

STATE REVOLVING FUND LOAN PROGRAMS

REQUIRED FINANCIAL DUE DILIGENCE MATERIALS

SRF Qualified Entity (Name): _____

Contact Person (Name): _____ Phone #: _____

Financial Advisor (Name): _____ Phone #: _____

Due Diligence Information Received By SRF (Date): _____

Proposed SRF Closing (Date): _____

All Due Diligence Submissions MUST include the following; each separated by the appropriate numbered tab.

- ___ 1. Completed Due Diligence Submission Form
- ___ 2. Three Years of Audited Financial Statements (with notes)
- ___ 3. Copies of the last 3 years Internal Financial Reports (e.g. CTAR's)
- ___ 4. Current Year's Budget
- ___ 5. Rate Consultant's Report
 - ___ a. Detail of Estimated Project cost
 - ___ b. Sources and Uses of Funds Statement
 - ___ c. Proposed Amortization Schedule
 - ___ d. Amortization Schedules of Outstanding Bonds (if any)
 - ___ e. Historical Financial Statements
 - ___ f. Pro Forma or Forecasted Financial Statements
 - ___ g. Detail of Adjustments or Detail of Assumptions Used in Forecast
 - ___ h. Schedule of Present and Proposed Rates
 - ___ i. Calculation of Debt Service Coverage (1.25x)
 - ___ j. Schedules of Proposed Outstanding Bonds
- ___ 6. A Copy of the Signed Rate and Bond Ordinance (net revenue issues)
- ___ 7. A Copy of the Department of Local Government Finance Order (tax backed issues)
- ___ 8. IURC Rate Order (if under IURC jurisdiction)
- ___ 9. Source and Use of Funds Statement
- ___ 10. Amortization Schedule for the Proposed Bonds
- ___ 11. Proof of Surety Bond for Reserve (if using a surety bond)
- ___ 12. Interlocal Agreement

Additional Required Submissions for Qualified Entities with Outstanding Bonds:

- ___ 13. List of all Outstanding Bonds
- ___ 14. Status of Parity and Junior Bonds
- ___ 15. Identify source of payment for each Bond Issue
- ___ 16. Copy of Bond Ordinances for ANY Outstanding Senior Bonds
- ___ 17. Combined Amortization Schedule for All Proposed and Outstanding Bonds
- ___ 18. Parity Test and Proof of Appropriate Coverage

State Use Only:

SRF Reviewer (Name): _____

Forwarded to SRF-reviewer for an opinion (Date): _____

SRF Due Diligence Approved (Date): _____

SRF-Due Diligence Form 10/03