



2020 ADVANCE FUNDING PROGRAM CREDIT APPLICATION

(To be completed by all participants.)

Please make every effort to fill out this Application accurately and completely. Please complete all parts to all questions. If none, state NONE; if not applicable, state N/A.

NAME OF APPLICANT: _____

FEDERAL TAX IDENTIFICATION NUMBER: _____

COUNTY OR COUNTIES IN WHICH LOCATED: _____

ADDRESS: _____

CONTACT PERSON:

Name: _____

Title: _____

Phone Number: _____ FAX Number: _____

E-mail Address: _____ Office Hours: _____

Alternate Contact: _____ Alternate Email Address: _____

Qualified Entity: City School
 Town Library
 County Other (List) _____

Name of Local Counsel: _____ Phone Number: _____

Local Counsel Email: _____

Legislative Body: (e.g., Common Council, Town Council, School Board)

Dates of November and December 2019 legislative body meetings: _____



Funds will be provided on Thursday, January 30, 2020, unless otherwise noted.

Will you need funds before January 30, 2020? Yes No

If yes, what date? _____

Please indicate property tax based funds for which you issued tax anticipation warrants in 2019 and funds for which you expect to issue tax anticipation warrants in the 2020 warrant program.

<u>Fund</u>	<u>2019</u>	<u>2020</u>	<u>Fund</u>	<u>2019</u>	<u>2020</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Do you expect to issue tax anticipation warrants against a property tax fund approved in a voter referendum? Yes No

If yes, please indicate the name of the fund: _____

DEBT PROFILE

- Complete the following record for Tax Anticipation Warrants issued in prior years. If none, write "NONE" as applicable.

	<u>Amount Issued in Calendar Year</u>	<u>Amount Outstanding At End of Calendar Year</u>	<u>Amount Outstanding As of This Application Date</u>	<u>Mature On</u>	<u>Borrowing Source</u>
2019	\$ _____	\$ _____	\$ _____	_____	_____
2018	_____	_____	_____	_____	_____
TOTAL OUTSTANDING			\$ _____		

- Please list annual (year ending December 31) debt service payments on all long-term debt (Warrants not included).

	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>Final Maturity Date</u>
G.O. Bonds	\$ _____	\$ _____	\$ _____	\$ _____	_____
Revenue Bonds	_____	_____	_____	_____	_____



Building Corp. Leases _____
 Short Term Leases _____
 Other* _____

* Explain type of debt (i.e., bank loans, common school loans, inter-fund loans, etc.)

3. Please list the total amount of long-term general obligation debt outstanding (principal amount only) as of **December 31, 2018** : _____

(a) Does the Applicant anticipate the issuance of additional long-term G.O. or lease rental debt during the next several years? Yes No

If Yes, please provide:

<u>Year</u>	<u>Anticipated Amount</u>	<u>Purpose</u>
_____	\$ _____	_____
_____	_____	_____
_____	_____	_____

(b) Does the Applicant expect to issue more than \$5,000,000 in tax exempt obligations in 2020?
 Yes No

(c) If the Applicant is a school and answered the prior question (e) yes, then please describe the **nature** and **amount** of each financing, other than the Warrants to be sold to the Indiana Bond Bank: _____

 _____ . (If necessary, attach sheets.)

(d) Aside from the Warrants to be sold to the Indiana Bond Bank, does the Applicant intend to issue any other tax-exempt obligations, including bonds, between January 2, 2020 and December 31, 2020? If yes, please describe. _____

4. Has the Applicant defaulted in the payment of any debt obligation? Yes No
 If yes, attach explanation.

OPERATING PROFILE

5. Total budgeted sources of revenue for all participating and non-participating tax supported Funds of the Applicant.

	<u>2019</u>	<u>2020</u>
1) Local - Property Taxes Only *	\$ _____	\$ _____
2) Local - Other Than Property Taxes	_____	_____
3) State Aid	_____	_____
4) Federal	_____	_____
Total	\$ _____	\$ _____

* Property tax and local PTRC (if applicable) receipts only.

6. Please list December 31, 2020 estimated balances of non-participating Funds.

<u>Fund Name</u>	<u>Estimated Balance as of December 31, 2020</u>
_____	\$ _____
_____	_____
_____	_____

7. Property tax collection information expressed in total dollars for all participating and non-participating Funds of the Applicant (not rate dollars).

Estimated Budgeted Gross Levy for 2020 (all Funds) \$ _____

ECONOMIC PROFILE

8. Please note or discuss any economic events experienced that would be material to an analysis of the Applicant's credit. (Outstanding judgments, the opening or closing of an important factory, announced workforce additions or reductions, tax abatements, enterprise zones, federal and state compliance orders, recent or expected land development, available undeveloped land, trends in growth patterns, etc.)

9. Largest Property Taxpayers in Applicant's district. **Please do not list duplicate taxpayers.**

	<u>Taxpayer</u>	<u>Type of Business</u>	<u>Estimated 2019-2020 Net Assessed Valuation</u>
1.	_____	_____	\$ _____
2.	_____	_____	_____



3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____

Note: This is very important data. If needed, enlist assistance from County Auditor or Assessor in order to provide latest and most accurate information.

10. Largest Employers - Counties complete in full; all others supply at least top 5.

	<u>Employer</u>	<u>Business or Product</u>	<u>Estimated Number of Employees</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____

Identify with an asterisk those employers located outside of the Applicant's corporate or district limits.

11. School District Enrollment
(to be completed by School Districts only)

	<u>2019</u>	Estimated <u>2020</u>	Estimated <u>2021</u>	Estimated <u>2022</u>
	_____	_____	_____	_____



Note: Population information can be found online at <http://www.stats.indiana.edu>.

12. Is the Applicant in compliance with Continuing Disclosure requirements on all outstanding Bonds and Leases? (You may want to consult your municipal advisor regarding this question.)

YES NO

If no, please explain: _____

13. In the previous five (5) years, have there been any instances in which the Applicant failed to comply, in all material respects, with any previous continuing disclosure undertaking agreements entered into pursuant to U.S. Securities and Exchange Commission (the "SEC") Rule 15c2-12(b)(5)(i)? (You may want to consult your municipal advisor regarding this question.)

YES NO

If yes, please explain: _____

14. Are you current on all financial obligations including, but not limited to, debt service payments, payments to the IRS, payments to the Indiana Department of Revenue, vendors, self-insurance funds and Debt Service Reserve payments?

YES NO

If no, please explain: _____

15. Would you like your Advance Funding proceeds deposited into your TrustINdiana Account at closing?

YES NO

If yes, please go to Question 22 and complete your TrustINdiana account information. If no, please complete your local bank information on Question 22.

Would you like information on the State of Indiana TrustINdiana Investment Pool?

YES NO

16. Local bank for transfer of funds:

Name of Bank: _____ ABA #: _____

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Indiana Bond Bank
10 West Market Street
Indianapolis, IN 46204
Bondbank@inbondbank.com



Address: _____

Contact Person: _____

Phone Number: _____

Account Name: _____

Account Number: _____

17. Would you prefer to receive legal documents by: E-mail Express mail
Please note that legal documents are provided by Bose McKinney & Evans LLP.
Documents are provided after the review of your credit application and cash flows.

18. Financial Information to be Supplied in Addition to the Application

- A. Please provide Cash Flow Worksheets (attached) for 2018, 2019 and 2020 for each Fund for which you expect to issue Warrants. Actual figures should be used for 2018; 2019 should include actual figures through and including August 31, 2019, and estimates for the remainder of the year. Cash flows for 2020 should be estimated based on budgets and historical data. **Cash flows are due by October 25, 2019.** Cash flows should be submitted by email to bondbank@inbondbank.com. Please contact the Bond Bank for an electronic copy of the cash flow worksheets.
- B. Please provide the most recent copies of audit reports from the State Board of Accounts and, if applicable, the summary sections of CTARs, Form 9s, CAFRs, or other annual reports, unless currently on file with the Indiana Bond Bank.

Name of person submitting this form: _____

Title: _____

Mailing Address: _____

Telephone Number: _____

E-mail Address: _____

I hereby certify that, to the best of my knowledge, all information on this Application is true and complete.

Signature _____

Date _____

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Indiana Bond Bank
10 West Market Street
Indianapolis, IN 46204
Bondbank@inbondbank.com



Assistance in the completion of this form was provided by:

Name: _____

Title: _____

Firm Name: _____

Mailing Address: _____

Telephone Number: _____

E-mail Address: _____

Did a municipal advisor provide assistance in completing this application or will provide assistance with your cash flows?

Yes No

If yes, please provide the Independent Registered Municipal Advisor (IRMA) registration number: _____

MA

Signature _____

Date _____

