UKAN

Loan Fund Application

Applications are accepted year-round by submitting the completed application to: UKAN Program Manager Kanawha County Commission 407 Virginia Street East Charleston, WV 25301 For more information call 304-357-0101 or email UKAN@kanawha.us

I. APPLICANT INFORMATION

icant: Name:		
Address:		
City:	State:	_Zip Code:
Phone:	Email:	
Individual: Business Entity:	Non-pr	rofit:
Name:		
Address:		
Type of Ownership:		
Sole Proprietor		
Corporation		
LLC		
Nonprofit		

Retail Business Service Restaurant Manufacturing Other Provide a brief description of the business that is starting or expanding. Your attached business plan can more fully explain your products or services, so please be brief but informative.	Type	of Business:
Restaurant Manufacturing Other Provide a brief description of the business that is starting or expanding. Your attached business		Retail
Manufacturing Other Provide a brief description of the business that is starting or expanding. Your attached business		Business Service
Other Provide a brief description of the business that is starting or expanding. Your attached business		Restaurant
Provide a brief description of the business that is starting or expanding. Your attached business		Manufacturing
Provide a brief description of the business that is starting or expanding. Your attached business plan can more fully explain your products or services, so please be brief but informative.		Other
	Provide a brie plan can more	ef description of the business that is starting or expanding. Your attached business e fully explain your products or services, so please be brief but informative.

II. FINANCING	NEEDS			
Total Amount of	Investment:			
Total Amount of	UKAN Funding R	equest:		
III. SOURCES A	AND USES OF FU	J NDING		
Sources of Other	r Funding			
Source Amounts		Terms	Is Funding Committed Yes/Pending	
Uses of Funds	'	,		
Item & Description		Budget Amount	UKAN Fun Yes	ds Neede No
IV. Number and	Type of Jobs Cre	eated		
Year One				
Type(s):				
Year Two (project	eted)			

Types(s):_____

best understanding of the applicant.		
Applicant Signature	Date	
Printed Name & Title		

This application is being submitted with information that is correct and complete, to the

ATTACHMENT: Your business plan MUST contain the following information:

- Description of the business and its goods and/or services
- Demand for proposed goods or services
- Target market and marketing approaches
- Amount of funding required to capitalize the business and operate with adequate cash flow
- How the UKAN funds will be used including a description of the work done or equipment purchased.
- Three year operating pro forma

The UKAN program requires, or reserves the right to ask for, the following information:

- Personal financial statement
- Personal or business tax return
- Building lease if applicable