

**Applicant's Name:** \_\_\_\_\_

**Please complete the following. If you do not have an item of property or a liability, please write none.**

**Part A. Real Estate (Schedule A)**

List **ALL** real estate which the applicant owns or is a joint owner of, even if the applicant still owes money on the property.

Address and Description of Property	Value	The applicant's % ownership, or \$ amount of equity, if you are not the sole owner	List all mortgages and liens		Indicate P for Personal B for Business
			What is the \$ value of the loan, lien, or mortgage?	Who issued the lien, loan or mortgage? (name and address of institution)	

**Part B. Personal Property** For each type of property listed below, indicate whether the applicant owns any property of that category, and, if so, fill in the remaining information. You can think of the value as the resale value. Attach additional pages if necessary.

Type of Property	Do you own this type of property?	Description and Location of Property	Value	Indicate P for Personal B for Business
1. Cash on hand	<input type="checkbox"/> No  <input type="checkbox"/> Yes			
2. Checking/Savings	<input type="checkbox"/> No			

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Account, Certificates of deposit, other bank accounts	<input type="checkbox"/> Yes			
3. Interest in insurance policies- specify refund or cancellation value	<input type="checkbox"/> No <input type="checkbox"/> Yes			
4. Stock and interests in incorporated/ unincorporated business	<input type="checkbox"/> No <input type="checkbox"/> Yes			
5. Interests in partnerships/joint ventures	<input type="checkbox"/> No <input type="checkbox"/> Yes			
6. Bonds	<input type="checkbox"/> No <input type="checkbox"/> Yes			
7. Accounts receivable	<input type="checkbox"/> No <input type="checkbox"/> Yes			
8. Automobiles, trucks, trailers, and accessories	<input type="checkbox"/> No <input type="checkbox"/> Yes			
9. Office equipment, supplies	<input type="checkbox"/> No <input type="checkbox"/> Yes			

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10. Machinery, fixtures etc. for business	<input type="checkbox"/> No <input type="checkbox"/> Yes			
11. Inventory	<input type="checkbox"/> No <input type="checkbox"/> Yes			
12. Other personal property of any kind not listed.	<input type="checkbox"/> No <input type="checkbox"/> Yes			

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**Part D - Debts**

List below all debts that the applicant owes, or that creditors claim that the applicant owes. Attach additional sheets if necessary.

Type of Debt	1. Creditor Name and Address 2. Date/Range of dates when debt was incurred 3. Account Number, if any 4. Contact person's name and address, if different	Amount owed	What is the debt for? Describe the collateral for this loan, if any. What is the estimated value of the collateral? <sup>1</sup>
Mortgages			
Car/vehicle loans			
Other bank loans			

<sup>1</sup> You may use the tax assessed value of real property. Attach a copy of your most recent tax bill.  
last revised JULY 8, 2010.

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Credit Cards			
Business Accounts			
Unpaid taxes LIST ONLY TAXES DUE AND NOT PAID			

**Part E Unexpired Leases and Contracts**

List below any leases or contracts that are still current that the applicant is a party to. Include real estate, car and business leases, and service or business contracts.

Nature and Description of Contract	Name and Address of Other Party or Parties	Date that Contract Expires

The undersigned applicant for a grant and loan from the City of Plattsburgh certifies that he foregoing information is complete and accurate as of the below date.

Date; \_\_\_\_\_

\_\_\_\_\_  
Applicant's signature