KANSAS
DEVELOPMENT FINANCE
AUTHORITY

FINANCING 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 businesses engaged in by the Applicant, and a brief description of the Applicant’s 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 the 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 annual 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 and 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 not, 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(c)(3), 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:

4. Description of Project (include public purpose of Project) and Location (Address): ______________________________
_____________________________________________________________________________________________________
_____________________________________________________________________________________________________

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. Applicant's Financing Status (Indicate whether Financials are for a Calendar Year or Other Period)

A) Total Amount of State and Federal Funding through SRS or Other 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 Number of Applicant's Certified Public Accountant (CPA) Firm
   ________________________________________________________________
   ________________________________________________________________

6. Evidence of Proper Zoning attached: (APPLICATION WILL NOT BE PROCESSED WITHOUT SUCH EVIDENCE)

PROPOSED BONDS:

7. Expected Date to Close Financing: ______________________________
   Expected Date to Start Project: ______________________________
   Expected Date to Complete Project: ______________________________
   Anticipated Purchasers: ______________________________
   Anticipated Interest Rate: ______________________________
   Term of Bonds to be issued: ______________________________
   Describe credit enhancement if applicable: ______________________________
   Proposed Bond Sale and Issuance Date: ______________________________

   Expected Type of Bond Sale: Check one: ___ Private Placement ___ Public Sale

8. Number and type of temporary (i.e., construction) and permanent jobs created: ______________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
9. How is the economic base of community and state assisted? (i.e., How is the low-income or elderly person assisted). Describe fully and in detail, include feasibility study, if available.

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

10. Estimated Project Cost: (Please indicate which costs, if any, have previously been incurred by Applicant or Related persons):

   
   Land Costs (excluding any buildings)................................................................................ $____
   Building Costs on existing land......................................................................................... $____

   Construction or Rehabilitation costs (please specify components of more than $100,000):
   _____________________________________________ $____
   _____________________________________________ $____
   _____________________________________________ $____
   _____________________________________________ $____
   _____________________________________________ $____

   Design (architect, engineer)........................ $____
   Financing Costs........................................ $____
   Legal Costs........................................... $____
   Marketing Costs..................................... $____
   Administrative Costs............................... $____
   Other Costs:______________________________ $____
   _____________________________________________ $____
   _____________________________________________ $____
   _____________________________________________ $____

   TOTAL CONSTRUCTION AND ADMINISTRATIVE ....................................................... $____

   TOTAL PROJECT COSTS.......................................................................................... $____

   Source 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 Sales Taxes During Construction: $________

12. Projected Project (K DFA) Loan Terms:
   Principal Amount ................................................................. $________
   Interest Rate: ___ Fixed ___ Variable ......................................... $________
   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
   ____________________________________________________________________
   ____________________________________________________________________
   ____________________________________________________________________

14. Security for Loan:
   Project Mortgage: ___ Yes ___ No  Assignment of Project Rents: ___ Yes ___ No
   1st or 2nd 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 construction of the Project: ____________________________________________________________________
15. Name and Address of Participating Professionals:

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<th>Underwriter or financial institution which will purchase the bonds:</th>
<th>Bond Trustee: (if any)</th>
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