



**NORTHEAST MISSISSIPPI PLANNING AND DEVELOPMENT DISTRICT**  
**P. O. Box 600, BOONEVILLE, MS 38829**  
**Ph. 662.728.6248 FAX: 662.728.2417**

***REVOLVING LOAN FUND PRE-APPLICATION***

Date: \_\_\_\_\_

**Name of Business:** \_\_\_\_\_

Business Addr., City, ST, Zip: \_\_\_\_\_

Federal Employer ID # : \_\_\_\_\_

DUNS # (required for IRP / RDLF funds): \_\_\_\_\_

New or Existing Business? \_\_\_\_\_ Minority Owned? \_\_\_\_\_ Female Owned? \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

Business Phone # : \_\_\_\_\_ Cell Phone # : \_\_\_\_\_

Home Phone # : \_\_\_\_\_ Email: \_\_\_\_\_

Home Addr., City, ST, Zip: \_\_\_\_\_

Social Security # : \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**Project Cost:** a. Amount Requested from NEMPDD: \_\_\_\_\_

b. Your Investment in Project: \_\_\_\_\_

c. Other Funds: \_\_\_\_\_

Source of Other Funds: \_\_\_\_\_

d. Total Project Cost (a + b + c): \_\_\_\_\_

Proposed Use of NEMPDD funds: \_\_\_\_\_  
\_\_\_\_\_

**Jobs:** Present Number of Persons Employed: \_\_\_\_\_

New Jobs Estimated, Two (2) Years after Loan: \_\_\_\_\_

**Collateral Available:** \_\_\_\_\_  
\_\_\_\_\_

**Personal Financial Statements:**

(List owners of 20% or more and attach their current financial statements.)

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date