

Application for Finance Schools and Colleges

Contact: ☎ 6208 6260 📧 cdf@aohtas.org.au



Catholic Development Fund Tasmania

ABN 21 429 090 329

Details of Loan Request

Borrower:

Account Number:

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Loan Purpose Description:

Loan Amount: \$

Requested Loan Term:

Project Details

Loan Purpose/Details (Attach documentation as required):

Capital Project

Loan Purpose/Details (attach documentation as required)

Financial Assessment - Commentary

Self-assessment of the capacity to service the loan and ability to meet ongoing recurrent & capital needs.
Comment on future year cash flow projections and provide supporting documentation.

Documents Required

Budget	Current year - Board approved	<input type="checkbox"/>
Projections	Following years projected budget	<input type="checkbox"/>
Previous Years	Audited Financials	<input type="checkbox"/>
Capital Project	Capital Project Committee Submission	<input type="checkbox"/>
Confirmation Letter	Capital Project Committee approval to obtain finance	<input type="checkbox"/>
Certificate of Currency	Confirmation of building insurance if applicable	<input type="checkbox"/>

Key Performance Indicators - Finance

Indicator	Description	Best Practice	Previous Year	Year End Projection
EBID	Operating result before interest, depreciation & amortisation ÷ Total Income.	11%		
Debt Repayment/Total Recurrent Income	Loan Repayments (incl Interest) ÷ Total Recurrent Income.	6%		
Cash Flow Adequacy	Net cash from operations before interest ÷ cash payments for PPE and debt repayment incl interest.	1		
Interest Cover	Net cash from operations before interest ÷ interest expense.	5 to 6		
Working Capital Ratio	Current Assets ÷ Current Liabilities.	1		
Liabilities/Equity	Total Liabilities ÷ Total Equity.	30%		

Comments:

Authorisation

Signature	<input type="text"/>	Signature	<input type="text"/>
Name	<input type="text"/>	Name	<input type="text"/>
Principal	<input type="text"/>	Business Manager	<input type="text"/>
Date	<input type="text"/>	Date	<input type="text"/>

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CDF USE ONLY

Comments from the Executive Director, Administration & Finance:	Comments from Manager, Client Services:	Recommendation/Approval by CFO:	Approval by the Catholic Development Fund Board:
Signature:	Signature:	Signature:	Signature:
Date:	Date:	Date:	Date:

OFFICE USE ONLY

Loan Established:	PP Established:	Checked by:
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