



Date

Name of Organization

Organization Website

Organization Address

City

State

Zip Code

Type of Business

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

Name:

Amount:

This funding has been:

Name:

Amount:

This funding has been:

Name:

Amount:

This funding has been:

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