



# Loan Application Form (Business)

**P.O.Box 306**  
**Building #6**  
**Harbour Industrial**  
**Estate,**  
**Barbados W.I.**  
**(246) 228 2772**  
[bybt@youthbusiness.bb](mailto:bybt@youthbusiness.bb)  
[www.youthbusiness.bb](http://www.youthbusiness.bb)

**Personal Information**

**(Please attach photo of applicant)**

Surname:	First Name:	Middle Name:	Alias: (Nick Name)	Male [ ] Female [ ]
Maiden Name:	Mother's Name:			Marital Status: M [ ] S [ ] D [ ] W [ ]
		No. of Children/Dependents?		
Date of Birth:		Country of Birth:		
Are you eligible to work in Barbados?		Nat'l. Ins. No.: Barbados Nat'l. I.D. No.		
Permanent Address:		Res. Tel.:	Other Tel.:	
		Cell #:		
		Email:		
		Website:		
Other Contact Address:				
Have you attempted to obtain financing elsewhere?		If yes, provide details:		

**ARE THERE ANY JUDGEMENTS PENDING AGAINST YOU? YES [ ] NO [ ] If yes, provide details on separate page.**

**Secondary Education**

School(s) attended	Years attended From To	Academic achievement - attach copies of School Certificates. State other interests - sports, drama, community involvement etc.
--------------------	---------------------------	---

**Post Secondary Education/Training**

College/Institution	Years attended From To	Specialization - attach copies of Certificates/Diplomas
Are you attending a School, College, University or undertaking training of any kind at present? Yes [ ] No [ ] If yes, please give details		
Have you studied at the Youth Entrepreneurship Scheme? Yes [ ] No [ ]		
Barbados Vocational Training Board? Yes [ ] No [ ]		
Barbados Youth Service? Yes [ ] No [ ]		
Do you intend to undertake any full-time educational or training studies within the next three years? Yes [ ] No [ ] If yes, please provide details.		
Are you computer literate? Yes [ ] No [ ] List software programmes in which you have competency.		

# Barbados Youth Business Trust

## Employment History over the last 6 years (If necessary please attach resume)

Name of Organization: Address:  Position: Responsibilities:	Telephone: Fax:  Name of Supervisor: Term of Employment. <b>From:</b> Month      Year <b>To:</b> Month      Year
Name of Organization: Address:  Position: Responsibilities:	Telephone: Fax:  Name of Supervisor: Term of Employment. <b>From:</b> Month      Year <b>To:</b> Month      Year
Are you presently unemployed? Are you receiving Social Assistance?	
If yes, how long have you been unemployed?	

## Mentor Information

Surname: Address:  Employed or self employed? Business Address:  How long have you known your mentor? Please attach a resume of your Mentor	First name and initials:  Position: Business Telephone: Home Telephone:  Relationship to your Mentor:
--	---

## Business Information:

<b>Name of Business:</b>  <b>Address of Business:</b>  <b>Type of Ownership: (Attach details)</b>  <b>Name of Owners/Partners:</b>  <b>Where did you receive your initial financing?</b>  <b>Business Bank Account No.:</b>  <b>Name &amp; Address of Bank:</b>  Financial information/statements for the last two years of operation must be submitted.	<b>Business Telephone:</b>  <b>Sole Proprietorship:</b> [ ] <b>Partnership:</b> [ ] <b>Corporation:</b> [ ] <b>Franchise:</b> [ ]  <b>Involvement:</b> Full Time [ ] Part Time [ ]  <b>Year Business Started:</b>  <b>Duties:</b>  <b>Loan amount requested:</b>
--	--

**Personal Financial Information**

Name and Branch address of your bank: Details of Liabilities:					
Individual/Institution holding debt	Amount of Original Loan	Current Loan Balance	Monthly Payments	Loan Due Date	Purpose of Loan
<b>Total Loans Owning:</b>					

**Personal Financial Statement as at: 2007**

		Assets		Liabilities
Cash & Bank Bals.:			Total loans (from above)	
CSV Life Ins.			Credit cards	
Real Estate:			Other debts	
Vehicles:				
Furnishing/Fixtures:				
Other				
TOTAL ASSETS			TOTAL LIABILITIES	
Net Worth = Total Assets - Total Liabilities		\$		

**References:** Name 1 Relative who does not live in the same household and 1 neighbour who has known you for at least 2 years.

Surname:	First Names:
Relationship:	Occupation:
Address:	
Res. Telephone:	Bus. Telephone:
Surname:	First Names:
Relationship:	Occupation:
Address:	
Res. Telephone:	Bus. Telephone:

I certify that all of the information provided is complete and accurate to the best of my knowledge.  
I have disclosed all of the pertinent financial information and I authorize BYBT to conduct the necessary credit investigation and contact the respective financial institutions.

.....  
Signature of Applicant

.....  
Date

N.B. All required documentation must be attached to this application.

## LOAN REQUIREMENTS

1. Completed loan application form, all fields properly filled in, with N/A where necessary.
2. If two persons or more are to be involved in the ownership of the business, then all persons must complete separate application forms.
3. Attach 1 passport size photo to Loan Application form.
4. Two written references:
  - a. *Minister of Religion*
  - b. *Certified Headmaster/Teacher*
5. Quotations of anything to be purchased with the loan for your business.
6. Cover letter outlining :
  - a. *Introduction of self and business*
  - b. *Services offered by your business*
  - c. *Reason(s) for approaching the Trust*
  - d. *The amount to be borrowed*
  - e. *What it will be used for*
7. All business loans requests require a Business Plan.
8. All business plans should include projected cash flows, income statements and balance sheets:
  - a. *For start-up businesses up to 1 year old – 12 months projected cash flow, income statement and balance sheet.*
  - b. *For businesses over 1 year old – 3 years projected cash flow, income statement and balance sheet.*
  - c. *For businesses in operation over 3 years BEFORE approaching BYBT for assistance – 2 years ACTUAL cash flow, income statement and balance sheet; additionally – 3 years PROJECTED cash flow, income statement and balance sheet.*
9. Please ensure that all lease agreements for rental of office spaces, shops or stall etc. are included when handling in your completed documents to the Trust.

- 10.If possible, ensure that your original documents (e.g. receipts, invoices) are **copied before** they are brought in to the Trust.
- 11.Please attach **a copy** of your business Registration certificate/Incorporation certificate if the business has been registered / incorporated already.
- 12.If possible please present **SAMPLES/PORTFOLIO** of work.

...../4

**BARBADOS YOUTH BUSINESS TRUST**  
**CASHFLOW FORECAST**

CASHFLOW FORECAST For 12 month period ending: \_\_\_\_\_ 200 \_\_\_\_\_

BUSINESS NAME:

P.O. Box 306  
Bridgetown  
Barbados W.I.

MONTH	Period 0	1	2	3	4	5	6	7	8	9	10	11	12	TOTAL
CASH INFLOW														
<b>Trading Receipts</b>														
<b>Other Receipts</b>														
<b>VAT Receipts</b>														
Total Cash Inflow														
CASH OUTFLOW														
<b>Materials</b>														
<b>Wages/Salaries</b>														
<b>NIS</b>														
<b>Interest/Bank Charges</b>														
<b>Rent - Equip/Mach.</b>														
<b>Rent - Premises</b>														
<b>Advertising</b>														
<b>Electricity</b>														
<b>Gas</b>														
<b>Telephone</b>														
<b>Office Supplies</b>														
<b>Insurance</b>														
<b>Vehicle Expenses</b>														
<b>Professional Fees</b>														
<b>Loan Payment</b>														
<b>Capital Expenditure</b>														
<b>VAT Payments</b>														
<b>VAT Returns</b>														
Total Cash Outflow														
NET CASH FLOW														
Opening Balance														
Closing Balance														