

**Please check you are eligible to apply:**

- Does your business employ fewer than ten people.
- Do you have an annual turnover and/or balance sheet of less than €2m.

## Application Checklist

Essential Information to accompany your application;	Tick ✓
Your Application Form <b>fully</b> completed	
Business Plan	
Financial Projections for 1 year as follows:	
- Cash flow on month-by-month basis for the first 12 Months	
- 1 year Summary Profit & Loss	
Latest 6 months personal bank account statements	
Irish Credit Bureau Report for main promoters (this can be requested at <a href="http://www.icb.ie">www.icb.ie</a> )	
Existing businesses must also supply:	
Latest 6 months business bank account statements	
Recent management accounts	
Certified/Audited accounts	
Current aged Debtors, Creditors & Stock listings	

*If you have any queries on the above, or require assistance, please contact us at:*

Microfinance Ireland, 13 Richview Office Park, Clonskeagh Road, Dublin 14  
Tel: 01 260 1007 Email: [info@microfinanceireland.ie](mailto:info@microfinanceireland.ie) [www.microfinanceireland.ie](http://www.microfinanceireland.ie)

## Part 1: Business Details

Please tell us about your business. This information will assist us in providing a professional timely response.

Applicant Business Name	Primary Business Activity
Trading Name (if different from above)	Business/Company Registration No.
Business Address	In Business for      Y      Years      M      Months
Contact Person	No. of Employees      As at   D   D   /   M   M   /   Y   Y
Email	No. of Employees expected in 12 months
Telephone	Business Type      Sole Trader      Partnership      Ltd. Co.
Mobile	How did you hear about us?      LEO      LDC / ILDN
Do you have a loan with Microfinance Ireland or have you applied to Microfinance Ireland previously?	Media      Credit Union
Yes      No	Bank      Other
	(Please Specify)      (Please Specify)

## Business Ownership Details

List the names of all individuals who ultimately own or control 25% or more of the shares or voting rights in the Company/Partnership or otherwise exercises control over the management of the Company/Partnership.

1. Owner Name	Director	Yes	No	Irish Resident	Yes	No
Address				Date of Birth	D   D   /   M   M   /   Y   Y	
Occupation				Percentage Shareholding		%
<hr/>						
2. Owner Name	Director	Yes	No	Irish Resident	Yes	No
Address				Date of Birth	D   D   /   M   M   /   Y   Y	
Occupation				Percentage Shareholding		%
<hr/>						
3. Owner Name	Director	Yes	No	Irish Resident	Yes	No
Address				Date of Birth	D   D   /   M   M   /   Y   Y	
Occupation				Percentage Shareholding		%
<hr/>						
4. Owner Name	Director	Yes	No	Irish Resident	Yes	No
Address				Date of Birth	D   D   /   M   M   /   Y   Y	
Occupation				Percentage Shareholding		%

List below any corporate shareholder that ultimately owns or controls 10% or more of the shares or voting rights in this Company or otherwise exercises control over the management of this Company

1. Company Name	% of shares owned in the Company
Registered No.	%
<hr/>	
2. Company Name	% of shares owned in the Company
Registered No.	%

Please indicate who is the Company Secretary

## Part 2: Application Details

Amount Required  
(Max €25,000)

Repayment Period

Years

Y

Months

M

Purpose of Facility e.g.  
Working Capital Loan

Describe briefly the purpose of your loan and what financial input is being provided by you directly or otherwise and the source of these funds. Please let us know if your business is supported by Enterprise Ireland, a Local Enterprise Office, Business Angels and / or other Specialist Funds.

Planned Expenditure:	Amount	Source of Funds	Amount
		Own Funds	
		Family Funds	
		Other Investors	
		Bank Loan	
		Microfinance Ireland Loan	
		Grant Support	
		Other	
<b>Total Expenditure</b>		<b>Total Funding</b>	

Details of Expenditure:

### Referees

Please provide full details of one business and one personal contact that we may contact for a reference (please provide name, address and telephone numbers)

Business Contact	
Name	
Address	
Telephone	
Mobile	

Personal Contact	
Name	
Address	
Telephone	
Mobile	

## Business Borrowing & Savings Details (Existing Businesses Only)

Account Type <small>(Current, Deposit, Mortgage, Loan, Credit Card, Leasing/Hire Purchase, Investments, Shares, Etc.)</small>	Financial Institution	Amount Held/ Outstanding	Monthly Repayment	Final Repayment Date	Purpose of Loan

Note: Please provide details of arrears of repayments and arrangements in place on any of the above:

Revenue		
Tax Status (Tax up to date?)	Yes	No
Is a Revenue Agreement in place?	Yes	No
Monthly Amount of Revenue Agreement		

Are you a customer of a Local Enterprise Office? If so, provide details below.

**Local Enterprise Office (LEO) Contact:**

Name:

Business Support Received:

Grant Aid Received:

**State Aid**

Have you received any state aid if so provide details below

Provider	Date	Amount (€)

## Part 3: Personal Details

Your personal details are also important to us and while it is critical to understand your business, it is also important to understand its owners. These details will help us meet your current needs.

### Primary Business Owner

Name  
Address  
  
Previous Address  
(if less than 3 years  
at current address)

#### Contact Details

Email  
Landline  
Mobile

Date of Birth

D D / M M / Y Y

PPSN

No of Dependants

Age Range From To

Residential Status Owner Tenant  
Living with Parents Other

Number of Years at Address

Estimated Value of Home

€

Are you currently employed? Yes No

If yes, Annual Salary

€

If no, for how long?

Y

Do you qualify for Back to Work Enterprise Allowance (BTWEA) / other State support

Yes No If yes, please provide details with your business plan.

Have you ever been bankrupt, declared insolvent or had a judgement registered against you ?

Yes No If yes, please provide details with your business plan.

## Personal Financial Details

### Name (Primary Business Owner)

Asset Type	Asset Value	Liability Type	Amount	Repayment Arrangements
Cash		Bank Overdraft		
Property		Mortgage		
Other		Personal Loans		
Cars/Vehicles		Other Loans		
Deposits/Investments		Hire Purchase/Leasing		
Shares		Credit Card		
Other		Other		
Totals		Totals		

### Personal Income Statement

Income Type	Amount	Income Source & Frequency
Salary		
Pension		
State Assistance		
Other		
Other		
Total		

## Personal Details

### Secondary Business Owner

Name	No of Dependants	Age Range	From	To
Address	Residential Status	Owner	Tenant	
		Living with Parents	Other	
Previous Address (if less than 3 years at current address)	Number of Years at Address	Estimated Value of Home	€ <input type="text"/>	
Contact Details	Are you currently employed?	Yes	No	
Email	If yes, annual salary	€ <input type="text"/>		
Landline	If no, for how long?	Y		
Mobile	Do you qualify for Back to Work Enterprise Allowance (BTWEA) / other State support	Yes	No	If yes, please provide details with your business plan.
Date of Birth		D	D	/ M M / Y Y
PPSN	Have you ever been bankrupt, declared insolvent or had a judgement registered against you ?	Yes	No	If yes, please provide details with your business plan.

## Personal Financial Details

### Name (Secondary Business Owner)

Asset Type	Asset Value	Liability Type	Amount	Repayment Arrangements
Cash		Bank Overdraft		
Property		Mortgage		
Other		Personal Loans		
Cars/Vehicles		Other Loans		
Deposits/Investments		Hire Purchase/Leasing		
Shares		Credit Card		
Other		Other		
Totals		Totals		

### Personal Income Statement

Income Type	Amount	Income Source & Frequency
Salary		
Pension		
State Assistance		
Other		
Other		
Total		

## 1. Data Protection

I/We acknowledge that I/We have read, understand and agree to be bound by the following terms governing data protection.

### 1.1 Microfinance Ireland as Data Controller

In consideration of Microfinance Ireland Limited ("MFI") considering your proposal for loan finance and for any facilities that may be made available to you, it will be necessary for you to provide certain data (including personal data within the meaning of the Data Protection Acts 1988 and 2003 (the "Acts")) in order to allow MFI and parties processing data on behalf of MFI to assess your proposal/application. In performing its functions, MFI will be required to gather personal data ("Data") on the individual seeking funding (this will also be the case where an individual(s) is/are promoting a company which is seeking funding).

### 1.2 How we use your Data

In compliance with the Acts, Data gathered by MFI and further disclosed by them to selected third parties (see below) will be held securely and confidentially. The Data will only be used for the purposes of the functions and activities of MFI. MFI will only process Data (and disclose such Data to selected third parties) in fulfilment of its business activities, being to provide loan finance and to receive repayments of loan finance.

### 1.3 Data you Provide

MFI captures Data which is provided directly by the proposed borrower/the borrower. The Data about the (proposed) borrower is typically gathered by MFI through this application form. This Data would include name(s), address(es), phone number(s), email address(es), date(s) of birth, details of the business including personal contributions, loan amounts, interest rates, repayment schedules and any other related information.

Data may be provided by you about another individual. In relation to the provision of such Data to MFI you are responsible for ensuring that the consent of the individual(s) to the processing of his or her Data by MFI (and selected third parties) has been fully and fairly obtained.

### 1.4 Data Provided by Others

MFI may obtain Data from third party sources, including the disclosures referred to below. For example, MFI may obtain additional Data in cases of loans where there has been a default and this information is required to make a judgment on that loan facility.

### 1.5 Disclosure of Data

For the purposes of assessing your loan application, MFI may share your Data with the following entities for the following reasons:

- 1.5.1 Our Partners, including your Local Enterprise Office and their appointed personnel and advisers (e.g. credit assessors and / or mentors that they may appoint from time to time to assist in the application process). They will need access to your Data in order to evaluate whether or not you are a suitable candidate for loan finance.
- 1.5.2 External Credit Assessors as appointed from time to time by MFI including their appointed personnel and advisers. They will need access to your Data in order to evaluate whether or not you are a suitable candidate for loan finance.
- 1.5.3 MFI also reserves the right to share your Data with its parent or subsidiary companies.
- 1.5.4 We may also share Data with third parties where we are requested to do so by any regulator or otherwise by law.

### 1.6 Credit Checking

MFI may conduct a credit search against the Data with the Irish Credit Bureau ("ICB") in order to evaluate whether or not you are a suitable candidate for loan finance. For the avoidance of doubt, you agree that Microfinance Ireland or its agents (including the parties set out above) may carry out a credit check with the ICB (or similar credit references databases), where deemed appropriate, and using your Data for the purpose of credit assessment.

If you decide to proceed with this facility or any other communication with MFI through or in relation to its services, you accept the use by MFI of the Data as indicated above.

For the purposes of the Acts, MFI will be the controller of your Data. Where we engage third parties to process Data on our behalf we will ensure that they do so under contract and within the terms of this Data Protection Notice and the Acts.

## 2. Declaration and Consents:

- I/We hereby confirm that the application form has been completed truthfully and fully and that no material fact with regard to my/our financial position has been omitted from same – failure to disclose information or providing incorrect information in this process will result in immediate disqualification from the Microfinance credit application process.
- I/We hereby give Microfinance Ireland the requisite authority to engage with the named bank where my/our original application for credit was declined to validate and investigate the details supplied above.
- I/We hereby give consent to Microfinance Ireland and/or the Local Enterprise Office, to contact me/us by phone, e-mail or post in connection with my application for microfinance.
- I/We hereby consent for the purposes of the Defamation Act 2009 to any publication in good faith by the Local Enterprise Office to Microfinance Ireland of any statement or opinion in relation to me/us and my/our application for credit.
- I/We are aware that, if our application for this loan facility is successful, I/we will be liable for the loan personally, and/or the promoters and/or the shareholders will have to provide an indemnity, and will be jointly and severally liable for the loan, should the facility approved become unpaid.

Signature(s) of Applicant(s)

1.

Date:  /  /

Please sign hard copy  
of Application Form

2.

Date:  /  /