

First Start Loan Application

Commercial Wild Catch Fishing Industry

OFFICE USE ONLY
Client ID No:
Application No:

V12 20/9/17

Section 1 - Enterprise details

Please tick: Sole Trader, Partners, Individual Trustees, Company Directors. Title, Surname, Given Names, Date of Birth.

Company, Trust. Please list the company directors details above. Company name, Trust name.

Trading Name, ABN, Industry Type (e.g. Trawl, Net, Line etc), GST Registered?, QRIDA Client ID (if known).

Nominated contact person (from above), Telephone No., Business Phone No., Fax No., Mobile No., Email Address.

Residential Address, Postal Address. Town, State, Postcode, City/Shire/Regional Council.

Please provide the number of employees (excluding owners, partners, directors, etc): Full Time employees, Full Time equivalent*, Total employees. *Calculating Full Time Equivalent Staff.

Section 2 - Business contact details

Accountant. Contact Person, Firm, Telephone, Fax, Email.

Bank or Financier. Contact Person, Firm, Telephone, Fax, Email.

Section 3 - Proposal summary

Please provide a brief summary of your proposal. Please ensure your Management Plan is completed and attached.

Section 4 - Activity summary

Please briefly summarise the stages of development and any activities shown in your management plan.

Activity	Completion Date

(Note: It is a condition of the loan (mutual obligation condition) that the outcomes agreed to in any approval must be reported on at each annual review.)

Section 5 - Detailed proposal requirements and funding details

Requirements (Please detail below. Include these costs in your cashflow projections)	Cost
Total*	

Funding - How do you plan to fund the above requirements? (Detail below)	Amount
Cash contribution	
Bank loans ^	
Vendor finance	
Other (please detail)	
QRIDA loan	
Total*	

^ If you are planning to use a bank loan, have you discussed a joint lending proposal with your commercial lender? Yes No

Section 6 - Preferred terms and conditions

Please outline your preferred repayment terms including length of the loan, interest only periods, repayment frequency and fixed interest rate period.

Loan Term: _____ Years	Interest Only period: _____ Years
Note: An initial interest only period can be considered by QRIDA where a financial need is clearly demonstrated.	
Repayment Frequency	<input type="radio"/> Monthly <input type="radio"/> Quarterly <input type="radio"/> Half Yearly
Interest Rate Period	<input type="radio"/> One Year Fixed <input type="radio"/> Three Years Fixed <input type="radio"/> Five Years Fixed

Security Offered

Applicants are required to provide adequate security in the form of a mortgage over land or other assets acceptable to QRIDA. Please outline the security available to QRIDA (e.g. first or second mortgage over property, ships mortgage) should your loan be successful. Please provide relevant property description/s as per the Rates Notice/s.

* Totals should be the same.

Section 7 - Commercial fishing authorities and vessel details

Commercial Fisher Licence No. **Issuing Authority**

Please show details for all vessels in which you have an interest and all vessels to be purchased. Please copy and attach separate pages if you have an interest in more than two vessels.

Vessel Type <input type="radio"/> Commercial Fishing Boat		<input type="radio"/> Other (please detail) <input type="text"/>	
<input type="radio"/> Own	Current Market Value \$ <input type="text"/>	Vessel Name <input type="text"/>	
<input type="radio"/> To be purchased	Purchase Price \$ <input type="text"/>	Registered Owner <input type="text"/>	
Construction <input type="text"/>	Boat Mark <input type="text"/>	Boat Make <input type="text"/>	
Australian Ships Number <input type="text"/>	Current Survey Report Attached <input type="radio"/> Yes <input type="radio"/> No	Draft <input type="text"/>	Beam <input type="text"/>
Insured Value <input type="text"/>	Copy of Insurance Certificate Attached <input type="radio"/> Yes <input type="radio"/> No	Length <input type="text"/>	Age <input type="text"/>
Do you have a Commercial Fishing Boat Licence attached to this vessel? <input type="radio"/> Yes (please detail below) <input type="radio"/> No			
Authority Number <input type="text"/>	Issuing Authority <input type="text"/>		
Fishery Symbols <input type="text"/>	Quota/Effort Units/ Total Allowable Catch <input type="text"/>		
If you are leasing the Commercial Fishing Boat Licence please provide the details of the owner of the authority below.			
Owner Name <input type="text"/>	Owner Phone Number <input type="text"/>	Lease Expiry Date <input type="text"/>	

Vessel Type <input type="radio"/> Commercial Fishing Boat		<input type="radio"/> Other (please detail) <input type="text"/>	
<input type="radio"/> Own	Current Market Value \$ <input type="text"/>	Vessel Name <input type="text"/>	
<input type="radio"/> To be purchased	Purchase Price \$ <input type="text"/>	Registered Owner <input type="text"/>	
Construction <input type="text"/>	Boat Mark <input type="text"/>	Boat Make <input type="text"/>	
Australian Ships Number <input type="text"/>	Current Survey Report Attached <input type="radio"/> Yes <input type="radio"/> No	Draft <input type="text"/>	Beam <input type="text"/>
Insured Value <input type="text"/>	Copy of Insurance Certificate Attached <input type="radio"/> Yes <input type="radio"/> No	Length <input type="text"/>	Age <input type="text"/>
Do you have a Commercial Fishing Boat Licence attached to this vessel? <input type="radio"/> Yes (please detail below) <input type="radio"/> No			
Authority Number <input type="text"/>	Issuing Authority <input type="text"/>		
Fishery Symbols <input type="text"/>	Quota/Effort Units/ Total Allowable Catch <input type="text"/>		
If you are leasing the Commercial Fishing Boat Licence please provide the details of the owner of the authority below.			
Owner Name <input type="text"/>	Owner Phone Number <input type="text"/>	Lease Expiry Date <input type="text"/>	

Do you own or lease any other Commercial Fishing authority not already detailed in your application?

Own / Leasing	Authority Type	Issuing Authority	Endorsements (if applicable)	Authority Owner Details (if leasing)	
				Owner Name	Phone No.

Section 8 - Production information

Please provide details of your catch type, quantity and total sale amounts below OR attach your own files separately.
 Note - sales amounts should correspond to your financial statements or cash flow figures provided with your application.

If you have you attached separate files please tick:

* Year in - Year Out Estimates are what you would expect to achieve under average weather conditions and projected longer term market prices

Trawl	Last Financial Year (20__ Actuals)		Current Financial Year Actuals/Estimates		Next Financial Year Estimates		Year In - Year Out Estimates*	
Species	Quantity	Total (\$)	Quantity	Total (\$)	Quantity	Total (\$)	Quantity	Total (\$)
Prawns								
Scallops								
Bugs								
Other Species								
Total								
Total Effort Days	_____ days		_____ days		_____ days		_____ days	

Net	Last Financial Year (20__ Actuals)		Current Financial Year Actuals/Estimates		Next Financial Year Estimates		Year In - Year Out Estimates*	
Species	Quantity	Total (\$)	Quantity	Total (\$)	Quantity	Total (\$)	Quantity	Total (\$)
Total								
Total Effort Days	_____ days		_____ days		_____ days		_____ days	

Line	Last Financial Year (20__ Actuals)		Current Financial Year Actuals/Estimates		Next Financial Year Estimates		Year In - Year Out Estimates*	
Species	Quantity	Total (\$)	Quantity	Total (\$)	Quantity	Total (\$)	Quantity	Total (\$)
Coral Trout								
Red Throat Emperor								
Spanish Mackerel								
Other Species								
Total								

Crab	Last Financial Year (20__ Actuals)		Current Financial Year Actuals/Estimates		Next Financial Year Estimates		Year In - Year Out Estimates*	
Species	Quantity	Total (\$)	Quantity	Total (\$)	Quantity	Total (\$)	Quantity	Total (\$)
Mud								
Blue Swimmer								
Spanner								
Other Species								
Total								

Other (Please detail)	Last Financial Year (20__ Actuals)		Current Financial Year Actuals/Estimates		Next Financial Year Estimates		Year In - Year Out Estimates*	
Species	Quantity	Total (\$)	Quantity	Total (\$)	Quantity	Total (\$)	Quantity	Total (\$)
Total								

*Given normal seasons and commodity prices

Section 9- Statement of Assets and Liabilities

Complete one Statement of your **business and personal** Assets and Liabilities including those held individually or jointly with partners, other persons or associated entities. The Statement must include all assets you own and all debts you owe. **Complete this below OR attach your own files separately.**

If you have you attached separate files please tick:

ASSETS (Show present fair market value)	\$	LIABILITIES (Current amount owing)	\$
Cash at Bank		Overdraft (Limit:\$)	
Term Deposits		Term loans	
Property / Real Estate (please detail below)		Property / Real Estate Loans (please detail below)	
Property 1 Address:		Property 1 Loan	
Property 2 Address:		Property 2 Loan	
Property 3 Address:		Property 3 Loan	
Fishing Vessels		Fishing Vessel Loans	
Fishing Licences and Endorsements			
Efforts Units/Quota Units		Other Loans (e.g. Private Loans)	
Fishing Gear e.g. Nets		Entitlements Owing to Employees	
Product Caught Stored/Unsold		Taxation Debt	
Plant and Machinery		Hire Purchase, Leasing & Chattel Mortgage (transfer total from table below)	
Vehicles			
Accounts Receivable		Accounts Payable	
Debentures/Shares/Investments		Margin Loans	
Other Real Estate (show details)			
Superannuation (current estimated value)		Personal Loans	
		Credit Cards	
Other Assets (detail)		Other Liabilities (detail)	
Total ASSETS		Total LIABILITIES	

Hire Purchase and Lease Repayment Schedule (if preferable you can attach a list separately to this form)

Item	Lender	INSTALMENTS					LEASE RESIDUAL		Total Owing (a x b + c + d)
		(a) Instalment Amount	Frequency e.g. Monthly/ Yearly	(b) No. of payments remaining	Date of final payment	(c) Overdue payments (Arrears)	(d) Amount	Due Date	
Total Owing (transfer total to 'Statement of Assets and Liabilities' above)									

Section 10- Supporting documents checklist

The following information must also be provided to QRIDA with this application.	Please tick
Past 3 (three) Years' Financial Statements - Applicant and all associated entities - including Profit and Loss Statement, Balance Sheet and depreciation schedules - Cashbook figures are acceptable if financial statements have not been prepared	<input type="radio"/> Yes
Past 3 (three) Years' Personal Taxation Returns - Applicant and all associated entities.	<input type="radio"/> Yes
Monthly Cash Flows for the Current Financial Year	<input type="radio"/> Yes
Monthly Cash Flows for the Next Financial Year	<input type="radio"/> Yes
Schedule of Account Details A copy of the form is to be completed by each of your lenders (including banks, credit unions, lease/finance companies etc) and attached to this application. Please arrange for your lenders to return this form to you prior to submission of the completed application to QRIDA.	<input type="radio"/> Yes
Management Plan	<input type="radio"/> Yes
Copy of Fishing Licence/s and Unit Certificates	<input type="radio"/> Yes <input type="radio"/> N/A
Copy of Purchase Agreement / Contract (purchase only)	<input type="radio"/> Yes <input type="radio"/> N/A
Australian Taxation Office (ATO) Integrated Client Account Statement ATO Integrated Client Account Statement (previous 12 months) for the applicant and all associated entities.	<input type="radio"/> Yes
Trust Deed	<input type="radio"/> Yes <input type="radio"/> N/A
Please provide any additional information or documentation that you feel may support your application.	

Authorisation

I/We declare that I /we have resided in Queensland for at least 6 months and do not own, or have disposed of, a viable primary production enterprise.

I/We hereby confirm that the above financial and other required documentation is included with this application.

I/We hereby authorise QRIDA to also notify the following person/firm/company of its decision about this application (optional):

Contact Person	<input type="text"/>	Address	<input type="text"/>
Firm	<input type="text"/>		<input type="text"/>

I/We hereby authorise QRIDA and any of its authorised representatives to:

(a) collect information that QRIDA or its authorised representatives consider to be necessary or appropriate in connection with this application, from: (i) any accountant, solicitor, business consultant, bank, other financier, processor, supplier or other person named or identified in this application or any supporting documentation provided with, or in support of, this application; and (ii) any State or local government agency or authority that QRIDA or its authorised representatives may consider relevant to this application, (each a Relevant Person); and

(b) disclose to any Relevant Person and to any contractor or agent of QRIDA involved in the assessment or processing of this application: (i) that I/we have made this application; (ii) information contained in this application or any supporting documentation provided with, or in support of, this application; (iii) information collected by QRIDA or its authorised representatives under paragraph (a) above; and (iv) information about any previous application I/we have made to, or financial assistance received from, QRIDA.

I/We authorise any Relevant Person to disclose to QRIDA and its authorised representatives such information as may be requested about me/us in connection with this application.

I/We certify that all of the information provided in the whole of this application is true and accurate and discloses our correct financial position. I/We also agree to participate in a follow-up survey if requested.

All business owners, directors or trustees must sign below.

Applicant (1)
<input type="text"/>
Signature
Print Name: <input type="text"/>
Position: <input type="text"/>
Date: <input type="text"/> / <input type="text"/> / <input type="text"/>

Applicant (2)
<input type="text"/>
Signature
Print Name: <input type="text"/>
Position: <input type="text"/>
Date: <input type="text"/> / <input type="text"/> / <input type="text"/>

Applicant (3)
<input type="text"/>
Signature
Print Name: <input type="text"/>
Position: <input type="text"/>
Date: <input type="text"/> / <input type="text"/> / <input type="text"/>

Applicant (4)
<input type="text"/>
Signature
Print Name: <input type="text"/>
Position: <input type="text"/>
Date: <input type="text"/> / <input type="text"/> / <input type="text"/>

How did you learn about this assistance (please select)?

- QRIDA - Regional Area Manager
 Financial Counsellor
 Accountant
 Government Department
 QRIDA - Head Office
 Bank
 Industry Organisation
 Media (radio/newspapers)

Privacy information

Personal information provided on this form or obtained from any Relevant Person may be used by QRIDA or State government agencies and their authorised representatives to assess your eligibility for the above scheme and in relation to the administration and management of the scheme or any assistance provided to you under the scheme. QRIDA may also use this information to research and develop its service, to collate statistical data or in some cases provide you with information on other QRIDA support programs. QRIDA may disclose your personal information in accordance with your Authorisation above. More information about our privacy policy is available on our website at <http://www.qrida.qld.gov.au/>

General guidance

QRIDA has Regional Area Managers based in Bundaberg, Cloncurry, Emerald, Innisfail, Kingaroy, Mackay, Rockhampton, Roma and Toowoomba who can assist you with any questions. To speak to your local Regional Area Manager, please contact QRIDA on Freecall 1800 623 946.

Please complete each section of the application form and forward it to QRIDA with the required attachments (listed on page 6). Incomplete applications or missing attachments are likely to cause delays in assessing your application and may result in the application being declined.

Cashflow guidance

The cashflow forms should be completed by the owners and operators of the business, however your Accountant or Financial Advisor may be able to assist, if needed.

A projected cashflow allows you to estimate as accurately as you can the income and expenses for a current/future period. You should base your projections on your historical results (past financials) and your knowledge of what might be different this year and the following year. The ability to check your actual results with what you expected will assist you to make critical decisions about your business.

QRIDA requires a monthly cashflow for the current year, plus the next full financial year. Microsoft Excel versions of the Cashflow Form are available to download from the QRIDA website (www.qrida.qld.gov.au) and the totals will automatically calculate making it easier to complete. If you have your own computer prepared cashflows, please submit these.

Completing a cashflow

The steps below outline how to complete a QRIDA application cashflow:

1. Fill in your name and QRIDA Client Identification Number (if known) at the top of the form and complete the relevant year.
2. Complete the Income section.
 - Refer to your past financials for suitable headings or use those shown as a guide. Please note that stock sales are shown (not the profit), with purchases shown in the purchases section of the form. These monthly figures should agree with the total sales shown in Section 8 (page 4) of your application form.
 - All income should be shown, including personal wages, interest and dividends from investments, rents from properties, any other personal income, government assistance and all business income. Use your historical records to estimate when income will be received, but adjust for your knowledge of any changes to sales patterns or income receipts.
3. Complete the Expenses section.
 - Again you should refer to your past financials for suitable headings for your business. Please use the headings shown as a basic guide. These will also assist you with the timing of payments. Do not include non-cash items such as Depreciation or Bad Debts in your cashflow.
4. Complete the Purchases section.
 - Capital purchases would include major items such as vehicles or equipment (the cash amount paid excluding lease/HP etc), major renovations or improvements. Please make a note of the type of capital purchase. Include in this section the costs of your activity requirements shown in Section 5 (page 2).
5. Complete the Other Expenses section.
 - Here you would list all your:
 - lease, hire purchase or chattel mortgage payments
 - interest on overdraft or similar type of non reducing facility, and
 - total repayments on term loans, personal loans, private loans, housing loans and credit cards.

You also need to record your personal drawings, medical contributions and payments, education expenses for yourselves or dependants and life insurance payments.
6. Complete the Surplus or (Deficit) section.
 - This total will be automatically calculated if you are using the Microsoft Excel version of this form from the QRIDA website. If you are completing the form manually, please calculate the difference between Income and Expenses. If income is greater, you have made a surplus or profit. If Expenses are greater, you have made a (deficit) or loss.
7. Note your Opening and Closing Bank Balances.
 - If completing the cash flow for the current year, the opening bank balance of your overdraft or operating account for July should be taken from your bank statement and adjusted if necessary for outstanding cheques. If completing the cash flow for the following or subsequent years, the opening bank balance will be the closing bank balance from the previous year's cash flow which you have completed.

The purpose of this calculation is to provide an estimate of your bank balance (the closing balance) at the end of each month, and indicate your peak debt or credit. The closing balance is calculated by adding the opening balance to the monthly surplus or (deficit), which then becomes the opening balance for the next month.

Schedule of Account Details

OFFICE USE ONLY
Client ID No:

A separate copy of this form is to be completed by **each** of your lenders.
Please arrange for your lenders to return this form to you before submitting your completed review to QRIDA.
(Includes banks, finance companies, building societies, credit unions and private lenders. For *Applicants* and **all** related entities)

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Consent and Authorisation	Return Instructions
<p>To: _____ (Bank/Financier Name)</p> <p>Please list below details of all my/our accounts held with your company and return this form to me/us according to the Return Instructions (shown to the <i>right</i> of this form). You are also authorised and directed to discuss my/our accounts with <i>QRIDA</i> and provide any information <i>QRIDA</i> may request regarding my/our accounts.</p> <p>Name/Company/Firm _____ Applicant's Signature _____</p> <p>Name/Director/Partner _____ Applicant's Signature _____</p>	<p>Please return this form to me/us by:</p> <p><input type="radio"/> Fax () _____</p> <p><input type="radio"/> Email _____</p> <p><input type="radio"/> Post _____</p>

Loan Accounts, Equipment Finance & other Borrowings (Debit Accounts)										
Account Name	Account BSB & Number	Facility Type	Balance	Limit	Interest Rate	Expiry Date	Repayment Amount	Repayment Frequency	Balloon or Residual	Arrears
Contingent Liabilities:										

Savings Accounts, Term Deposits, Investment Accounts & other Asset Accounts (Credit Accounts)			
Account Name	Accounts BSB & Number	Account Type	Balance

Certification				
I/we confirm the above information is correct and the account holder currently has the lender's support. Requests for additional funding and / or continued support will be considered in line with conditions prevailing at the time of any such request and the lender's usual credit requirements				
Branch Address/Stamp				
Manager Name		Manager Signature		Date
Email Address		Phone Number		Fax Number

An additional Schedule of Account Details form is available on *QRIDA's* website.