

**APPLICATION FOR A LICENSE TO ENGAGE IN CONNECTICUT
IN THE BUSINESS OF A BUSINESS AND INDUSTRIAL DEVELOPMENT
CORPORATION AS A PARTICIPATING LENDER UNDER THE U.S. SMALL
BUSINESS ADMINISTRATION LOAN GUARANTEE PROGRAMS**

Instructions: Applicant corporations should submit an original and three copies of the completed application, a business plan and any supporting documents along with a check in the amount of \$400 made payable to "Treasurer, State of Connecticut" for the license fee. The license fee is non-refundable. Applicant must report promptly any material changes in the information contained in the application that occurs during the review period for this application. The Banking Commissioner reserves the right to request any additional information. All licenses, unless sooner revoked, expire at the close of business on June 30 next following the date the license is issued. Licenses may be renewed with the annual fee of \$400 on or before June 20 of each year.

Please answer all questions.

1. Full name of Applicant Corporation: _____

2. Address of Applicant's Principal Office:

Street Address _____ County _____

City _____ State Zip Code -

3. Federal Employer Identification Number or, if unavailable, reason or reasons for unavailability:

4. Federal Social Security Account Number or, if unavailable, reason or reasons for unavailability:

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5. Proposed Location of Other Offices:

Street Address _____ County _____

City _____ State Zip Code -

6. Spokesperson for Applicant:

Name _____

Address _____ City _____

State Zip Code -

Telephone Number: ()--

7. Provide the name and full business and residence address of each individual who agrees to serve as director and of each officer, and submit supporting evidence that each is of good character, each competent to perform their functions with respect to the Applicant and, collectively, adequate to manage the business of the Applicant as a business and industrial development corporation.

8. Statement of reasons why the Applicant believes that the licensing of the Applicant will promote the public convenience and advantage.

9. Affiliations:

Will the Applicant be affiliated with a parent holding company? Yes No

If "yes", please provide the following:

Holding company name _____

Holding company location _____

Is parent holding company a bank holding company within the meaning of Section 36-5a of the Connecticut General Statutes:

Yes No

10. Proposed initial capital: (New corporations only)

a. number of shares

projected offering price

total capital \$2,500,000 (minimum)

capital allocation

surplus allocation

b. method of initial stock sale

underwritten

sale by organizers

other (describe)

anticipated offering costs (detail)

11. Provide a detailed list of all fees and expenses associated with and the organization of the Applicant, as well as projected organization and start-up expenses, including the name of the providers of the services involved in such organization.

12. Describe the proposed service area.

13. Detail the economic and other demographic characteristics of the proposed service area for the most recent three-year period which demonstrate a likelihood of success of the Applicant. Information should include such factors as population, manufacturing, industrial, agricultural, retail and service enterprises, retail and wholesale sales.

14. State proposed hours of operation.