

+ Loan - Short Review Form

V2 13/02/2023

Information checklist

| The following information must be completed/provided to QRIDA as part of this loan review: | Provided with this form: | |
|---|--------------------------|----------------|
| All sections of this Loan Review Form are complete | Yes | |
| Previous Financial Year Financials Statements Including Profit and Loss Statement, Balance Sheet and depreciation schedules. Note: Cashbook figures are acceptable if financial statements have not been prepared. Financials must be provided for the applicant entity and all associated entities. | Yes | |
| Previous Financial Year Taxation Returns Tax Returns for all associated individuals and all associated entities as prepared by your accountant. | 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 sent in with your loan review form. | Yes | Not applicable |
| Proof of expenditure (Tax invoices, receipts, bank statements) This applies if this is the First Annual Review of your loan. As per Section 15 of your facility letter or Section 14 of your Concessional Loan Agreement. | Yes | Not applicable |
| Any report/s required by your Mutual Obligation Milestone/s as part of your First Start or Sustainability Loan As per Section 15 of your Facility Letter | Yes | Not applicable |
| Insurance - Certificate of Currency for any significant assets used as security for your loan | Yes | Not applicable |
| Valuation If you have had a property/vessel valuation done in the last 3 years, please provide a copy | Yes | Not applicable |
| Do you have a Biosecurity Plan? If yes, what is the RBE number? | Yes | |
| | No | Not applicable |
| Any other information or documentation that you feel may assist with the Review. | Yes | Not applicable |

Section 1 - Your contact details

| | |
|-----------------------------|--|
| Client Name | Client ID |
| Residential address: | Postal address: Please tick if same as road address |
| Telephone | Fax |
| Mobile | Email |
| Contact person | Contact person telephone (if different from above) |

By ticking this box, you consent to QRIDA using your personal information to provide you with information (including, where permitted by law, by telephone (including by text or SMS or electronically) about this loan product, including loan account statements and payment reminders. Please refer to the privacy statement on page 4 of this document.

Section 2 - Employment details

| Number of Employees | Full time | Full time equivalent* |
|---|-----------|-----------------------|
| Number of existing employees (including owners, partners, directors, etc.) | | |
| After completion of project, number of additional employees (if applicable) | | |

***Calculating Full Time Equivalent**
 Full time work is 35 hours per week or more. If your business has casual or part time workers, calculate the number of hours worked by these employees and divide that total by 35 to determine full time equivalents. (For example, seven casual employees working 10 hours per week totalling 70 hours per week, equates to two full time employees).

Freecall 1800 623 946 www.qrida.qld.gov.au

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Queensland Rural and Industry Development Authority (QRIDA)

GPO Box 211 Brisbane Qld 4001 Email: contact_us@qrida.qld.gov.au ABN: 30 644 268 943



Queensland Government

Section 3 - Statement of assets and liabilities - primary producers & small businesses

Please 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 or have interest in.

Please tick if your statement of assets and liabilities is included in a separate template

| Assets (show present fair market value) | \$ | Liabilities (current amount owing) | \$ |
|--|----|---|----|
| Cash at Bank | | Overdraft (Limit:\$) | |
| Term Deposits | | | |
| | | Term loans | |
| | | | |
| Farm Properties | | | |
| 1. Land ha @ \$ /ha=\$ Buildings () \$ | | Other Loans (eg. Private Loans) | |
| 2. Land ha @ \$ /ha=\$ Buildings () \$ | | | |
| 3. Land ha @ \$ /ha=\$ Buildings () \$ | | | |
| | | | |
| Livestock (show type) | | Stock Loans/Pastoral House | |
| Fishing Vessels | | | |
| Fishing Licences | | | |
| Plant and machinery | | Hire Purchase, Leasing & Chattel Mortgage <i>(transfer total from table below)</i> | |
| Vehicles | | | |
| Crops (harvested, stored and unsold) | | Entitlements Owing to Employees | |
| | | Taxation Debt | |
| | | | |
| Accounts Receivable | | Accounts Payable | |
| | | | |
| Debentures/Shares/Investments | | Margin Loans | |
| Other Real Estate (show details) | | Real Estate Loans (show details) | |
| | | | |
| | | | |
| Superannuation (current estimated value) | | Personal Loans | |
| Life Insurance (estimated surrender value) | | Credit Cards | |
| Other Assets (detail) | | Other Liabilities (detail) | |
| | | | |
| | | | |
| Total Assets | | Total Liabilities | |

Hire purchase and lease repayment schedule

| 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 4 - Insurance

If QRIDA holds security over your property and/or plant and equipment, are all of your assets used as security insured for their market/ replacement value? Yes No - If no, please provide a brief comment as to why not:

If you operate a commercial fishing business, please attach a current Insurance Certificate for your fishing vessel/s and a latest survey report. Yes No - If no, please provide a brief comment as to why not:

Section 5 - Progress towards meeting Mutual Obligation Condition development milestones

Are you required to meet Mutual Obligation Condition Milestones as part of your First Start or Sustainability Loan? Yes No
Please refer to Section 15 of your Facility letter for the details.

| Mutual obligation condition milestone | Steps taken to achieve the milestone |
|---------------------------------------|--------------------------------------|
| | |
| | |

If you were not able to achieve your milestone, please provide a detailed comment as to why not and when this may be achieved:

Section 6 - Current cropping details (average for the most recent production year)

Do you operate a cropping primary production enterprise? Yes (please enter your crop details below) No (go to Section 7)

| Crop types (e.g. cotton, wheat, avocado) | Area (ha) | Yield (t, kg, bales, other) | Sugarcane growers | Tonnes cane | CCS | Area (ha) |
|---|-----------|--------------------------------|--|-------------|-----|-----------|
| | | | Sugar | | | |
| | | | Note: QRIDA would prefer you attach your sugar mill figures for the last year if possible. | | | |
| | | | | | | |
| | | | | | | |

Section 7 - Current livestock numbers

Do you operate a livestock primary production enterprise?

Yes (please enter your stock numbers below)

No (go to Section 8)

| Livestock - Current Numbers & Carrying Capacity | Beef/Dairy | | Sheep | | Pigs | | Other livestock | | |
|---|--------------------------|----------------------|--------------------------|--|-------------------------------|---------|------------------|--------------------------|--|
| | Herd breed: | | Herd breed: | | | Current | Target | Herd breed: | |
| | Breeders | | Breeder ewes | | Sows | | | | |
| | 1st calf heifers | | Maiden ewes | | Gilts | | | | |
| | Yearling heifers | | Hoggets | | Boars | | | | |
| | Calves | | Lambs | | Growers | | | | |
| | Yearling steers | | Wethers | | Licensed for: | SPUs | | | |
| | Steers | | Rams | | No. of litters/ sow/year | | | | |
| | Bullocks | | Current Total | | Av no. live piglets/litter | | | | |
| | Bulls | | | | Av age @ sale | weeks | | | |
| | Cows - milking | | | | Av weight @ sale | kgs | | | |
| | Cows - dry | | | | Farrowing (%) | | | | |
| | Current Total | | | | | | | Current Total | |
| | Carrying capacity | | Carrying capacity | | | | | Carrying capacity | |
| | Breeders | | Ewes | | | | | | |
| Milkers | | Total sheep (DSE) | | | | | | | |
| Total beef (AE) | | Lambing (%) | | | | | | | |
| Calving (%) | | Losses past year | | | | | Losses past year | | |
| Losses past year | | | | | | | | | |

Section 8 - Authorisation

I / We hereby authorise QRIDA to obtain from and / or disclose to my / our accountants, solicitors, business consultants, commercial lenders (e.g. banks and other financiers), other government departments, regional and shire councils, suppliers, processors, credit reporting agencies or other agents such as information as considered necessary in relation to this review.

I / We certify that all of the information provided in the whole of this review is true and accurate and discloses our correct financial position.

At least one business owner, director or trustee must sign below.

| Applicant | Signature | Name | Position | Date |
|-----------|-----------|------|----------|------|
| One | | | | |
| Two | | | | |
| Three | | | | |
| Four | | | | |

How to submit your review

Please submit your completed Loan Review Form including all supporting documents to QRIDA by:

Email: contact_us@qrda.qld.gov.au **Fax:** (07) 3032 0300 **Post:** GPO Box 211, Brisbane QLD 4001

Enquiries

If you require assistance with completing your Loan Review please contact QRIDA on **Freecall 1800 623 946**.

Privacy

The Queensland Rural and Industry Development Authority (QRIDA) recognises that your privacy is important and is committed to protecting the personal information we collect from you. For more information about how we collect, use, disclose and otherwise manage personal information about you, please see QRIDA's privacy policy on its website at www.qrda.qld.gov.au/privacy. QRIDA also complies with the Human Rights Act 2019 (Qld) when making any decision, including with respect to collection, use, and disclosure of personal information.

+ Schedule of Account Details

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 application form to QRIDA. (Includes banks, finance companies, building societies, credit unions and private lenders. For applicants and *all* related entities)

| Consent and Authorisation | | Return Instructions |
|---|--|---|
| To: <i>(Bank/Financier name)</i> 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 right of this form). You are also authorised to discuss my/our accounts with QRIDA and provide any information QRIDA may request regarding my/our accounts. Name/Company/Firm: Applicant's Signature: Name/Company/Firm: Applicant's Signature: | | Please return this form to me/us by: Fax: Email: Post: |

| Loan Accounts, Equipment Finance and Other Borrowings <i>(Debit Accounts)</i> | | | | | | | | | | |
|---|----------------------|---------------|---------|-------|---------------|-------------|------------------|---------------------|---------------------|---------|
| 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 and other Asset Accounts <i>(Credit Accounts)</i> | | | |
|--|----------------------|--------------|---------|
| Account name | Account BSB & Number | Account Type | Balance |
| | | | |
| | | | |

I/we confirm the above information is true and correct at the date executed.

| | | | |
|-----------------------|--|--------------------|--|
| Branch address/stamp: | | | |
| Manager name: | | Manager signature: | |
| Email address: | | Phone number: | |
| | | Date: | |
| | | Fax Number: | |

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