



# ARKANSAS DEVELOPMENT FINANCE AUTHORITY

## APPLICATION FOR CONDUIT ISSUES

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

Borrower: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Project Location: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact person: \_\_\_\_\_

Email: \_\_\_\_\_

Type of Entity: \_\_\_\_\_  
(Private, Non-Profit, Governmental, etc.)

Amount to be Financed: \_\_\_\_\_

Purpose of Financing: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Proposed Structure: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**\*\*Please attach to this Application a Distribution List detailing the Professionals that will be involved in the transaction (i.e., Bond Counsel, Underwriter, Trustee, etc.). Also, please attach any appropriate disclosure letters including G-17 letters.\*\***