# Loan - Full Review Form Small Business

V1 27/10/2023

Information checklist							
The following informatio	n must be completed/provided	d to QRIDA as part of this loan review:		Provided wit	th this form:		
All sections of this Loan	Review Form are complete			Yes			
Previous Financial Year F	inancials Statements			Yes			
Including Profit and Loss	Statement, Balance Sheet and	l depreciation schedules.		105			
Note: Cashbook figures a	re acceptable if financial state	ments have not been prepared.					
	provided for the applicant enti	ity and all associated entities.					
Previous Financial Year T				Yes			
Tax Returns for all associ	ated individuals and all associ	ated entities as prepared by your accounta	nt				
ATO Portal – Integrated (	lient Account Statement			Yes			
		nders (including banks, credit unions,lease 1.	e/finance	Yes	Not applicable		
Proof of expenditure (Tax	c invoices, receipts, bank state	ements)		Yes	Not applicable		
This applies if this is the	First Annual Review of your loa	n. As per Section 15 of your facility letter.		105	Not applicable		
<b>Any report/s required by</b> <i>As per Section 15 of your</i>		tone/s as part of your Disaster Assistance	Loan	Yes	Not applicable		
Insurance - Certificate of	Currency for any significant as	ssets used as security for your loan		Yes	Not applicable		
Valuation				Yes	Not applicable		
If you have had a propert	y/business valuation done in t	the last 3 years, please provide a copy		res	Not applicable		
Any other information or	documentation that you feel r	nay assist with the Review.					
Section 1 - Your contact	details						
Client Name			Cli	ent ID			
Residential address:		Postal addross	<b>Please tick if same as road address</b>				
Residential address.		rostat address.	Please tick if s	ame as road a	aaress		
Telephone	Fax	Mobile	Email				
Contact person		Contact persor (if different from					
telephone (including	by text or SMS or electronically	r personal information to provide you with in y) about this loan product, including loan ac					
Section 2 - Employmen	tatement on page 5 of this docu	ument.					
Number of Employees			Full time	Eul	ll time equivalent*		
			rull time	ru	ll time equivalent*		
Number of <b>existing</b> emp	oloyees (including owners, pa	artners, directors, etc.)					
After completion of proj	ect, number of additional en	nployees (if applicable)					
*Calculating Full Time Equ Full time work is 35 hours J and divide that total by 35 week. equates to two full t	per week or more. If your busin to determine full time equivale	ess has casual or part time workers, calcul ents. (For example, seven casual employees	ate the number s working 10 hot	of hours worke ırs per week to	ed by these employees talling 70 hours per		



 Queensland Rural and Industry Development Authority (QRIDA)
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 ABN: 30 644 268 943

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## Section 3 - Statement of assets and liabilities

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.** 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		
Real estate				
Address:				
		Other Loans (e.g. Private Loans)		
Stock (show type)		Stock Loans/Floor plans		
Plant and machinery		Hire Purchase, Leasing & Chattel Mortgage (transfer total from table below)		
Vehicles				
		Entitlements Owing to Employees		
		Taxation Debt		
Accounts Receivable		Accounts Payable		
Debentures/Shares/Investments		Margin Loans		
		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

				Instalment	Lease r				
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	1	T.	otal owing	(transfer total	to 'Statement o	of Assets and Lia	bilities' above)	

QRIDA Loan - Full Review Form -Small Business

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:										
Soction -	Changes to property / accet									
Section 5 - Changes to property / assets Please provide the details of the purchases and/or sale of any property or assets since your last review.										
No chai		ased (please describe)	Sold (please describe)							
	0		N. A							
	Business performance / prog									
	ide a detailed comment on t ment on how the funds are b	ne performance and challenges of y enefiting your enterprise.	our business over the pas	st year. If this is your first review						
Section 7 - /	Authorisation									
banks aı	nd other financiers), other gover	from and / or disclose to my / our acco nment departments, regional and shire d necessary in relation to this review.								
0		provided in the whole of this review is tr	ue and accurate and disclose	es 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 sub	How to submit your review									
Please submit your completed Loan Review Form including all supporting documents to QRIDA by:										
	Email: reviews@qrida.qld.gov.au Fax: (07) 3032 0300 Post: GPO Box 211, Brisbane QLD 4001									
Enquiries										
Privacy	e assistance with completin	g your Loan Review please contact (	2KIDA ON <b>1800 623 946.</b>							
The Queenslan collect from you	I. For more information about how w	thority (QRIDA) recognises that your privacy i e 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.										

# **+**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					
То:	(Bank/Financier name)					
Please list below details of all my/our accounts held with your company and retu		Fax:				
right of this form). You are also authorised to discuss my/our accounts with QRID accounts.	Email:					
Name/Company/Firm:	Applicant's Signature:	Post:				
Name/Company/Firm:	Applicant's Signature:					

Loan Accounts, Equipment Finance and 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 and other Asset Accounts (Credit Accounts)										
Account name	ımber		Account	Account Type			Balance			
I/we confirm the above information is t	true and correct	t at the date execut	ed.							
Branch address/stamp:										
Manager name:		Manager signature:						Date:		
Email address:			Phone r	number:				Fax Number	•	

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



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