

**Small Business Certification Application Form**  
**PERSONAL NET WORTH STATEMENT**

As of (Date): \_\_\_\_\_

As part of the review of an entity seeking certification as a Small Business, the School District of Osceola County must determine the personal net worth of each individual owner of a business seeking certification whose ownership and control are relied upon for certification as a small business. Each such individual must submit the personal financial statement below for purposes of determining net worth. The owner's individual personal net worth does not include the ownership interest in the business seeking certification. If a primary residence is co-owned with a spouse, only one half of the value of the residence is considered, and then \$500,000 in equity in his or her primary place of residence is also excluded. Each individual must include the value of any ownership interest in all other businesses and property.

Name:	Business Phone:
Residence Address:	Residence Phone:
City, State & Zip Code:	Email:

Marital Status – Married:  Yes  No

Business Name of Applicant/Borrower:

ASSETS (Omit cents)	LIABILITIES (Omit cents)
Cash on Hand & in Bank..... _____	Accounts Payable..... _____
Savings Accounts..... _____	Notes Payable to Banks and Others..... _____
IRA or Other Retirement Account..... _____	(Describe in Section 2)
Accounts & Notes Receivable..... _____	Installment Account (Auto)..... _____
Life Insurance-Cash Surrender Value	Mo. Payments .....\$ _____
Only ..... _____	Installment Account (Other)..... _____
(Complete Section 8)	Mo. Payments .....\$ _____
Stocks and Bonds..... _____	Loan on Life Insurance..... _____
(Describe in Section 3)	Mortgages on Real Estate..... _____
Real Estate..... _____	(Describe in Section 4)
(Describe in Section 4)	Unpaid Taxes..... _____
Automobile-Present Value..... _____	(Describe in Section 6)
Other Personal Property..... _____	Other Liabilities..... _____
(Describe in Section 5)	(Describe in Section 7)
Other Assets..... _____	Total Liabilities..... _____
(Describe in Section 5)	Net Worth..... _____
Total _____	Total _____

Section 1. Source of Income	Contingent Liabilities
Salary..... _____	As Endorser or Co-Maker..... _____
Net Investment Income..... _____	Legal Claims & Judgments..... _____
Real Estate Income..... _____	Provision for Federal Income Tax..... _____
Other Income (Describe Below)..... _____	Other Special Debt..... _____

Description of Other Income in Section 1.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted towards total income.

Section 2. Notes Payable to banks and others. (Use attachment if necessary. Each attachment must be identified as part of this statement and signed).

Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	How Secured or Endorsed; Type of Collateral

Section 3. Stocks and Bonds

Number of Shares	Names of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value

Section 4. Real Property (List each parcel separately. Use attachment if necessary. Each attachment must be identified as part of this statement and signed.)

	Property A	Property B	Property C
<b>Type of Property</b>			
<b>Address</b>			
<b>Date Purchased</b>			
<b>Original Cost</b>			
<b>Present Market Value</b>			
<b>Name &amp; Address of Mortgage Holder</b>			
<b>Mortgage Account Number</b>			
<b>Mortgage Balance</b>			
<b>Amount of Payment per Month/Year</b>			
<b>Status of Mortgage</b>			

Section 5. Other Personal Property. Describe and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and if delinquent, describe delinquency.)

Section 6. Unpaid Taxes (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

Section 7. Other Liabilities (Describe in detail.)

Section 8. Life Insurance Held (Give face amount and cash surrender value of policies, name of insurance company and beneficiaries.)

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**CERTIFICATION**

I, \_\_\_\_\_, hereby certify that the foregoing Personal Financial Statement, together with the Federal Income Tax returns or financial statements certified by a CPA, submitted are a true and correct statement of my financial condition as of the date indicated and that no pertinent information has been withheld. I agree to provide releases for financial information that may be requested, I understand this statement is given for the express purpose of certification as a Small Business with the School District of Osceola County.

Signature of Individual owner/stockholder:

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Date: \_\_\_\_\_

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