



CAYMAN ISLANDS DEVELOPMENT BANK

## AGRI-BUSINESS LOAN - APPLICATION FORM

To Be Completed by Bank	
Date Application reached Credit Department:	Officer Assigned:
Previous or Existing CIDB Loan: \$	LAR assigned:

### LOAN REQUEST

<b>Name</b>	
<b>Mailing Address</b>	
<b>Home Address</b>	
<b>Date of Birth</b>	
<b>Phone Contacts</b>	(M)                      (H)                      (W)

**Agri-business funding is required for the purposes as indicated:**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Agro-Processing<br><input type="checkbox"/> Agro-Tourism<br><input type="checkbox"/> Animal Feeds<br><input type="checkbox"/> Art and Crafts<br><input type="checkbox"/> Bee-Keeping<br><input type="checkbox"/> Crop production | <input type="checkbox"/> Dairy Products<br><input type="checkbox"/> Fishing<br><input type="checkbox"/> Floriculture<br><input type="checkbox"/> Food Catering<br><input type="checkbox"/> Hydroponics<br><input type="checkbox"/> Input Supplies | <input type="checkbox"/> Livestock Production<br><input type="checkbox"/> Marketing<br><input type="checkbox"/> Seasonings<br><input type="checkbox"/> Shop outlets<br><input type="checkbox"/> Wood Working<br><input type="checkbox"/> Other..... |
|---|---|---|

**Also indicate the nature of the required funding**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Project Establishment<br><input type="checkbox"/> Project Expansion<br><input type="checkbox"/> Backyard Gardening | <input type="checkbox"/> Capital Purchases<br><input type="checkbox"/> Grow Box initiative<br><input type="checkbox"/> Working Capital | <input type="checkbox"/> Other<br>..... |
|---|--|---|

<b>This is expected to cost:\$</b>	<b>I am willing to contribute:\$</b>	<b>I am asking CIDB to lend: \$</b>
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Breakdown of the loan requested	Amount
1.	
2.	
3.	
<b>TOTAL</b>	

**GIVE DETAILS OF YOUR ASSOCIATION WITH**

	I SERVED AS	Since	NATURE OF INVOLVEMENT
<b>Department of Agriculture</b>			
<b>Agricultural Society</b>			
<b>Agricultural Grounds</b>			

**BASIC DOCUMENTS TO SUBMIT WITH THIS APPLICATION FORM**

Basic Information	✓	Business Information	✓	Financial Information	✓	Security Information	✓
2 picture IDs (DL & Passport)	✓	Partnership Agreement (witnessed by a Justice of the Peace/Notary Public)	✓	Evidence of your financial contribution	✓	Certified Copy of Land Register	✓
Proof of Caymanian birth/status	✓	Proof of Registration with Department of Agriculture	✓	Past operating Financial Statements	✓	Consent Letter from property owner	✓
Job Letter	✓		✓		✓	Valuation of property	✓



**INCOME STATEMENT FOR APPLICANT AND FAMILY AS AT .....**

Salary from full-time employment		\$	
Salary from the farm		\$	
Other income		\$	
<b>TOTAL INCOME</b>			
<b>EXPENSES (Combined for Applicant &amp; Family)</b>	Living Expenses	Rent or Mortgage	\$
		Food	\$
		Electricity	\$
		Telephone	\$
		Water	\$
		Cable	\$
	Insurance Costs	House	\$
		Life	\$
	Loan Payments	Car	\$
		Education	\$
		Personal	\$
		Business	\$
	Credit Card Payments		\$
	Transportation		\$
	Other Expenses		\$
<b>TOTAL EXPENSES</b>			
<b>SURPLUS (INCOME - EXPENSES)</b>			

**BALANCE SHEET FOR THE BUSINESS AS AT .....**

ASSETS			LIABILITIES & SHAREHOLDERS EQUITY		
<b>Current</b>	Cash in Bank #1	\$	<b>Current Liabilities</b>	Bank overdraft #1	\$
	Investments	\$		Bank overdraft #2	\$
	Inventory/Stock	\$		Accounts payable	\$
	Accounts Receivable	\$		Short-term loan	\$
	Other	\$		Other	\$
	Total – Current Assets	\$		Total – Current Liabilities	\$
<b>Fixed</b>	Office Equipment	\$		Long-term loan#1	\$
	Leasehold Improvements	\$		Long-term loan #2	\$
	Fixtures & Fittings	\$		Home Mortgage	\$
	Vehicle	\$		Personal loan	\$
	Real Estate	\$		<b>TOTAL LIABILITIES</b>	\$
	Total Fixed Assets	\$		Net Worth	\$
<b>TOTAL ASSETS</b>		\$		<b>LIABILITIES &amp; SHAREHOLDERS' EQUITY</b>	\$

**SUMMARY STATEMENT OF INCOME & EXPENSES FOR THE BUSINESS FOR YEAR ENDED .....**

<b>INCOME</b>	Sales -	\$
	Other Income	\$
	<b>Total Income</b>	<b>\$</b>
<b>OPERATING EXPENSES</b>	Rent/Lease payments	\$
	Salaries	\$
	Administrative Expenses	\$
	Utilities	\$
	Repayment of existing debt	\$
	<b>Total Operating Expenses</b>	<b>\$</b>
<b>Surplus/Deficit</b>		<b>\$</b>

**CASH FLOW PROJECTIONS FOR THE BUSINESS FOR**

	ITEMS	FIRST	NEXT
		12 MONTHS	12 MONTHS
<b>CASH INFLOWS (A)</b>	CIDB Loan		
	Your contribution		
	Expected Sales		
	Other Income		
	<b>TOTAL INFLOWS</b>		
<b>CASH OUTFLOWS (B)</b>	Capital Expenses		
	Salaries		
	Administrative Expenses		
	Utilities		
	Repayment of existing debt		
	<b>TOTAL OUTFLOWS</b>		
<b>NET CASH FLOW (A-B)</b> (Total Inflows minus Total Outflows)			

**MAIN APPLICANTS' CREDIT INFORMATION AT OTHER INSTITUTIONS**

Financial Institution	Type of Account Held	Since	a/c #	Balance \$
	<input type="checkbox"/> Savings <input type="checkbox"/> Chequing <input type="checkbox"/> Loan <input type="checkbox"/> CD <input type="checkbox"/> Credit Card			
	<input type="checkbox"/> Savings <input type="checkbox"/> Chequing <input type="checkbox"/> Loan <input type="checkbox"/> CD <input type="checkbox"/> Credit Card			
	<input type="checkbox"/> Savings <input type="checkbox"/> Chequing <input type="checkbox"/> Loan <input type="checkbox"/> CD <input type="checkbox"/> Credit Card			

**DECLARATION**

I hereby confirm that all the foregoing information provided on this loan application is true and correct and have been made by me knowing that this information will be used by the Cayman Islands Development Bank (CIDB) in consideration of the loan.

I also undertake to notify the CIDB immediately of any situation(s), or event that may change my/our circumstances and which may affect this application or the loan if granted.

I understand too that are charges to be applied in connection with this loan. I have been notified of these charges and have no objections to them.

I also authorize you to obtain any information you may require relative to this loan application from any relevant source, and where necessary, I/We authorize my/our Bankers and Employer(s) to provide you with information relevant to this application.

Applicant: ..... Date: .....

Customer Identification Code



## Customer Profile

TO BE SUPPORTED BY (A) CERTIFIED COPY OF DRIVER'S LICENSE & (B) CERTIFIED COPY OF PASSPORT PICTURE PAGE

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Gender \_\_\_\_\_ Marital Status \_\_\_\_\_ # of Dependents \_\_\_\_\_

Date of Birth (dd/mm/yy): \_\_\_\_\_ Place of Birth \_\_\_\_\_

Cayman Status by:  Birth  Status  Naturalization Details: \_\_\_\_\_

Drivers License # \_\_\_\_\_ Passport # \_\_\_\_\_ Verified  Yes  No

Mailing Address:

Residential Address:

P.O. Box \_\_\_\_\_

Employer \_\_\_\_\_ Position Held \_\_\_\_\_ How Long \_\_\_\_\_

Monthly Income \$ \_\_\_\_\_ Main Commercial Banker: \_\_\_\_\_

Phone Contacts: Work: \_\_\_\_\_ Mobile: \_\_\_\_\_ Home: \_\_\_\_\_

Email address: \_\_\_\_\_ Fax number: \_\_\_\_\_

### Emergency Contact or Next of Kin

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Home Address: \_\_\_\_\_

Phone Contacts: Work: \_\_\_\_\_ Mobile: \_\_\_\_\_ Home: \_\_\_\_\_

Client Specimen Signature (please sign in box)

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(FOR CIDB USE ONLY)

Data	By	Date
Received		
Inputted		
Verified		

Form revised 07/08