



Date

Name of Organization

Organization Website

Organization Address

City

State

Zip Code

Type of Business Select One

Date Incorporated

Is this a woman-owned business or woman-led organization?  Yes  No

What is your gender identity?

What is your ethnicity?

If Other, please specify

Contact Person

Name

Phone

Email

## Borrower's Experience

Number of projects completed:

Fix and Flip (Please Enter Number)

Please indicate the Fix and Flip project type(s) (select all that apply)

Residential

Commercial

N/A

Mixed-Use

Other (Describe):

Buy and Hold (Please Enter Number)

Please indicate Buy and Hold project type(s) (select all that apply)

Residential Units

Commercial Units

N/A

Other (Describe):

What type(s) of funding sources have you used to complete previous projects? (select all that apply)

Personal Funds

Loans

N/A

Grants

Other (Describe):

What is your average project completion time for previous projects?

Have your past projects met, exceeded, or fallen short of financial projections? Please explain.

## Loan Request Information

Briefly describe financing  
need

Dollar Amount Requested

Total Project Cost

### Other Funding Sources

Funding Source 1

Name:

Amount:

This funding has been:           Select One

Funding Source 2

Name:

Amount:

This funding has been:           Select One

Funding Source 3

Name:

Amount:

This funding has been:           Select One

### Project Details

Briefly describe the project.

Please list all addresses, description of current condition, use, zoning, etc.

Please also include descriptions of proposed improvements, phasing, intended use, and development timeline. List all required approvals (zoning, permitting, etc.)

### Number of jobs created

Please explain how the loan and/or project will impact your business strategy.

Project Address

Street  
City, State  
Zip Code

Census Tract

Census Tract Finder

Please describe project site  
(including type of building,  
year built, and square  
footage, current ownership of  
site(s), description of existing  
financing)

Development Team

Developer (if different from  
the borrower)

Architect (If applicable)

Engineer (If applicable)

General Contractor (If  
applicable)

Sub Contractor (If applicable)

Sub Contractor (If applicable)

Other (Fill-in)

Other (Fill-in)

## CONFLICT OF INTEREST DISCLOSURE

Cinnaire is committed to fairness and high ethical standards. Please disclose whether any direct business relationship (contractual or otherwise) exists between your organization, its officers, principals or investors and any employee of Cinnaire\*. If you are uncertain of whether such a business relationship exists, please inquire with your Jumpstart Wilmington representative.

\*This would include any business entity owned or controlled by an employee of Cinnaire or any real property owned by a Cinnaire employee or their business entity.

RESPONSE (Do Not Leave Blank).

Yes, a direct business relationship exists between (your organization) and (name of Cinnaire employee or their business entity).

No, no such direct business relationship exists between my organization and any Cinnaire employee or their business entity.

I am uncertain about an existing relationship and wish to discuss, please contact me at:

Signature