Loan - Short Review Form

V3 1/11/2023

| Information checklist | | |
|--|-------------|--------------------------------|
| The following information must be completed/provided to QRIDA as part of this loan review: | Provided wi | th 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? <i>If yes, what is the RBE number?</i> | Yes No | Not applicable |
| Any other information or documentation that you feel may assist with the Review. | Yes | Not applicable Not applicable |

Section 1 - Your contact details

Client ID Client Name

Residential address: Postal address: Please tick if same as road address

Telephone Mobile Fax 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

Full time Full time equivalent* **Number of Employees**

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).





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 Leave (or Divete Leave) | | |
|)\$ | 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 (transfer total from table below) | | |
| 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

| Hire purchase and t | ease repayment | scheaule | | | | | | | |
|---------------------|----------------|-----------------------------|---|--|-----------------------------|---|-------------------|-------------------|-----------------------------|
| | | Instalments | | | | | Lease ı | | |
| Item | Lender | (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 (a x b + c + d) |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | 1 | T | otal owing | transfer total | to 'Statement c | of Assets and Lic | ıbilities' above) | |

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| Section 4 - Insurance | | | |
|--|--|------------------------------------|--------------------------|
| If QRIDA holds security over your property ar replacement value? Yes No - If no, | nd/or plant and equipment, are all of you please provide a brief comment as to wl | | ured for their market/ |
| | | | |
| | | | |
| If you operate a commercial fishing business report. Yes No - If no, | s, please attach a current Insurance Cert please provide a brief comment as to wl | | s and a latest survey |
| | | | |
| | | | |
| Section 5 - Progress towards meeting Mutua | al Obligation Condition development mi | lestones | |
| Are you required to meet Mutual Obligation (Please refer to Section 15 of your Facility lette | Condition Milestones as part of your Firs | | Yes No |
| Mutual obligation condition milestone | Steps taken to achieve the milesto | one | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| If you were not able to achieve your milestor | ie, please provide a detailed comment a | s to why not and when this m | ay be achieved: |
| | | | |
| | | | |
| | | | |
| Section 6 - Current cropping details (averag | e for the most recent production year) | | |
| Do you operate a cropping primary production | | crop details below) No | (go to Section 7) |
| Crop types Area (e.g. cotton, wheat, avocado) | (ha) Yield (t, kg, Sugarcane bales, other) growers | Tonnes cane CCS | Area (ha) |
| | Sugar | | |
| | Note: QRIDA wou year if possible. | ıld prefer you attach your sugar m | ill figures for the last |
| | | | |
| | | | |

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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)

| Beef/Dairy | | She | еер | Pi | gs | | Other livestock | | |
|--|--------|------------------|-------------|-----------------------------|-----------------------------|--------|-------------------|--|--|
| Herd breed: | | Herd breed: | | | Current | Target | Herd breed: | | |
| Breeders | | Breeder ewes | | Sows | | | | | |
| 1st calf heifers | | Maiden ewes | laiden ewes | | | | | | |
| Yearling heifers | | Hoggets | | Boars | | | | | |
| Calves | | Lambs | | Growers | | | | | |
| Yearling steers | | Wethers | | Licensed for: | | SPUs | | | |
| Yearling steers Yearling steers Steers Bullocks | | Rams | | No. of litters/ sow/year | No. of litters/ sow/year | | | | |
| Bullocks | | Current Total | | Av no. live piglets/litter | | | | | |
| Bulls | | | | Av age @ sale | | weeks | | | |
| Bulls Cows - milking Cows - dry Current Total | | | | Av weight @ sale | | kgs | | | |
| Cows - dry | | | | Farrowing (%) | | | | | |
| Current Total | | | | | | | Current Total | | |
| Carrying ca | pacity | Carrying | capacity | | | | Carrying capacity | | |
| Breeders | | Ewes | | | | | | | |
| Milkers | | Total sheep | | | | | | | |
| Total beef (AE) | | (DSE) | | | | | | | |
| Calving (%) | | Lambing (%) | | | | | | | |
| 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: reviews@grida.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 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.qrida.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.

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+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 | | | | | | | | R | leturn Inst | ructions | | |
|-----------------------------|--|---|------------------------|------------------------|------------------|------------------|---------------------|------------------------|--------------------------------------|------------------------|---------|--|
| To: | (Bank/Financier name) | | | | | | | | Please return this form to me/us by: | | | |
| | | turn this form to me/us according to the Return Instructions (shown to the IDA and provide any information QRIDA may request regarding my/our | | | | | | Fax: Email: | | | | |
| Name/Company/Firm: | | | Applicant's Signature: | | | | | | | Post: | | |
| Name/Company/Firm: | | | А | pplicant's Signature: | | | | | | | | |
| | | Loan A | Accounts, Equ | ipment Finance and C | ther Borrov | vings (Debit Acc | counts) | , | | | | |
| Account name | ame Account BSB & Number Facility Type Balance | | | | Interest Rate | Expiry Date | Repayment Amount | Repayment Frequency | | Balloon or Residual | Arrears | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Contingent Liabilities: | | | | | | | I | | | | | |
| | | | | | | | | | | | | |
| | | Savings Accounts, | Term Depos | its, Investment Accour | its and othe | er Asset Accoun | ts (Credit Accounts | :) | | | | |
| Account name | | Account BSB & Nu | ımber | Account Type | | | | | Balance | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| I/we confirm the above info | ormation is true and correc | t at the date execut | ed. | | | | | | | | | |
| Branch address/stamp: | | | | | | | | | | | | |
| Manager name: | Manager name: Manager sign | | | nager signature: | | | | | te: | | | |
| Email address: Phon | | | | Phone number: | | | | | Fax Number: | | | |
| | | | 1.00 | | | | 1. ** | | | | | |

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

