

# LOAN APPLICATION



PO Box 19700, Irvine, CA 92623-9700  
Fax: 866.303.9360

## APPLICANT INFORMATION

Church      Christian School      Para-Church Ministry

Legal Name of Ministry      Fed ID/Tax ID Number

Mailing Address      City      State      ZIP      County

Meeting Address (if different)      City      State      ZIP      County

Ministry Phone      Ministry Fax      Ministry Website      Ministry Email Address  
    Yes      No

Year Founded      Is Ministry Incorporated?      Date of Incorporation

Senior Minister      Start Date      Email Address      Office Phone      Mobile Phone

Exec. Minister/Administrator      Start Date      Email Address      Office Phone      Mobile Phone

Loan Contact Name      Email Address      Office Phone      Mobile Phone

Financial Year:      Calendar      Fiscal, with a reporting period of: \_\_\_\_\_

Yes      No

Number of Weekly Worship Services      Dates and Times of Services      Multi-Site Ministry?

Ministry's History	Year	Annual Average Weekend Attendance (or School Enrollment)	Number of Giving Units*	Number of Baptisms	Number of Staff	
					Full-Time	Part-time
Current YTD						
Last Year						
2 Years Ago						
3 Years Ago						
4 Years Ago						

\*Giving Units = the number of people or households that your ministry prepared a year-end giving statement for tax reporting purposes

Requested Loan Amount \$ \_\_\_\_\_ Date Needed \_\_\_\_\_ Purpose of Loan:  
 Closing Costs:      Construction      Renovations/Improvements  
    Refinancing      Property Purchase  
 Intend to pay cash for all closing costs  
 If eligible, we request to finance all closing costs      Other: \_\_\_\_\_

Address of Property to Be Used as Collateral      City      State      ZIP      County      Assessor's Parcel No.

## CAPITAL CAMPAIGN INFORMATION

Is there, or will there be, a capital campaign in conjunction with this project?      No      Yes (If yes, please complete the following):

Is your program being facilitated by an outside firm?      No      Yes, our campaign firm is: \_\_\_\_\_

\$ \_\_\_\_\_ / \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Total Campaign Commitment	Duration of Campaign (Beginning/Ending)	First Fruits Offering Date	First Fruits Offering Amount	Pledge Dollars Received to Date	Pledge Dollars Spent to Date
---------------------------	--	-------------------------------	---------------------------------	------------------------------------	---------------------------------

Are the campaign funds accounted for separately?      No      Yes (If no, please explain why not): \_\_\_\_\_

What will the current capital campaign funds be used for?      Loan Payments      Project Expenses      Other: \_\_\_\_\_

*Please provide copies of your capital campaign brochures, mailers and statement of documented pledges (do not include names).*

## NON-CDF DEBT TO BE REFINANCED (CDF requires all existing external financing to be refinanced with this credit package)

1) \_\_\_\_\_

Bank or Bond Company	Address	City	State	ZIP	
					%

Contact Name	Phone	Fax	Loan Number	Interest Rate	
\$				\$	

Original Loan Amount	Current Outstanding Loan Balance	Loan Term	Origination Date	Maturity Date	Monthly Payments
----------------------	-------------------------------------	-----------	---------------------	------------------	---------------------

2) \_\_\_\_\_

Bank or Bond Company	Address	City	State	ZIP	
					%

Contact Name	Phone	Fax	Loan Number	Interest Rate (%)	
\$				\$	

Original Loan Amount	Current Outstanding Loan Balance	Loan Term	Origination Date	Maturity Date	Monthly Payments
----------------------	-------------------------------------	-----------	---------------------	------------------	---------------------

## FINANCIAL INFORMATION

In order to secure financing from CDF, the Borrower is required to open and maintain a CDF Advantage Investment prior to closing this financing package, if not already a CDF investor. *CDF reserves the right to postpone closing until an investment has been opened.* Compensating investments are a requirement for all loans at CDF. Your CDF Relationship Manager will assist you in planning opportunities for investing with your members. Additionally, CDF requires the borrower to invest all Capital Campaign and reserve dollars at CDF to ensure both borrower and lender have the ability to monitor availability of funds in order to adequately complete necessary project funding. Please provide current information on the following ministry accounts:

Ministry Account	Name of Financial Institution	City / State	Current Balance
Unrestricted Operating Funds			\$
Building / Capital Campaign Funds			\$
Mission Funds			\$
Investments / Other			\$
CDF Investments	Church Development Fund, Inc.	Irvine, CA	\$

---

## FINANCIAL STATEMENTS

Please provide financial statements (Consolidated Income and Expense Statement, Balance Sheet) for the last four prior years and current YTD (including Current Year Budget) through the last day of the month. Please include the top 5 giving units for each year – dollar amounts only, not names. **Partial data cannot be accepted.**

---

## ACKNOWLEDGEMENTS

This application is furnished for the purpose of obtaining credit, and is to be considered valid for 6 months from the date indicated on page 2. If Church Development Fund, Inc. and applicant are not able to close this financing by that time, a new application must be submitted. If any of the representations made in this application and the attached financial statements prove to be untrue, or if the undersigned fail to notify Church Development Fund, Inc. of any material change in financial condition as given in said documents, then and in either case, all of the obligations of the undersigned to, or held by, Church Development Fund, Inc. may immediately become due and payable, without demand or notice. We hereby certify that all statements are true and correct and provide an accurate representation of the complete financial status of the ministry to the best of our knowledge.

*This application must be signed by at least 2 people who are authorized to sign legal documents for this ministry.*

Signature	Printed Name	Title	Date
Signature	Printed Name	Title	Date
Signature	Printed Name	Title	Date
Signature	Printed Name	Title	Date

# APPLICATION SUPPLEMENT GENERAL INFORMATION



## LEADERSHIP STATEMENT

A separate written statement from the ministry's leadership must accompany this application. Please title the sheet LEADERSHIP STATEMENT, and include the following information in that supplemental document:

1. Outline the financing needs as reflected in this loan application—use and purpose for the funds. Expand on what needs to happen to make your project work—i.e. if you are renovating an existing building, outline what needs to be done to complete the project (removing walls, windows, etc).
2. In detail, please describe your fundraising efforts to date, and any future plans that may be considered.
3. Outline the methods and means of communicating this project to the members of your congregation.
4. Explain the impact this financing will have on the mission and vision of the ministry.
5. List the short-term (1–4 years) and long-term (5+ years) goals of this ministry.
6. What is the expected timeline for this project? What is your “drop dead date” for funding?
7. Please briefly outline the ministry's philosophy on church planting, including any churches planted or considered to be planted within the past 3 years through the coming 3 years.
8. Please provide a biographical narrative of your Senior Minister (or Director or other leader for para-church ministries). Include educational background and all professional experiences, both secular and clerical.
9. Please provide a brief narrative of the history of your ministry. Please include dates, names, location information highlights, information about any relocations, name changes and churches planted.

## REAL ESTATE INFORMATION

### EXISTING PROPERTY

Total Acreage	Number of Buildings	Assessor's Parcel No./ID	Property Value
Source of Valuation: Tax Assessment	Market Evaluation	Ministry Estimate	Appraisal / Date: _____ (provide a copy)
Are there any "special" concerns about the property's use of development, such as lakes, hillsides, easements, etc.?			
No	Yes (If yes, please describe): _____		

### PROPERTY INSURANCE INFORMATION

Insurance Carrier	Address	City	State	ZIP
Agent Name	Phone	Fax	Email Address	
\$ Total Coverage Amount	\$ Public Liability	\$ Property and Casualty		

**Note:** Prior to funding, CDF is to be named as mortgagee on your ministry's insurance coverage and we must receive a proof of insurance statement from your carrier.

## SUPPORTING DOCUMENTS CHECKLIST

### GENERAL MINISTRY INFORMATION

- Copy of Articles of Incorporation, including Certificate from state (include both versions if you have changed your name at any time)
- Copy of corporate Name Change documentation (if applicable)
- Copy of By-Laws, including any revisions
- Leadership Statement
- Copy of Proof of Insurance Statement (Full Policy)
- Provide a list of all of the corporation's Elders or Board Members, along with their individual occupations, leadership tenure and personal contact information.
- Please provide a list of all paid staff members, including name, title, tenure and full or part-time status.

### COLLATERAL INFORMATION

- (Regarding ALL properties currently owned by borrower to be used as collateral for this financing)
- Copy of Most Recent Financing Statement (Mortgage/Deed of Trust, Bond Issue; where applicable)
  - Copy of Grant/Warranty Deed for all properties owned, including any attachments (Deeds received when property was purchased)
  - Copy of Most Recent Real Estate Appraisal (if available)
  - Copy of Real Estate Tax Statement