



1850 North Grand Avenue West
Springfield, IL 62702
Phone: (217) 793-1802 Fax: (217) 793-9454
E-mail: cef@cidlcms.org
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MORTGAGE LOAN APPLICATION

God's Grace and Peace to you as you embark on your Vision for His Kingdom!

Attached is The Church Extension Fund (CEF) Loan Application which should be completed and returned to CEF for submittal to the Board of Trustees for their approval. **PLEASE NOTE:** When the aggregate of loans for any congregation will exceed \$1,500,000.00, approval must be obtained from the Special Loan Committee or District Convention. This may affect the timing of your application.

Mortgage loans may be made for a maximum of 25 years. Congregations requesting loans from the Fund may be requested to raise supporting investments up to 25% of the loan.

The Church Extension Fund reserves the right to revise the interest rate at the end of each two-year term of the loan. This is particularly important if we are to continue to offer the most favorable rates to our investors. Prepayments are encouraged and may be made without penalty. It is the borrower's responsibility to pay filing fees and the cost of title insurance only. These costs may be included as part of the loan or paid as incurred.

The needs of mission stations and subsidized congregations will receive priority consideration, but, to the extent that money is available, the needs of self-supporting congregations will be met. All congregations are encouraged, on the basis of good stewardship, to take advantage of the comparatively low cost of financing through The Church Extension Fund.

As always, please do not hesitate to contact our office if you have any questions relating to this loan process.



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(See separate applications for loans up to \$50,000 or Parsonage Loans)

AMOUNT OF LOAN REQUEST \$ _____ DATE _____

TERM REQUESTED: _____ Years (25 maximum) TYPE: **2 Year Adjustable Rate Mortgage**

PURPOSE (check one): Construction _____ Purchase _____ Remodeling _____ Other _____

Briefly describe purpose of loan: _____

GENERAL INFORMATION:

Type of Corporation: _____Not-for-Profit _____Religious

CONGREGATION: _____

STREET ADDRESS: _____

MAILING ADDRESS: _____

CITY: _____ COUNTY: _____ ZIP: _____

FEDERAL EMPLOYER IDENTIFICATION NUMBER (FEIN) _____ - _____

CHURCH TELEPHONE #: _____ FAX#: _____

CHURCH EMAIL: _____

NAME OF PASTOR: _____

NAME OF CONTACT FOR THIS APPLICATION: _____

HOME TELEPHONE #: _____ OFFICE TELEPHONE #: _____

WHERE ARE SERVICES CURRENTLY BEING HELD? _____

TOTAL NUMBER OF VOTING MEMBERS: _____

NUMBER PRESENT AT MEETING WHEN PROJECT WAS APPROVED: _____

NUMBER FOR PROJECT: _____ AGAINST PROJECT: _____

PLEASE ANSWER THE FOLLOWING FOR CONSTRUCTION/PURCHASE OF NEW FACILITIES:

PROPERTY ADDRESS: _____

LOT SIZE: _____ LOCATION: _____Urban _____Suburban _____Rural

LAND USE AND ZONING OF SURROUNDING AREA:

_____Residential _____Commercial _____Industrial _____Agricultural _____Other

ZONING OF CHURCH PROPERTY:

_____Residential _____Commercial _____Industrial _____Agricultural _____Other

EMPLOYMENT STABILITY OF COMMUNITY IN WHICH PARISH IS LOCATED:

_____Good _____Average _____Fair _____Poor
 AVAILABILITY OF UTILITIES: _____Electricity _____Gas _____Water _____Sewer
 WAS AN APPRAISAL MADE OF THE PROPERTY? YES-AMOUNT \$ _____ NO _____
 POPULATION: COMMUNITY _____ COUNTY _____
 POPULATION GROWTH: _____ % LAST DECADE _____ % ANTICIPATED IN NEXT DECADE
 NUMBER OF LUTHERAN CHURCHES IN AREA: _____
 DISTANCE TO CLOSEST LCMS CHURCH: _____
 HAS THIS PROJECT BEEN DISCUSSED WITH AREA LCMS CHURCHES: ___YES OR ___NO

<u>MEMBERSHIP:</u>	CURRENT YR	LAST YR	2YRS AGO
BAPTIZED:	_____	_____	_____
COMMUNICANTS:	_____	_____	_____
MEMBERSHIP CHANGES:			
GAINS: YOUTH CONFIRMED	_____	_____	_____
ADULTS CONFIRMED	_____	_____	_____
TRANSFERS IN	_____	_____	_____
TOTAL GAINS	_____	_____	_____
LOSSES: DEATHS	_____	_____	_____
TRANSFERS OUT	_____	_____	_____
REMOVALS, RELEASES, OTHER	_____	_____	_____
TOTAL LOSSES	_____	_____	_____
AVERAGE ATTENDANCE:			
SUNDAY SERVICES	_____	_____	_____
BIBLE CLASS-ADULT	_____	_____	_____
BIBLE CLASS-YOUTH	_____	_____	_____
SUNDAY SCHOOL	_____	_____	_____

<u>DAY SCHOOL INFORMATION:</u>	CURRENT YR	LAST YR	2 YRS AGO
ENROLLMENT	_____	_____	_____
# OF GRADES (e.g. P THRU 4 OR K-8, ETC)	_____	_____	_____
# OF FULL-TIME EQUIVALENT			
PROFESSIONAL WORKERS:	_____	_____	_____
% STUDENTS THAT ARE MEMBERS			
OF THIS CONGREGATION:	_____	_____	_____

DAY SCHOOL INFORMATION <small>(continued)</small>	CURRENT YR	LAST YR	2 YRS AGO
% OF ELIGIBLE CONGREGATIONAL			
ENROLLED DAY SCHOOL:	_____	_____	_____
PROJECTED FUTURE GROWTH-			
ADDITIONAL STUDENTS NEXT YR:	_____		
ADDITIONAL STUDENTS IN 2 YRS:	_____		

PROFILE OF MEMBERSHIP IN AGE RANGES:	# OF MEMBERS NOW
AGES 0 - 4 YEARS	_____
AGES 5 - 9 YEARS	_____
AGES 10-14 YEARS	_____
AGES 15-19 YEARS	_____
AGES 20-29 YEARS	_____
AGES 30-39 YEARS	_____
AGES 40-49 YEARS	_____
AGES 50-59 YEARS	_____
AGES 60-69 YEARS	_____
AGES 70-79 YEARS	_____
AGES 80 AND OVER	_____
TOTAL MEMBERS NOW	_____

FINANCIAL HISTORY

INCOME	CURRENT YR	LAST YR	2 YRS AGO
CONTRIBUTIONS	_____	_____	_____
GIFTS, BEQUESTS	_____	_____	_____
DAY SCHOOL TUITION	_____	_____	_____
OTHER_____	_____	_____	_____
<i>TOTAL INCOME</i>	_____	_____	_____
EXPENSES			
OPERATING EXPENSES	_____	_____	_____
DEBT SERVICE	_____	_____	_____
DAY SCHOOL EXPENSES	_____	_____	_____
DISTRICT/SYNOD SUPPORT	_____	_____	_____
OTHER_____	_____	_____	_____
<i>TOTAL EXPENSES</i>	_____	_____	_____
NET OPERATING BALANCE GAIN (LOSS)	_____	_____	_____
Operating Account Balance	_____	_____	_____
Building Fund Balance	_____	_____	_____

FINANCIAL POSITION

EXISTING PHYSICAL FACILITIES OWNED:

	YEAR PURCHASED	ORIGINAL COST	PRESENT VALUE	LOAN BALANCE
LAND	_____	_____	_____	_____
CHURCH	_____	_____	_____	_____
PARSONAGE	_____	_____	_____	_____
EDUCATIONAL UNIT	_____	_____	_____	_____
OTHER	_____	_____	_____	_____

INDEBTEDNESS OWNED TO WHOM:

LAND: _____
 CHURCH: _____
 PARSONAGE: _____
 EDUCATIONAL UNIT: _____
 OTHER: _____

OTHER ASSETS:

INVESTMENTS:

UNRESTRICTED-DESCRIBE _____ VALUE \$ _____
 RESTRICTED-DESCRIBE _____ VALUE \$ _____
 OTHER ASSETS-DESCRIBE _____ VALUE \$ _____

OTHER DEBT:

OPERATING LOANS WITH _____ BALANCE \$ _____
 OTHER-DESCRIBE _____ BALANCE \$ _____

FAMILY CONTRIBUTIONS PLEDGE PROFILE

Level of Contribution:	# of FAMILIES	TOTAL \$
\$ 0 to \$ 500	_____	_____
\$ 501 to \$ 1,000	_____	_____
\$ 1,001 to \$ 2,000	_____	_____
\$ 2,001 to \$ 3,000	_____	_____
\$ 3,001 to \$ 4,000	_____	_____
\$ 4,001 to \$ 5,000	_____	_____
\$ 5,001 to \$ 7,500	_____	_____
\$ 7,501 to \$ 10,000	_____	_____
\$ 10,001 to \$ 15,000	_____	_____
\$ 15,001 AND OVER	_____	_____
<i>TOTAL CONTRIBUTIONS PLEDGED</i>	_____	_____

PROJECTED FINANCIAL GROWTH

INCOME	1 YEAR FROM NOW	2 YEARS FROM NOW
CONTRIBUTIONS	_____	_____
GIFTS, BEQUESTS	_____	_____
DAY SCHOOL TUITION	_____	_____
OTHER _____	_____	_____
<i>TOTAL INCOME</i>	_____	_____
EXPENSES		
OPERATING EXPENSES	_____	_____
DEBT SERVICE	_____	_____
DAY SCHOOL EXPENSES	_____	_____
DISTRICT/SYNOD SUPPORT	_____	_____
OTHER _____	_____	_____
<i>TOTAL EXPENSES</i>	_____	_____
NET OPERATING BALANCE GAIN (LOSS)	_____	_____

BUILDING FUND PLEDGE PROGRAM

DURATION OF BUILDING FUND PLEDGE PROGRAM: _____ YEARS
 BEGINNING DATE OF PLEDGE PROGRAM: _____ COMPLETION DATE: _____

FAMILY BUILDING FUND PLEDGE PROFILE

Level of Contribution:	# of FAMILIES	TOTAL \$
\$ 0 to \$ 500	_____	_____
\$ 501 to \$ 1,000	_____	_____
\$ 1,001 to \$ 2,000	_____	_____
\$ 2,001 to \$ 3,000	_____	_____
\$ 3,001 to \$ 4,000	_____	_____
\$ 4,001 to \$ 5,000	_____	_____
\$ 5,001 to \$ 7,500	_____	_____
\$ 7,501 to \$ 10,000	_____	_____
\$ 10,001 to \$ 15,000	_____	_____
\$ 15,001 AND OVER	_____	_____
<i>TOTAL BUILDING FUND PLEDGED</i>	_____	_____

BUILDING FUND:

TOTAL AMOUNT OF FAMILY PLEDGES (<i>total from previous page</i>)	\$_____
OTHER BUILDING FUND SOURCES_____	\$_____
<i>TOTAL BUILDING FUNDS AVAILABLE</i>	\$_____
LESS TOTAL FUNDS RECEIVED TO DATE	\$_____
LESS TOTAL PLEDGES ANTICIPATED PRIOR TO PROJECT COMPLETION	\$_____
BALANCE TO BE RECEIVED FOLLOWING COMPLETION	\$_____
BALANCE OF PROJECTED PLEDGES BY YEAR:	
YEAR 1 FOLLOWING PROJECT	\$_____
YEAR 2 FOLLOWING PROJECT	\$_____
YEAR 3 FOLLOWING PROJECT	\$_____

BUILDING PROJECT

BUILDING INFORMATION

COST OF BUILDING: _____Estimate _____Bid	\$_____
COST OF FURNISHINGS: (Pews, Organ, Etc.)	\$_____
COST OF LAND/SITE: _____District _____Other	\$_____
SITE IMPROVEMENTS: (Landscaping, Parking, etc.)	\$_____
ARCHITECT FEES	\$_____
TITLE INSURANCE, LEGAL SURVEY, ETC.	\$_____
CONSTRUCTION LOAN INTEREST (<i>if applicable</i>)	\$_____
PERFORMANCE/PAYMENT BOND	\$_____
TOTAL OF ABOVE	\$_____ (A)
CURRENT DEBT TO BE REFINANCED	\$_____ (B)
(SOURCE: ____District ____Commercial ____Other)	
TOTAL BUILDING FUND NEED (A) + (B)	\$_____ (C)
LESS:	
CURRENT BUILDING FUND RECEIPTS TO BE USED	\$_____
PROJECTED PLEDGE CONTRIBUTIONS BY COMPLETION	\$_____
OTHER ANTICIPATED RECEIPTS-SOURCE_____	\$_____
TOTAL RECEIPTS TO BE APPLIED TO PROJECT	\$_____ (D)
NEW LOAN REQUIREMENTS (C) - (D)	\$_____

ESTIMATED CONSTRUCTION START DATE: _____

ESTIMATED COMPLETION DATE: _____

VERIFICATION

I/We hereby verify that I/We have reviewed this application and that to the best of my/our knowledge and belief that the information contained herein is true and correct.

AUTHORIZED SIGNATURES

Name Office

Name Office

Name Office

CERTIFICATE OF CORPORATION SECRETARY

I hereby certify that I am the duly qualified and acting Secretary of the above referenced congregation, a corporation duly organized under the laws of the State of Illinois, and as such have custody of the books of said corporation, and that the attached instruments entitled Constitution and Bylaws of said corporation, are as of this date, true, correct and complete copies of said instruments, including all amendments which are now in full force and effect.

I hereby also certify that at a lawful meeting of the voters of said congregation held on the _____day of _____, _____, at which a quorum was present, the following resolution was adopted:

BE IT HEREBY RESOLVED, that the congregation apply for a loan with the Central Illinois District Church Extension Fund, Inc. in the amount of \$_____ for the purpose of _____

Secretary: _____

Date: _____