

**OHIO CAPITAL ACCESS PROGRAM
Loan Enrollment and Certification Form
Lender**



**Department of
Development**

Ted Strickland, Governor
Lee Fisher, Lt. Governor
Lisa Patt-McDaniel, Director
Ohio Department of Development

Minority Business Enterprise Division

1) Lender Information

Reserve Fund Acct. Number: _____
Bank Name: _____
Contact/Title: _____
Address, City, State, Zip: _____
Phone: _____ Fax: _____
E-mail: _____

2) Loan Information

Borrower Name: _____
Date of Loan Agreement (if loan is a line of credit): _____
Date of Loan Disbursement (if loan is a term loan): _____

(Lender has 15 business days from this date to enroll)

Lender Loan Number: _____

Loan Type:	Loan Amount:	Amount Enrolled:
		<i>(Loan Amount minus Contribution Fee if Borrower financed fee in the loan)</i>
Line of Credit	\$ _____	\$ _____
Term Loan	\$ _____	\$ _____
Total	\$ _____	\$ _____

Length of Loan: Line of Credit _____ Term Loan _____

Use of Loan Proceeds _____

Refinancing an Existing Loan (complete only if refinancing):
Refinancing a Loan from another financial institution _____

(Provide name of institution here)

- Refinancing an Existing CAP Loan:
- a) Lender's Previous Loan Number _____
 - b) New Total CAP Covered Loan Amount \$ _____
 - c) Less: Previous CAP Covered Loan Amount \$ _____
 - d) Increased CAP Covered Loan Amount \$ _____

3) Reserve Fund Contribution (Calculated on amount enrolled)

	Amount:	Percentage of Contribution:
Contribution by Borrower	\$ _____	_____ % <i>(Borrower's contribution must be between 1.5% - 3% and it can be financed)</i>
Contribution by Lender	\$ _____	_____ % <i>(Lender's contribution must match borrower's contribution and it can be financed by borrower)</i>
Complete one of the following:		
Contribution by Ohio	\$ _____	_____ 10 _____ %
Contribution by Ohio on 1st, 2nd, or 3rd enrollment	\$ _____	_____ 50 _____ %

(Cont'd)

Contribution by Ohio if
borrower is an Ohio certified
minority business enterprise \$ _____ 80 %

4) Criteria

Does Borrower or Loan Meet the Following Criteria?

- a) Does the Borrower have annual revenues of less than \$10 million? Yes No
- b) Is the Borrower's principal place of business in Ohio? Yes No
- c) Is the Loan being used for residential housing development? Yes No
(If yes, loan is ineligible)
- d) Is the Loan being used for Passive Real Estate Ownership? Yes No
(If yes, loan is ineligible)
- e) No. of jobs to be created _____ for line of credit _____ for term loan
- f) No. of jobs retained _____ for line of credit _____ for term loan

5) Certification

By signing below the authorized person acknowledges that, to the best of his/her knowledge, all information provided on this enrollment form is true and correct; and the representations made in the Capital Access Program Participation Agreement remain true. **Please attach evidence of Borrower and Lender's Reserve Fund Contribution deposit.**

Authorized Signature _____ Date _____

Printed Name and Title _____

Attention Lenders - Mail form to:
Manager, Office of Minority Financial Incentives,
Ohio Department of Development Minority Business Enterprise Division
77 S. High Street, P.O. Box 1001, Columbus, Ohio 43216-1001 or fax form to: (614) 466-4172
For information, call (800) 848-1300 ext. 47708