



Nonprofit Bridge Loan Program Application

Thank you for your interest in Hebrew Free Loan Society (HFLS) Nonprofit Bridge Loan Program. This application is the first step in requesting an interest-free Nonprofit Bridge Loan from HFLS. The information provided will assist us in the evaluation of your needs and tailor the loan to your organization.

Please answer all questions as completely and accurately as possible and provide any available attachments. If you have any questions or need assistance, please contact Daren Scott, HFLS Director of Finance & Administration, at 212-687-0188 x8211 or email at dscott@HFLS.org.

I. Organization Information

1. Legal Name of Organization:

2. Federal Employer Identification (EIN) #:

3. Address:

City: State: Zip:

4. Year organization was founded:

5. Website:

6. Contact Name: Title:

Phone: Fax: Email:

7. Executive Director:

Phone: Fax: Email:

8. Number of staff employed by the organization:

Full-time: Part-time: Full Time Equivalent:

II. Brief Overview of Organization

9. Which best describes your core programs? (Check one)

- Arts/Culture
- Childcare
- Community Center / Recreation
- Education
- Community Development
- Health
- Religious
- Social Services
- Umbrella / Policy/Association
- Other

10. Annual operating budget:

11. All applicants must be UJA grantees and not Network agencies. What year did your organization receive funding and from which commission?

III. Request (Term and request amount may be adjusted during underwriting process)

1. How much do you wish to borrow?

2. Why are the funds needed?

3. When will the funds be needed? Please complete **Attachment B: Cash Flow**

4. Requested time period for loan repayment (in months)

5. What are the sources of funding for repayment of this loan? (check all that apply)

- Reliable major gifts from individual donors
- Grants
- Contracts
- Fees for service



IV. Financial Information

1. Does your organization have outstanding debt or a line of credit? Yes No

If yes, please complete **Attachment A: Outstanding Debt**

2. Has your organization received funding from foundations, or been awarded contracts from government agencies in the past two years? Yes No

If yes, please complete **Attachment A: Funder References**

V. Documentation

The requested documents allow us to better assess your application. Please check the box next to all documents that are available to your organization and submit them with your application. Documents that are not available at this time may be requested during the underwriting process. We request that all materials that are available in electronic form be submitted via email to Daren Scott, Director of Finance and Administration at dscott@hfls.org.

1. General Information:

- Organization's mission statement and By-laws
- Audited financial statements for the recent two fiscal years, with accountant's management letter
- IRS determination letter
- List of board of directors, including board member professional affiliations
- Resumes or bios for key management
- Cash flow projection of operating revenues and expense by month for this fiscal year (Note: If your organization is in the final quarter of its current fiscal year, please include the budget for next year (**Attachment B: Cash Flow**))

- Two years historical cash-flow by month (**Attachment B: Cash Flow**)
- Operating budget (income and expense actual vs. projection) for current fiscal year. Note: If your organization is in the final quarter of its current fiscal year, please include the budget for next year.
- Annual Operating budget-to-actual comparison for the past two years
- List of outstanding debt, references (**Attachment A: Outstanding Debt**)
- Government contracts
- Grant award letters and pledges



**Please return your completed form and attachments to:
Daren Scott, Director of Finance & Administration**

VIII. Certification

Your board of directors has authorized this application: Yes No

The information provided on this application and the accompanying documents are, to the best of my knowledge and belief, true, correct and complete.

Name of Authorized Official (please print) Signature

Title: _____

Date: _____

Attachment A Outstanding Debt & References

i) Outstanding Debt

(Please make additional copies of this page if necessary)

Lender Name	Type of Debt	Date of Loan	Original Amount	Interest Rate	Amount Outstanding	Collateral	Maturity Date

Do any of the loans listed above have any prohibitions or limitations on debt? If yes, please explain.

ii) Funder References

Please provide names and contact information for funders whom HFLS may contact for references. Funders may include foundations and government agencies as appropriate.

Funder Name	Address	Contact name	Contact telephone number	Relationship	Length of relationship	Current Funder (Y/N)



Attachment B
Cash Flow Summary

Insert cash flow template (see Projected Cash Flow Template document)