
HEDA WORKING SESSION

Monday, August 23, 2021
Hibbing City Council Chamber
5:00 p.m.

ATTENDANCE:			
	<i>Member Roger Kivela</i>		<i>Pete Hyduke, City Administrator</i>
	<i>Member Shelly Hanson</i>		<i>Andy Borland, City Attorney</i>
	<i>Member John Schweiberger</i>		<i>Sheena Mulner, CityClerk-Treasurer</i>
	<i>Member Jennifer Hoffman Saccoman</i>		<i>Candie Seppala, Sr Executive Assistant</i>
	<i>Member Steve Jurenes</i>		<i>John Tourville, Special Projects</i>
	<i>Vice-President Rick Cannata</i>		
	<i>President Shari Majkich Brock</i>		

AGENDA:

- HEDA Loan Blue Moon – Jeff Christlieb
- HEDA Loan Mikal and Melissa Brown
- Troy Hoekstra
- COVID loans – Candie Seppala
- HEDA loans – Candie Seppala
- Project Updates – John Tourville
- Miscellaneous – Round Table

NEXT REGULAR MEETING:

Wednesday, August 25, 2021
4:45 pm
Hibbing City Hall Council Chamber

ADJOURNMENT:

APPLICATION

Hibbing Economic Development Authority Loan

Basic Information

Name of Applicant(s): Jeffrey Christlieb
 Address: 101 E HOWARD ST Hibbing, Mn 55746
 Phone: 218-366-1163
 Name of Business: Blue Moon Appliance
 Address: 101 E HOWARD ST Hibbing, Mn 55746
 Phone: _____

Business is: ☐ new business start-up
☒ existing business _____ number of years \$ _____ equity in business

Briefly describe your business, including such information as products and services provided, general market area served, and any other information you feel may be appropriate: _____

Sales on appliances and home products
main distribution is located in Hibbing

Briefly describe the proposed project for which you are seeking assistance: _____

Remodeling new building, carpet, tile, ceiling and new
addition on front entry.

Use of Proceeds

Fixed Assets	Amount
Land and building acquisition	_____
Land improvements	_____
New building construction	_____
Building renovation	<u>180,000</u>
Purchase machinery/equipment	<u>66,000</u>
Total Fixed Assets	\$ 778,000
Working Capital	
Operating Capital	<u>\$ 112,000</u>
Inventory	<u>420,000</u>
Total Working Capital	\$ 1,320,000
Debt Refinancing	\$ _____
Total Uses	\$ _____

Sources

Amount to be financed:			Amount
Source	Rate	Term	
Equity			\$ _____
HEDA	_____%	____yrs	<u>\$ 50,000</u>
Bank	_____%	____yrs	\$ _____
Other:			
_____	_____%	____yrs	\$ _____
_____	_____%	____yrs	\$ _____
Total Sources			\$ _____

APPLICATION

How many jobs do you anticipate will be created or retained by this project?

30 Created 22 Retained 52 Total

What is the wage/salary range of these jobs?

9.86 /hr. to 17.00 /hr and/or _____ /yr. To _____ /yr.

PLEASE PROVIDE DETAIL TO THE FOLLOWING THREE COLLATERAL QUESTIONS. 1. What collateral do you have available which can be used as security for the proposed financing? 2. What is its estimated value? 3. Is this collateral subordinate to any other loan? If so, please provide details.

1. Inventory
2. \$1,500,000
3. NO

What experience or other qualifications do you have for operating this business?

I have owned this business for 4 years

I have reviewed the proposal described above. Based on this preliminary review and discussion, our Bank is interested in participating in the financing of this project assuming the following:

- ☐ A complete application will be completed by the business/individual named herein
- ☐ All information requested by the HEDA and/or our Bank is provided in satisfactory form,
- ☐ The economic feasibility of the proposed project is demonstrated to our satisfaction.

Furthermore, I understand that this indication of interest to participate with the HEDA in financing the project described herein, does not obligate this Bank to actually approve such financing unless and until the above mentioned conditions, and any other which this Bank may reasonably request have been met to the full satisfaction of this Bank, and a letter to that effect, signed by an officer of this Bank, has been delivered to the Hibbing Economic Development Authority Board.

Name of Bank: _____

Name of Officer: _____

Phone Number: _____

Signature: _____

Title: _____

Date: _____

HEDA approval date: _____

Business Owner: _____

HEDA Exec. Dir. Signature: _____

Signature: _____

HEDA President Signature: _____

Date: _____

Date: _____

COVID -19 Business Assistance HEDA Loan Application

Business Name: Bender's Shoes
Business Address: 405 East Howard St Hibbing
Business Phone: 218-326-0991
Business e-mail: Craig at bendersshoes.com

Business Owners Name: Craig Bender
Home Address: 37921 Hanson Lk Rd. Grand Rapids MN 55746

Type of Business: (Sole Proprietor, Corporation, LLC, Partnership) Corp

What will you use the HEDA loan funds for? (Specify the use and cost) Interior Painting
Carpeting and Redo some Displays (No Bids yet)

What security or collateral will be backing your loan? Personally

Loan Amount you are requesting from HEDA: \$ up to \$40,000

I certify that all statements on this application are true and correct to the best of my knowledge. I understand that any intentional misstatements will be grounds for the disqualification of my grant application.

Applicant Signature: Craig Bender Date: 7/29/21