

Micro-Enterprise Business Lending Application Form

Thank you for your enquiry in relation to a Microfinance Ireland loan.

Please check you are eligible to apply:

Your business employs fewer than ten persons and has an annual turnover and/or annual balance sheet total not exceeding €2m.

Your business has been declined Bank credit. MFI will require a copy of your Bank decline letter.

Where the micro-enterprise is a limited company, the application must be in the company name. For limited companies approved funding, MFI will require the promoter(s) to execute an indemnity. This means that the promoter(s) will be personally liable to repay the loan with interest.

A current valid Tax Clearance Certificate is required from a business (and indemnifiers) that has been approved Microfinance Ireland funding.

Documentation Required – Checklist

Essential Information to accompany your application Tick 🗸
Your Application Form fully completed and preferably typed
Business Plan
Financial Projections for three-years:
- Cash flow on month-by-month basis
- Summary Profit & Loss
Six months bank statements (business and personal)
Six months loan statements of all current borrowings (business and personal)
Promoter(s) CV
Bank Decline Letter OR Completed Self-Certification at Part 4
Existing businesses (These details may not be required for all applications. Your MFI Assessor will advise)
Recent management accounts
Certified/Audited accounts (3-years)
Aged Debtors/Creditors & Stock listing

REMEMBER - INSUFFICIENT INFORMATION WILL RESULT IN DELAYS

1. We would encourage you to go to our partners in your Local Enterprise Office and speak with a business adviser who will assist you with the application process.

The Local Enterprise Office will conduct a local evaluation and recommendation on the quality of your business proposal on our behalf. This is an important part of our credit process. They will then send your application to Microfinance Ireland who will independently assess your proposal and make the final credit decision. Details of

your Local Enterprise Office can be found at www.localenterprise.ie.

2. If you are satisfied that your business plan/loan proposal is complete and ready for credit assessment without the assistance of the Local Enterprise Office, then send your completed application form together with the above required documentation by post to Microfinance Ireland (see address below). We may still request a local evaluation and recommendation of your business from the Local Enterprise Office.

If you have any queries on the above, or require assistance, please contact us at:

Microfinance Ireland, Jefferson House, Eglinton Road, Donnybrook, Dublin 4
Tel: 01 260 1007 Fax: 01 260 8652 Email: info@microfinanceireland.ie www.microfinanceireland.ie

1

Busines	s Ownership Details	the Company/F	Partnei	own or control 25% or more of the rship or otherwise exercises control ov	/er
1. Owner	Name	Director Yes	No	Irish Resident Yes No	
Addres	s			Date of Birth DD / MM / Y	Υ
Occupa	ation			Percentage Shareholding	%
2. Owner	Name	Director Yes	No	Irish Resident Yes No	
Addres	s			Date of Birth D D / M M / Y	Υ
Occupa	ation			Percentage Shareholding	%
3. Owner	Name	Director Yes	No	Irish Resident Yes No	
Addres	s			Date of Birth D D / M M / Y	Υ
Occupa	ation			Percentage Shareholding	%
4. Owner	Name	Director Yes	No	Irish Resident Yes No	
Addres	s			Date of Birth D D / M M / Y	Υ
Occupa	ation			Percentage Shareholding	%
	any corporate shareholder that the management of this Cor	more of the share:	s or voti	ing rights in this Company or otherwise exerc	ises
1. Compa	ny Name			% of shares owned in the Com	pany
Registe	ered No.				%
2. Compa	ny Name			% of shares owned in the Com	pany
Registe					%

Business Borrowing & Savings Details

Borrowings	Financial Institution	Amount Outstanding (000's)	Monthly Repayments
Overdraft			
Business Cards			
Loans (incl. Credit Union)			
Official			
Leasing/Hire			
Turonacc			
Commercial Mortgage			
Other Financial Commitments			
Note: Please provide details of arrears of repayments and arrangements in place on any of the above:			

Savings & Investments	Financial Institution	Amount Held (000's)
Current Account		
Deposits		
Other		
Investments		
Investment Accounts		
Shares		
Other		

Property	
Current property value:	€
Mortgage Outstanding	€
Financial Institution	

Business Financial Details

Period Ending	D D / M M / Y Y
Full Year Accounts?	Yes No
Accounts Type	Audited
	Auditor's Name
	Certified
	Management
	Other
	Value (000's)
Sales/Turnover	
Gross Profit	
Net Profit	
Drawings	
Interest	
Depreciation	
Tax	

Current Values				
Assets	Value (000's)	Liabilities	Value (000's)	
Land and Buildings		Creditors		
Machinery & Equipment		VAT/PAYE/ PRSI		
Furniture and Fittings		Other		
Stock				
Debtors				
Cash				
Deposits				
Other				
TOTAL ASSETS				
Other				

Other

Tax Status (Tax up to date)	Yes	No
Is a Revenue Agreement in place	Yes	No
Monthly Amount of Revenue Agreement		

Part 2: Personal Details

Your personal details are also important to us and while it is critical to understand your business, it is also important to understand its owners. These details will help us meet your current needs.

Fillicipal Busiliess Owner			
Name		No of Dependants	
Address		Age Range From	То
		Residential Status	Owner Tenant
		Living wi	ith Parents Other
Bank Name		Number of Years at Address	
Account Number		Estimated Value of Home	€
Sort Code	00 - 00 - 00	Annual Salary	€
Contact Details		Salary Source and Payment F	
Email		Previous Address	roquonoy
Landline		(if less than 3 years at current address)	
Mobile		Are you currently unemployed	l Yes No
		If yes, for how long?	
Date of Birth	D D / M M / Y Y		rk Enterprise Allowance (BTWEA) /
Time with Bank	M M Months Y Y Years		se provide details with your business

4

Personal Financial Details Principal Business Owner

Borrowings	Financial Institution	Amount Outstanding (000's)	Monthly Repayments	
Mortgage				
Personal Loan				
Motor Loan				
Overdraft				
Credit & Other Cards				
Tax Liability				
Other (e.g. Rent)				
Note: Please provide details of arrears of repayments and arrangements in place on any of the above:				

Savings & Investments	Financial Institution	Amount held/ value (000's)
Savings		
Deposits		
Other		
Investments		
Investment Accounts		
Life Assurance		
Shares		
Pension		
Property (other than family home) Please also indicate current property details & value		
Other		

Personal Details

Second Business Owner (if applicable)

Name			No of Dependants		
Address			Age Range	From	То
			Residential Status	Owner	Tenant
			ι	_iving with Parents (Other
Bank Name					
Account Numb	er		Number of Years at Ac	ddress	
Sort Code			Estimated Value of Ho	ome	
Contact Details			Annual Salary		
			Salary Source and Pa	yment Frequency	
Email			Previous Address		
Landline			(if less than 3 years at current address)		
Mobile					
			Are you currently uner	mployed Yes No	
Date of Birth	D D /	м м / ү ү	If yes, for how long?	Y Y M M	
20.0 0. 2			Do you qualify for Bac State support	k to Work Enterprise Allow	vance (BTWEA) / other
Time with Bank	M M Mor	ths Y Y Years	Yes No If ye	s, please provide details w	vith your business plan.

5

Personal Financial Details Second Business Owner

Borrowings	Financial Institution	Amount Outstanding (000's)	Monthly Repayments
Mortgage			
Personal Loan			
Motor Loan			
Overdraft			
Credit & Other Cards			
Tax Liability			
Other (e.g. Rent)			
Note: Please provide details of arrears of repayments and arrangements in place on any of the above:			

Savings & Investments	Financial Institution	Amount held/ value (000's)
Savings		
Deposits		
Other		
Investments		
Investment Accounts		
Life Assurance		
Shares		
Pension		
Property (other than family home) Please also indicate current property details & value		
Other		

Part 3: Application Details

Amount Required		Working Capital Loan	
Max less than €25,00	0) €		
Repayment Period	Y Y years M M months	Repayment Frequency (MFI facilities are typically monthly)	
		typically monthly)	
Describe briefly the	purpose of your loan and what financial inpu	t is being provided by you directly or otherwise and the source	of these funds. Please let
Proposed Fundi		cal Enterprise Office, Business Angels and / or other Specialis	t runas.
Funding Cours	e €	Describe seels item of symanditure	€
Funding Sourc Microfinance Ire		Describe each item of expenditure	€
Own Funds	lanu		
Other Funds			
Other Funds			
Total		Total	
Further Details:		Total	
· urarer _ etaller			
	er business you have been involved in (eit by way of background information:	her still trading, or not) including business name, address	and some general
		ng from any State body, agency or department (in Ireland or el	sewhere) in the current
Has this business o		ng from any State body, agency or department (in Ireland or el If YES, please provide details including the date and amou	*
Has this business o	r any of its promoters been in receipt of fund	If YES, please provide details including the date and amou	•
Has this business o fiscal year and the t	r any of its promoters been in receipt of fund	If YES, please provide details including the date and amou	nt.
Has this business o	r any of its promoters been in receipt of fund	If YES, please provide details including the date and amou	nt.
Has this business o	r any of its promoters been in receipt of fund	If YES, please provide details including the date and amou	nt.
Has this business o fiscal year and the t Grant Provider	r any of its promoters been in receipt of fund two previous fiscal years? Yes No	If YES, please provide details including the date and amou	nt.
Has this business o fiscal year and the t Grant Provider	r any of its promoters been in receipt of fund	If YES, please provide details including the date and amou	nt.
Has this business o fiscal year and the t Grant Provider	r any of its promoters been in receipt of fund two previous fiscal years? Yes No	If YES, please provide details including the date and amou	nt.
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Has this business of fiscal year and the to Grant Provider Brief details on Referees Please provide full of	r any of its promoters been in receipt of fund two previous fiscal years? Yes No	If YES, please provide details including the date and amou	nt.
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Has this business of fiscal year and the tour of the fiscal year and y	r any of its promoters been in receipt of fund two previous fiscal years? Yes No number of new jobs created/sustained	If YES, please provide details including the date and amou Date d and/or social impact tact that we may contact for a reference Personal Contact Name	nt.
Has this business of fiscal year and the tour of fiscal year and the fiscal year. Business Contact Name Address	r any of its promoters been in receipt of fund two previous fiscal years? Yes No number of new jobs created/sustained	If YES, please provide details including the date and amou Date d and/or social impact tact that we may contact for a reference Personal Contact Name Address	nt.
Grant Provider Grant Provider Brief details on Referees Please provide full (please provide nan Business Contact Name	r any of its promoters been in receipt of fund two previous fiscal years? Yes No number of new jobs created/sustained	If YES, please provide details including the date and amou Date d and/or social impact tact that we may contact for a reference Personal Contact Name	nt.

6

Part 4: Applicant Declaration, Self-Certification & Consent

1. Details of Bank Decline

- (a) Please provide copy of bank decline letter (within last 6 months), if you have received one.
- (b) If a bank decline letter was not issued to you, please complete the details below:

Self-Certification of Credit/Loan Facility Decline		
I confirm that I discussed my request for credit/loan facilities in relation to my business requirements and have been advised that my application has been unsuccessful.		
Name of Bank/Finance Company:		
Branch Address:		
Name of person discussion took place with:		
Date discussion took place:		
Amount Requested:		
Reason given for decline:		
Print Name:		
Signature:	Date:	

2. Data Protection

I/We acknowledge that I/We have read, understand and agree to be bound by the following terms governing data protection.

2.1 Microfinance Ireland as Data Controller

In consideration of Microfinance Ireland Limited ("MFI") considering your proposal for loan finance and for any facilities that may be made available to you, it will be necessary for you to provide certain data (including personal data within the meaning of the Data Protection Acts 1988 and 2003 (the "Acts")) in order to allow MFI and parties processing data on behalf of MFI to assess your proposal/application. In performing its functions, MFI will be required to gather personal data ("Data") on the individual seeking funding (this will also be the case where an individual(s) is/are promoting a company which is seeking funding).

7

2.2 How we use your Data

In compliance with the Acts, Data gathered by MFI and further disclosed by them to selected third parties (see below) will be held securely and confidentially. The Data will only be used for the purposes of the functions and activities of MFI. MFI will only process Data (and disclose such Data to selected third parties) in fulfilment of its business activities, being to provide loan finance and to receive repayments of loan finance.

2.3 Data you Provide

MFI captures Data which is provided directly by the proposed borrower/the borrower. The Data about the (proposed) borrower is typically gathered by MFI through this application form. This Data would include name(s), address(es), phone number(s), email address(es), date(s) of birth, details of the business including personal contributions, loan amounts, interest rates, repayment schedules and any other related information.

Data may be provided by you about another individual. In relation to the provision of such Data to MFI you are responsible for ensuring that the consent of the individual(s) to the processing of his or her Data by MFI (and selected third parties) has been fully and fairly obtained.

2.4 Data Provided by Others

MFI may obtain Data from third party sources, including the disclosures referred to below. For example, MFI may obtain additional Data in cases of loans where there has been a default and this information is required to make a judgment on that loan facility.

2.5 Disclosure of Data

For the purposes of assessing your loan application, MFI may share your Data with the following entities for the following reasons:

- 2.5.1 Our introducing Partners, including their appointed personnel and advisers (e.g. credit assessors and / or mentors that they may appoint from time to time to assist in the application process). They will need access to your Data in order to evaluate whether or not you are a suitable candidate for loan finance.
- 2.5.2 External Credit Assessors as appointed from time to time by MFI including their appointed personnel and advisers. They will need access to your Data in order to evaluate whether or not you are a suitable candidate for loan finance.
- 2.5.3 MFI also reserves the right to share your Data with its parent or subsidiary companies.
- 2.5.4 We may also share Data with third parties where we are requested to do so by any regulator or otherwise by law.

2.6 Credit Checking

MFI may conduct a credit search against the Data with the Irish Credit Bureau ("ICB") in order to evaluate whether or not you are a suitable candidate for loan finance. For the avoidance of doubt, you agree that Microfinance Ireland or its agents (including the parties set out above) may carry out a credit check with the ICB (or similar credit references databases), where deemed appropriate, and using your Data for the purpose of credit assessment.

If you decide to proceed with this facility or any other communication with MFI through or in relation to its services, you accept the use by MFI of the Data as indicated above.

For the purposes of the Acts, MFI will be the controller of your Data. Where we engage third parties to process Data on our behalf we will ensure that they do so under contract and within the terms of this Data Protection Notice and the Acts.

8

3. Declaration and Consents:

- I/We hereby confirm that the application form has been completed truthfully and fully and that no material fact with regard to my/our financial position has been omitted from same failure to disclose information or providing incorrect information in this process will result in immediate disqualification from the Microfinance credit application process.
- I/We hereby give Microfinance Ireland the requisite authority to engage with the named bank where
 my/our original application for credit was declined to validate and investigate the details supplied
 above.
- I/We hereby give consent to Microfinance Ireland and/or the Local Enterprise Office, to contact me/us by phone, e-mail or post in connection with my application for microfinance.
- I/We hereby consent for the purposes of the Defamation Act 2009 to any publication in good faith by the Local Enterprise Office to Microfinance Ireland of any statement or opinion in relation to me/us and my/our application for credit.
- I/We are aware that, if our application for this loan facility is successful, I/we will be liable for the loan personally, and/or the promoters and/or the shareholders will have to provide an indemnity, and will be jointly and severally liable for the loan, should the facility approved become unpaid.

Signature(s) of Applicant(s)	
1.	Date: DD/MM/YYYY
2.	Date: DD/MM/YYYY

9