

**SD VALUE ADDED FINANCE AUTHORITY**

**523 East Capitol Avenue**

**Pierre SD 57501**

**(605) 773-5436**

**Fax (605) 773-3481**

FOR OFFICE USE ONLY

Project No. \_\_\_\_\_

Application Received: \_\_\_\_\_

\$200 Application Fee Received: \_\_\_\_\_

Agri Business Bond Program

Livestock Nutrient Management Bond

**Part A - GENERAL BORROWER INFORMATION (To be completed by Borrower)**

1. Name/Partnership/Corporation: \_\_\_\_\_

Address \_\_\_\_\_ County \_\_\_\_\_

City/State/Zip \_\_\_\_\_

2. Contact Person/Title \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

3. If Borrower is a partnership or limited partnership, list partners or general partners:


4. If Borrower is a corporation, please list the state of incorporation: \_\_\_\_\_

5. If Corporation is a not-for-profit corporation, provide purpose of the not-for-profit corporation and date of IRS determination letter or date determination letter applied for: \_\_\_\_\_


6. Is the Borrower currently qualified to transact business with the State of South Dakota  Yes  No

**Part B - PROJECT INFORMATION (To be completed by Borrower)**

1. This project qualified for financing pursuant to the Agri Business Bonding program (check one):

- The Project consists of agricultural manufacturing/processing
- The project consists of animal solid waste management
- The project qualifies as a [501 (c) (3)]

2. Amount of Bond Request: \$ \_\_\_\_\_

3. General Project description for use of the Bond Proceeds. Animal solid waste management projects must provide a list of all project costs and general description of project costs as related to solid waste management functions (if more space is needed please attach as Exht. A): \_\_\_\_\_




7. Have any capital costs to be repaid from Bond Proceeds been expended and if so, how much?

No  Yes In the amount of \$  Date(s) of Expenditure

(There are certain IRS Limitations for costs eligible for reimbursement.)

8. Has the Applicant previously received tax-exempt bond financing from the Value Added Finance Authority, or a political subdivision of the State of South Dakota, and, if so, describe the previous financing and any remaining tax-exempt financing amounts outstanding:

9. Approximately how many permanent or part-time jobs, if any, will be provided as a result of the Project:

10. Provide an explanation of any benefits the Project will have on the community:

**Part C - INFORMATION REGARDING SALE OF THE BONDS (To be completed by the applicant and bond purchaser, to the extent known.)**

1. Type of Bond Issue, please check one:

Bank Loan  Individual Investor  Contract Sale  Public Sale

2. Bond Purchaser:

Bank/Contract Seller/Individual Investor   
Contact Person/Title   
Address  City/State/Zip   
Phone  Fax  Email

3. Provide the interest rate (actual or estimate) for financing of the Project:

Fixed Rate   Variable Rate  Index

4. Proposed Terms of Loan

Years  Repayment

**PART D - COUNSEL/ADVISORS TO THE FINANCING (To the extent presently known)**

1. Counsel to the Borrower:

Firm Name			
Contact Person/Title			
Address	City/State/Zip		
Phone	Fax	Email	

2. Other (please specify):

Firm Name			
Contact Person/Title			
Address	City/State/Zip		
Phone	Fax	Email	

Name (Printed or Typed)			
Title			
Date		Signature	

Name (Printed or Typed)			
Title			
Date		Signature	

**NOTE: IN ORDER FOR THIS APPLICATION TO BE CONSIDERED BY THE BOARD OF THE VALUE ADDED FINANCE AUTHORITY, AN EXECUTED COPY OF THIS FORM, ALONG WITH A NON-REFUNDABLE APPLICATION FEE OF \$200.00, MUST BE SUBMITTED TO THE VALUE ADDED FINANCE AUTHORITY 523 EAST CAPITOL AVE., PIERRE, SD 57501.**