## 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	Tax ID or Social Security number		
Street address	Utility Company Name and account num	Utility Company Name and account number		
City State Zip	Telephone number	Telephone number		
Contact person	Title	Title		
Email address	Fax number	Fax number		
Web address	Number of years in business	Number of years in business		
Last year's fiscal gross revenue Last year	's fiscal net profit Net worth			
PARTNERSHIP CORPORATION  General S Corporation  Limited liability Partnership C Corporation Nonprofit Co State of Incorporation or organization: Date Incorporated or organized:  TYPE OF PROPERTY	Limited liability co.  rporation Government entity	)		
3	lealthcare Office/Out-Patient 🔲 Manufact	turina		
	Hospital/Medical Clinic   Warehou   Assembly/Religious  SqFt   Portion Occupied by Nor	se		
☐ Retail ☐ College/University ☐ / ☐ Other (describe)	Assembly/Religious	se		
□ Retail □ College/University □ A  □ Other (describe)  Building floor area  PROJECT INFORMATION (attach copy of proposal/contract)	Assembly/Religious SqFt Portion Occupied by No	se nprofit%		
Retail College/University Different Gescribe)  Building floor area  PROJECT INFORMATION (attach copy of proposal/contract)  (1) Contractor name	SqFt Portion Occupied by NoSqFt Contact person	se nprofit%		
Retail College/University Dulled Retail College/University Dulled Retail College/University Dulled Retail R	SqFt Portion Occupied by Not  Contact person  Fax number	nprofit%  Equipment cost		
Retail College/University During Building floor area  PROJECT INFORMATION (attach copy of proposal/contract)  (1) Contractor name  Telephone number  (2) Contractor name	SqFt Portion Occupied by Not  Contact person  Fax number  Contact person	nprofit%  Equipment cost		
Retail College/University Other (describe) Building floor area  PROJECT INFORMATION (attach copy of proposal/contract)  (1) Contractor name  Telephone number  (2) Contractor name  Telephone number	SqFt Portion Occupied by Not  Contact person  Fax number  Contact person	nprofit%  Equipment cost		
Retail College/University  Other (describe)  Building floor area  PROJECT INFORMATION (attach copy of proposal/contract)  (1) Contractor name  Telephone number  (2) Contractor name  Telephone number  Description of the project, attach copy of bids or estimates	SqFt Portion Occupied by North Contact person  Fax number  Contact person  Fax number	nprofit%  Equipment cost		
Retail College/University Building floor area  PROJECT INFORMATION (attach copy of proposal/contract)  (1) Contractor name  Telephone number  (2) Contractor name  Telephone 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 est (if different than applicant)  check here if same as applicant	SqFt Portion Occupied by North Contact person  Fax number  Contact person  Fax number	nprofit%  Equipment cost		
Retail College/University Other (describe) Building floor area  PROJECT INFORMATION (attach copy of proposal/contract)  (1) Contractor name  Telephone number  (2) Contractor name  Telephone 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 est (if different than applicant)	SqFt Portion Occupied by Nor  Contact person  Fax number  Contact person  Fax number  ate where project will be done.	se s		
□ Retail □ College/University □ // □ Other (describe)  Building floor area  PROJECT INFORMATION (attach copy of proposal/contract)  (1) Contractor name  Telephone number  (2) Contractor name  Telephone 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 est (if different than applicant)  □ check here if same as applicant  BANK REFERENCE Note: Non-Profits, Government entities, churches and publicly trade	SqFt Portion Occupied by North Contact person  Fax number  Contact person  Fax number  Fax number  ate where project will be done.	se s		

lame	Social Security number	DOB	% of Business owned	Annual Income
lome address	City	State	Zip	Phone #
			Σ.ΙΡ	THORIC #
lame	Social Security number	DOB	% of Business owned	Annual Income
lome address	City	State	Zip	Phone #
Jame	Social Security number	DOB	% of Business owned	Annual Income
lome address	City	State	Zip	Phone #
Guarantor Signature	X Nan	ne (Please Print)		Date
applicant) authorizes and	<ul> <li>the undersigned individual (who l instructs CEE to obtain and review of this authorization bearing the sign</li> </ul>	w the individual's p	oersonal credit file from a cre	
	X			
Guarantor Signature	Nan	ne (Please Print)		Date
Guarantor Signature	X Nan	ne (Please Print)		Date
Guarantor Signature	Nan	ne (Please Print)		Date
By signing below, I in the Applicant's behalf, an I further authorize vithout limitation credit rep vith this application, and the elease and hold CEE and its rising out of or related to Cl	RE AND AUTHORIZATION FOR acknowledge and attest that I am aured that all information contained in an and consent to the release of informationing agencies and the personal, barrie sharing of such information by CEE of employees, managers, and directors EE's procurement or sharing of such incisimile copy of this authorization bear	thorized to make this nd submitted with thi ation to Center for En nk, and trade referen with third parties for harmless from, and i nformation for such	s application and the authorizat is application is true, correct and nergy and Environment ("CEE") ices listed above, that may be repurposes of this application. Tindemnify them against, any claip purposes.	ions and agreements below d complete. from any source, including equested by CEE in connection he Applicant hereby agrees ims or liabilities whatsoever
	e of applicant) (Title	<del>)</del>		Date

## Notice:

INFORMATION ON OWNERS/GLIARANTORS

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 3<sup>rd</sup> 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 3<sup>rd</sup> Avenue North, Suite 560
Minneapolis, MN 55401
Attn: Jim Hasnik
jhasnik@mncee.org

Phone/Fax (612) 335-5