Business LoanPre-Application Form

(also available online: www.qvcdc.com)

Name:
Business Name:
Mailing Address:
Town:
Email Address:
Telephone:
Fax:
Nature of Business:
Form of Business:
☐ Sole Proprietor ☐ Partnership ☐ Corporation Number of years in business:
•
Amount of loan being sought: \$
How would this money be used?
Have you recently sought a business loan from a bank? ☐ yes ☐ no
If yes, list bank(s):
Result:
Your personal credit is: ☐ Excellent ☐ Good ☐ Fair ☐ Poor
Do you have a business plan? ☐ yes ☐ no
Can you provide financial statements for the past three years? ☐ yes ☐ no ☐ n/a ☐ don't know
Can you provide a cash flow projection for the next year? ☐ yes ☐ no ☐ need help

Mail to:

Quaboag Valley Business Assistance Corporation 23 West Main Street, Ware, MA 01082 or *Fax to:* (413) 967-3008