



Thank you for your application. If you have questions, please contact your IFA Funding Manager. Our office locations are listed at the end of this form.

NOT-FOR-PROFIT APPLICATION

APPLICATION # _____

Please complete all questions. If not applicable, write N/A.

1. Legal Name and Address of Borrower:

Name

Address City State Zip Code County

Contact Person Title () Telephone Number

2. Proposed Project Name and Location:

Name

Address City State Zip Code County

Districts:
U.S. Congressional _____ IL House _____ IL Senate _____

3. Type of Financing: _____ **Lease** _____ **Bond** _____

4. Amount of Financing Requested: \$ _____

5. Federal Tax ID Number or Borrower's Social Security Number: _____

6. Is the Corporation Wholly or Partly Owned by or Affiliated with Any other Entity?

If yes, please explain.

7. History and Background of Borrower:

Please provide a history of the corporation, date of incorporation, charitable purpose and the services and programs provided to meet that goal, etc.

Please identify and describe any for-profit affiliates not mentioned above.

Describe your current service area and number of clients. Also, discuss how the proposed project will affect the quantity and quality of services you currently provide.

Please enclose a current listing of the organization's board of directors and verification of its 501(c)(3) designation.

8. Project Description:

Provide a complete description and intended purpose of the project, including its intended purpose. Please include any land acquisition, building construction, renovation, equipment purchases, installation, etc. (attach project estimates). Describe the relationship of the project to the organization's mission and experience.

9. Facility Financing:

Does the facility possess all licenses and permits for current operations? If no, please explain.

Is any part of the facility to be used by another public or private entity? If yes, please explain.

Has an environmental study been performed on the site of the subject facilities? ☐ No ☐ Yes
If so, were any environmental risks cited? Please explain:

10. **Present Zoning Classification:** _____

☐ Rezoning is contemplated to obtain a classification of _____

☐ No rezoning is necessary; permitted use exists.

☐ Variances are required (specify) _____

11. **Unusual Site Features:**
PLEASE EXPLAIN

12. **Please identify the current building and/or landowner for any site to be acquired:**

Name: _____

Address: _____

City: _____ State _____ Zip Code _____

13. **Economic and Community Effect:**

Describe the project's overall effect on the surrounding community (i.e., services to the community, environmental effect, employment opportunities, quality of life, etc.).

14. **Tax-Exempt Financing:**

Explain why tax-exempt financing is necessary for this project to be successful.

17. Project Costs:

Amount of Proposed Bond or Lease: \$ _____

Uses of Funds	Total Cost		Bond/Lease Amount		Other Sources
Land Acquisition	\$		\$		\$
Building Acquisition					
Rehabilitation					
New Construction					
Machinery/Equip.					
Architectural & Engineering					
Legal & Professional					
Contingency/Other Refinancing					
Capitalized Interest					
Total	\$		\$		\$

Sources of Funds	Total Source
Authority Bond/Lease	\$
Bank Financing	
Other:	
Other:	
Other:	
Total	\$

18. Identify other sources of financing:

Include source, amount available, security, terms, etc.

19. Proposed Financing Structure:

Please describe the prospective financing terms for this project including maturity, fixed or variable rate debt, rated or unrated, public offering or private placement.

20. Source of Security:

Identify what sources of revenue will repay the Authority loan. If repayment of the bond/lease is to be guaranteed by a bank or another entity other than the borrower, please list the name and address of the guarantor, and its relationship to the borrower:

21. State Contractual Agreements:

Please describe below any state or federal funding sources that the corporation receives (i.e., state contracts):

Funding Agency	Funding Type	Certification Status	Total Amount Provided (Annually)

22. Current and Projected Employment

One of the purposes of the Illinois Finance Authority is to create new, full-time jobs and/or assist in the retention of existing jobs. Please be as thorough and accurate as possible in arriving at your estimates.

Employment Categories	Current Employment	1 Year After Project Completion	2 Years After Project Completion
Professional			
Clerical and Administrative			
Skilled			
Unskilled			
Other			
Total			

- List the assumptions used for employment projections:

- If this application pertains to the retention of existing jobs, please state the number of employees to be retained, and explain why these jobs would be eliminated or reduced if the loan is not provided:

- Please estimate the number of construction jobs to be created as a result of this project:

- Estimated number of months construction workers to be employed: _____

23. Other Firms Working On Financing For The Borrower:

A. General Counsel

Name

Address

City

State

Zip

(____) _____

Telephone

Contact Person

B. Bond Counsel

Name

Address

City

State

Zip

(____) _____

Telephone

Contact Person

C. Accountant:

Name

Address

City

State

Zip

(_____) _____
Telephone

Contact Person

D. Financial Advisor:

Name

Address

City

State

Zip

(_____) _____
Telephone

Contact Person

E. Underwriter/Placement Agent:

Name

Address

City

State

Zip

(_____) _____
Telephone

Contact Person

F. Bond Trustee:

Name

Address

City

State

Zip

(_____) _____
Telephone

Contact Person

NOTICE: Applicants are hereby notified that the provisions of the Prevailing wage Act (820 ILCS 13011; ILL. Rev. stat. 1991, ch 48, par. 3995-1 et. seq) and the Public Work Preference act may apply to the project, which is the subject of this application. Construction cost estimates should take into account the effect of said Acts.

CERTIFICATION BY APPLICANT

The applicant certifies by signing, the application in the space below that the site for the proposed construction is not located in a SPECIAL FLOOD HAZARD AREA as defined and designated by

The Illinois Department of Transportation, Division of Waterways, and that an investigation has been made to determine that it is not in such an area.

Applicant hereby certifies that all information contained above and in exhibits attached hereto is true to his/her best knowledge and belief and is submitted for the purpose of obtaining financial assistance from the Illinois Finance Authority.

Date _____

Applicant _____

By _____

Title _____

Return completed form to Illinois Finance Authority

Carbondale | 150 E. Pleasant Hill Rd., #46, Carbondale, IL 62903 | 618.453.5566 | 618.453.4332 fax
Chicago | 180 N. Stetson Ave, #2555, Chicago, IL 60601 | 312.651.1300 | 312.651.1350 fax
Peoria | 124 S. W. Adams St., # 300, Peoria, IL 61602 | 309.495.5959 | 309.676.7534 fax
Springfield | 427 E. Monroe Street, #202, Springfield, IL 62701 | 217.782.5792 | 17.782.3989 fax
TTY: 1.800.0844 | VOICE: 1.800.526.0857
www.il-fa.com