

Business Application

All sections must be complete in order to process the application.



APPLICATION INFORMATION		
Loan amount requested	How did you hear about CEE?	
Legal business name	Tax ID or Social Security number	
Street address	Utility Company Name and account number	
City	State	Zip
Telephone number		
Contact person	Title	
Email address	Fax number	
Web address	Number of years in business	
Last year's fiscal gross revenue	Last year's fiscal net profit	Net worth

TYPE OF BUSINESS		
PARTNERSHIP <input type="checkbox"/> General <input type="checkbox"/> Limited liability Partnership	CORPORATION <input type="checkbox"/> S Corporation <input type="checkbox"/> C Corporation <input type="checkbox"/> Nonprofit Corporation	OTHER <input type="checkbox"/> Sole proprietorship (DBA _____) <input type="checkbox"/> Limited liability co. <input type="checkbox"/> Government entity
State of Incorporation or organization: _____		
Date Incorporated or organized: _____		

TYPE OF PROPERTY			
<input type="checkbox"/> Office	<input type="checkbox"/> Big Box Retail/Grocery	<input type="checkbox"/> Healthcare Office/Out-Patient	<input type="checkbox"/> Manufacturing
<input type="checkbox"/> Restaurant	<input type="checkbox"/> Elementary/Secondary School	<input type="checkbox"/> Hospital/Medical Clinic	<input type="checkbox"/> Warehouse
<input type="checkbox"/> Retail	<input type="checkbox"/> College/University	<input type="checkbox"/> Assembly/Religious	
<input type="checkbox"/> Other (describe) _____			
Building floor area _____ SqFt		Portion Occupied by Nonprofit _____ %	

PROJECT INFORMATION (attach copy of proposal/contract)		
(1) Contractor name	Contact person	Equipment cost
Telephone number	Fax number	
(2) Contractor name	Contact person	Equipment cost
Telephone number	Fax number	
Description of the project, attach copy of bids or estimates		
Address of property where project is to be done		
Name, address and phone number of record owner of real estate where project will be done. (if different than applicant)		
<input type="checkbox"/> check here if same as applicant		

BANK REFERENCE	
Note: Non-Profits, Government entities, churches and publicly traded companies do not need to complete this section	
Bank name	Fax number
Contact person	Telephone number
Account Number 1	Account Number 2

INFORMATION ON OWNERS/GUARANTORS

Note: Non-Profits, Government entities, churches and publicly traded companies do not need to complete this section

Guarantors must add up to at least 50% ownership of the business. (Attach additional sheet if necessary)

Name	Social Security number	DOB	% of Business owned	Annual Income
Home address	City	State	Zip	Phone #

Name	Social Security number	DOB	% of Business owned	Annual Income
Home address	City	State	Zip	Phone #

Name	Social Security number	DOB	% of Business owned	Annual Income
Home address	City	State	Zip	Phone #

AUTHORIZATION FOR DISCLOSURE OF PERSONAL/GUARANTOR CREDIT INFORMATION

By signing below, the undersigned individual (who is either a sole proprietor, a partner, or a personal guarantor of the Applicant) authorizes and instructs CEE to obtain and review the individual's personal credit file from a credit reporting agency. A photocopy or facsimile copy of this authorization bearing the signatures of the undersigned is valid as an original.

X	_____	X	_____	_____
	Guarantor Signature		Name (Please Print)	Date
X	_____	X	_____	_____
	Guarantor Signature		Name (Please Print)	Date
X	_____	X	_____	_____
	Guarantor Signature		Name (Please Print)	Date

APPLICANT'S SIGNATURE AND AUTHORIZATION FOR DISCLOSURE OF BUSINESS CREDIT INFORMATION

By signing below, I acknowledge and attest that I am authorized to make this application and the authorizations and agreements below on the Applicant's behalf, and that all information contained in and submitted with this application is true, correct and complete.

I further authorize and consent to the release of information to Center for Energy and Environment ("CEE") from any source, including without limitation credit reporting agencies and the personal, bank, and trade references listed above, that may be requested by CEE in connection with this application, and the sharing of such information by CEE with third parties for purposes of this application. The Applicant hereby agrees to release and hold CEE and its employees, managers, and directors harmless from, and indemnify them against, any claims or liabilities whatsoever arising out of or related to CEE's procurement or sharing of such information for such purposes.

A photocopy or facsimile copy of this authorization bearing the signatures of the undersigned is valid as an original.

X	_____	_____	_____
	(Authorized signature of applicant)	(Title)	Date
X	_____		
	(Print or type name of authorized agent)		

Information Required

Credit Application Financial Statements Vendor's Proposal/Contract

Notice:

The federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is the Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580. If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please call or send a written request within 60 days of the date you are notified of the decision to: Center for Energy and Environment, 212 3rd Avenue North, Suite 560, Minneapolis, MN 55401; Tel: (612) 335-5885. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement.

Return completed application to:
 Center for Energy and Environment
 212 3rd Avenue North, Suite 560
 Minneapolis, MN 55401
 Attn: Jim Hasnik
jhasnik@mncee.org
 Phone/Fax (612) 335-5885