KANSAS DEVELOPMENT FINANCE AUTHORITY

FINANCING APPLICATION

**A \$1,000 non-refundable application fee must accompany this application **

1. Applicant (Person or Company):
(Use exact name in which title will be taken)
Provide a brief description of the type of business or business engaged in by the Applicant, and a brief description of the Applicants business structure, e.g. corporation, partnership, limited liability corporation, etc:
Principals: (If a partnership, name partners; If a corporation, name officers and directors)
Describe any material litigation or contingent liabilities involving the Applicant, or if Applicant is a limited liability company, its managers and or members: (Attach information separately, if necessary)
If the Applicant or any of the Applicant's officers, directors, general partners, or if the Applicant is a limited liability company, its managers and/or members, or any other principal of the Applicant has been convicted of a felony or a misdemeanor involving moral turpitude, or is now or has ever been charged with or convicted of any civil or criminal offense relating to the conduct of the business, of the Applicant or any similar person or from the issuance, sale, or solicitation for sale of any type of security, the Application must so state.

If the Applicant is not a publicly held concern, then please attach financial statements prepared in accordance with generally accepted accounting principles by a certified public accountant for the Applicant's 3 most recently completed fiscal years, except that if the Applicant has been in business less than 3 years, such financial statements for such shorter period, if available. Personal financial statements may be presented in nonstandard format and may utilize historical costs with market values allowed as supplemental information (provided information as to how the market values were determined is included). The personal statements must be prepared by a certified public accountant or signed by the Applicant or the Applicant's agent. If the most recent financial statements were prepared more than 6 months prior to the date of the Application, then the Applicant may be required to submit an interim financial statement to the Authority.

If the Applicant is a publicly held concern, then please attach the following:
The Applicant's most recent annual report. The most current rating sheet(s) if any debt securities of the Applicant are rated. The most recent quarterly unaudited financial statements, reports on Forms 10Q and 10K proxy statements.
Has the Applicant or any related person previously been denied financing, whether conventional, tax-exempt, or otherwise for the proposed or similar Project? If yes, please indicate particulars. (Attach explanation separately)
Has the Applicant ever defaulted on any debt obligation including, without limitation, any public or private bond, mortgage note, or debenture? If yes, please indicate particulars. (Attach explanation separately)
2. Does your Organization have a Not-for-profit Status? Yes No If yes, what is the IRS designation? 501 (c)(3) 501 (c)(4) Other If 501 (c3), please indicate year and date that the IRS designation was first received: If other, please explain:
3. Project to be Financed: Check One:Acquisition and Rehabilitation Taxable New Construction Non-Taxable
Project Name:
Please identify the appropriate municipal governing body to whom the K.S.A. 74-8905(c) statutory notice of intent to finance a project must be sent:

Applicant must contact the local officials of the political subdivision in which the Project is to be located, to explain the Project and obtain their approval (verbal is okay). Has this step been taken yet? ____ Yes ____ No

Legal Description:					
5.	App	plicant's Financing Status (Indicate	whether Financia	als are for a Ca	alendar Year or Other Period)
	A)	Total Amount of State and Federa	ederal Funding through SRS or Other Sources:		Sources:
		CY or FY 20 \$	CY or FY 20_	\$	CY or FY 20 \$
	B)	Total All Revenues:			
		CY or FY 20\$	CY or FY 20_	\$	CY or FY 20 \$
	C)	Total Assets	CY or FY 20_	\$	_
	D)	Total Liabilities	CY or FY 20_	\$	_
	E)	Name, Address and Phone Numb	er of Applicant's	Certified Publi	ic Accountant (CPA) Firm
6. PR (dence of Proper Zoning attached: (OSED BONDS:	APPLICATION WI	LL NOT BE PRO	OCESSED WITHOUT SUCH EVIDENCE)
7.	_	pected Date to Close Financing:			_
	-	pected Date to Start Project:			_
	_	pected Date to Complete Project:			_
		cicipated Interest Rate:			_
		m of Bonds to be issued:			_
	Des	scribe credit enhancement if			_
	app	licable:			
	Pro Dat	posed Bond Sale and Issuance te:			
Exp	ecte	ed Type of Bond Sale: Check One:	Private Place	ement P	rublic Sale

8.	Number and type of temporary (i.e., construction) and permanent jobs created:	
9.	How is the economic base of community and sta assisted). Describe fully and in detail, include f	ate assisted? (i.e., How is the low-income or elderly person easibility study, if available.
10.	Estimated Project Cost: (Please indicate which Related persons):	costs, is any, have previously been incurred by Applicant or
	Land Costs (excluding any buildings) \$	Building Costs on existing land \$
	Construction or Rehabilitation costs (please	e specify components of more than \$100,000):
		\$
		<u> </u>
		\$
	Design (architect, engineer)	\$
	Financing Costs	\$
	Legal Costs	\$
	Marketing Costs	\$
	Administrative Costs	\$
	Other Costs:	\$
		\$
		\$
	TOTAL CONSTRUCTION AND ADMINI	ISTRATIVE \$

TOTAL	PROJECT COSTS	\$
Source of	of Funds for Costs:	
	Bonds issued by KDFA	\$
	Equity	\$
	Grants	\$
	Tax Credits from the Kansas Department of Commerce	\$
	Other (please specify)	\$
TOTAL		\$
11.	Proposed Effect on Taxes:	
	Present Property Tax Base:	\$
	Property Taxes After Completion:	\$
	Property Tax Increase:	\$
	Estimated Sale Taxes During Construction	\$
12.	Projected Project (KDFA) Loan Terms:	
	Principal Amount	\$
	Interest Rate:FixedVariable	\$
	Term	\$
	Amortization: Level Balloon	
13.	Has project been appraised: Yes No	
	If Yes, the appraised value of the project Name, Address and Phone Number of Appraiser	\$

	Security for Loan:					
	Project Mortgage:YesNo Assignment of Project Rents:YesNo					
	1 st or 2 nd Mortgage:					
	Personal Guaranties: Yes No FHA Mortgage Insurance: Yes No					
	Of Whom:					
	Government Assistance: Yes No					
	If "Yes", what type:					
	Other sources, revenues from any other public or private sources, contributions or other financial assistance from the state or federal government:					
Describe any assurances or guarantees expected to be provided with respect to construct	Describe any assurances or guarantees expected to be provided with respect to construction of the Project:					
	Other (if any such as hand surety hand insurance letter of credit, colleteral pledge, grants):					
	Other (if any, such as bond surety, bond insurance, letter of credit, confactral piedge, grants).					

15. Name and Address of Participating Professionals:

Bond Trustee: (if any)
Name:
Address:
Telephone: ()
E-mail:
Company Counsel:
Name:
Address:
Telephone: ()
E-mail:
Borrower Contact Person:
Name:
Address:
Telephone: ()
E-mail:
Other:
Name:
Address:
Telephone: ()
E-mail: