietorship Partnership Corporation Other

Years in Business: _____

Certifications: DBE MBE WBE DVBE Other: Please specify
Please attach copy of certification(s)

Enterprise: DBE – Disabled Business Enterprise WBE – Woman Business Enterprise
 MBE – Minority Business Enterprise DVBE – Disabled Veteran Business Enterprise

Name of Owner <small>List all business owner/partners</small>	Title	Ownership Since (year)	Percent of Ownership*	US Citizen (Y/N)
			%	
			%	
			%	
			%	
			%	
TOTAL (100% of all ownership must be identified.)			%	

TERMS AND CONDITIONS.

I acknowledge that my registration for Liberty Bank’s Academy for Small Business (ASB) program is based on first come first served. I further acknowledge that I am registering to participate in the 10-week small business class instruction. If I elect to be considered for the \$5,000 business line of credit, I must consent to the “Terms and Conditions” and attest that the business and its owners meet the conditions outlined herein.

Please describe your Business and the planned use of line of credit proceeds:

GENERAL INFORMATION

Has the business incurred a fiscal year loss in any of the last three years?	<input type="checkbox"/> Yes*	<input type="checkbox"/> No
Has the business or any of its owners ever filed for bankruptcy protection within 5 years?		
Is there any actual or pending litigation or judgment(s) against the business or its owner within 6 months?		
Are there any delinquent taxes owed by the business or any principal owner?		
Is there any agreement in place that would result in a change of business ownership?		

I hereby commit to participate fully and attend all classes. I can submit an application to qualify for a small business credit line for \$5,000:

- Must have a minimum Trans Union FICO score of 600;
- Must be in good standing with all federal, state and local taxes;
- Must successfully attend and complete all 10 training classes;
- Must have or be eligible to open a Liberty Bank business checking account from which all interest and/or principal payments will be automatically debited;
- Eligibility for the line of credit is valid up to 30 days after completion of the final class;
- Neither the applicant nor any of its owners shall have been subject to criminal indictment, arraignment or other such criminal proceedings, including being arrested in the past six months and through the closing of the ASB loan; any criminal proceedings may result in denial of line of credit eligibility
- The business or any owner may not have filed for bankruptcy protection within the past 5 years and through the closing of the ASB loan; and
- Business owner must provide documented support for funding need;
- One Academy for Small Business line of credit per individual participant.
- All loans subject to credit and other underwriting approval.

I attest that the business and its owners have received the aforementioned conditions. I further attest that the use of proceeds for the line of credit will be for business purposes only.

Please let us know if you require any accommodations for a disability:

Participant’s signature: _____ Date: _____

Please mail to:
Community Development – communityoutreach@liberty-bank.com
Liberty Bank, 245 Long Hill Road, Middletown, CT 06457

The ASB course content and presentations do not necessarily reflect the opinions and views of Liberty Bank. Liberty Bank reserves the right to amend program guidelines without notice.