Date

Name of Business:       City:       State:    Zip:

Contact Information – Name:       Phone:       Email:

Existing Business  Startup

Please see the list of documents that will be required for the full loan application prior to answering this questionnaire at [iowaeda.com/small-business/targeted-small-business/tsb-loans/.](file:///C:\Users\KKappelm\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\DTAPDD7Z\www.iowaeda.com\small-business\targeted-small-business\tsb-loans\)

1. **Describe the company, the business’ industry, its products, and the customer base.**

1. **The business is at least 51% or more owned by one or more of the following categories (check all that apply):**

Woman         
Minority

Individual with a Disability

Service-Disabled Veteran

1. **Are you TSB certified?**

1. **Describe the intended use of funds from a TSB loan.**

1. **Do you need more than $50,000 for this loan? (Answer Yes or No. If Yes, please include the total amount you are requesting.)**

1. **Have you started your business? If yes, when did you start operating your business? If no, when will the business start?**

1. **Does the business have a business plan?**

1. **Does the business have a business bank account?**

1. **Does the business have financial statements (P&L and Balance Sheet)?**

1. **Does the business have a website?**

1. **What is the owner/s source(s) of income?**

1. **Have you filed personal taxes in the last 2 years?**

1. **Have you filed business taxes in the last 2 years? (if applicable)**

1. **Have/Has any of the owner(s) filed for bankruptcy in the last 3 years?**