

District Office Site Visit Checklist for Microloan Intermediaries

Intermediary Name			
*DBA or *FKA	*DBA: Doing Business As *FKA: Formally Known As		
Location Visited	Street Address 1		
	Street Address 2		
	City	State	Zip Code
Visited Multiple Locations	☐ Yes ☐ No If "Yes", enter additional location/s in section: Additional Site Visit Locations .		
Website Address			
Site Visit Type	☐ Onsite ☐ Virtual/Remote		
Site Visit Date	Date format: MM/DD/YYYY Click or tap to enter a date.		
Description of Office Visited	Please provide a brief description of the office and any notable observations of the building.		
Participants			
	Name	Title	

Note: According to the Paperwork Reduction Act, you are not required to respond to any collection of information unless it displays a currently valid OMB Control Number. The number for this collection of information is 3245-0365. The total estimated time to respond to this collection of information, including gathering and maintaining the data needed, and completing and reviewing the collection of information, is 210 minutes. You may send comments or questions regarding this estimated time or any other aspect of this collection of information including suggestions for reducing the time or other burden to: Director, Records Management Division, 409 Third Street, S.W., Washington D. C. 20416, and Desk Officer for the Small Business Administration, Office of Management and Budget, New Executive Office Building, Room 10202, Washington DC 20503. PLEASE DO NOT SEND FORMS TO THESE ADDRESSES.

Disclosure of Information – Requests for information contained herein may be denied unless SBA has the written permission of the individual to release the information to the requestor or unless the information is subject to disclosure under the Freedom of Information Act, 5 U.S.C. §552. The Privacy Act, 5 U.S.C. §552a, authorizes SBA to make certain "routine uses" of information protected by that Act. One such routine use is the disclosure of information maintained in SBA's system of records when this information indicates a violation or potential violation of law, whether civil, criminal, or administrative in nature. Specifically, SBA may refer the information to the appropriate agency, whether Federal, State, local or foreign, charged with responsibility for, or otherwise involved in investigation, prosecution, enforcement, or prevention of such violations. Another routine use is disclosure to other Federal agencies conducting background checks but only to the extent the information is relevant to the requesting agencies' function. See, 74 F.R. 14890 (2009), and as amended from time to time for additional background and other routine uses.

[illegible]

Contacts

Please provide contact information for 1) Board of Directors – Chair and 2) CEO, Executive Director and/or President.

Board of Directors - Chair	Position	☐ Permanent ☐ Interim ☐ Vacant ☐ NA
		If “Vacant” or “Interim”, provide details on plan to fill below (e.g., timeline efforts, etc.):
	Name	
	Email	
Phone		
Chief Executive Officer	Position	☐ Permanent ☐ Interim ☐ Vacant ☒ NA
		If “Vacant” or “Interim”, provide details on plan to fill below (e.g., timeline efforts, etc.):

	Name	
	Email	
	Phone	
	☐ OCRM Primary Contact	
	☐ OCRM Alternate Contact	
President	Position	☐ Permanent ☐ Interim ☐ Vacant ☐ NA
		If "Vacant" or "Interim", provide details on plan to fill below (e.g., timeline efforts, etc.):
	Name	
	Email	
	Phone	
	☐ OCRM Primary Contact	
	☐ OCRM Alternate Contact	
Executive Director	Position	☐ Permanent ☐ Interim ☐ Vacant ☐ NA
		If "Vacant" or "Interim", provide details on plan to fill below (e.g., timeline efforts, etc.):
	Name	
	Email	
	Phone	
	☐ OCRM Primary Contact	
	☐ OCRM Alternate Contact	

Contacts (continued)		
A minimum of two OCRM contacts is required. If a Primary and Alternate contact was identified on the previous page, please skip to the next section; otherwise, please provide additional contact information below.		
OCRM Primary Contact	Position	☐ Permanent ☐ Interim ☐ Vacant ☐ NA
		If "Vacant" or "Interim", provide details on plan to fill below (e.g., timeline efforts, etc.):
	Name	
	Title	
	Email	
	Phone	

OCRM Alternate Contact	Position	☐ Permanent ☐ Interim ☐ Vacant ☐ NA
		If "Vacant" or "Interim", provide details on plan to fill below (e.g., timeline efforts, etc.):
	Name	
	Title	
	Email	
	Phone	
*Optional OCRM Alternate Contact	Position	☐ Permanent ☐ Interim ☐ Vacant ☐ NA
		If "Vacant" or "Interim", provide details on plan to fill below (e.g., timeline efforts, etc.):
	Name	
	Title	
	Email	

District Office Site Visit Checklist for Microloan Intermediaries

Loan Note Review (#1)	
Loan Sequence Number	
Closing Date	
Loan Amount	
Borrower Name	
1.1. Review performed and the following statement in its entirety appears in the body of the Microloan Note or as an addendum initialed by Microloan Borrower. ☐ Yes ☐ No “This note has been pledged to the U.S. Small Business Administration (SBA) as collateral. Further assignment cannot be made without prior written consent of SBA.” If “No”: ☐ Partial verbiage was present. ☐ No verbiage was present. If the answer is “No”, please provide the specific verbiage stated on the Note.	

a) Review performed and the Microloan Note contains original signature(s).

☐

Yes

☐

No

If “No”, please provide a summary of the contributing factors to non-compliance below.

b) Verified the original Microloan Note is kept in a “disaster proof” cabinet.

☐

Yes

☐

No

If “No”, please provide a summary of the contributing factors to non-compliance below.

Loan Note Review (#2)	
Loan Sequence Number	
Closing Date	
Loan Amount	
Borrower Name	
1.2. Review performed and the following statement in its entirety appears in the body of the Microloan Note or as an addendum initialed by Microloan Borrower. ☐ Yes ☐ No “This note has been pledged to the U.S. Small Business Administration (SBA) as collateral. Further assignment cannot be made without prior written consent of SBA.” If “No”: ☐ Partial verbiage was present. ☐ No verbiage was present. If the answer is “No”, please provide the specific verbiage stated on the Note.	
a) Review performed and the Microloan Note contains original signature(s). ☐ Yes ☐ No If “No”, please provide a summary of the contributing factors to non-compliance below.	
b) Verified the original Microloan Note is kept in a “disaster proof” cabinet. ☐ Yes ☐ No If “No”, please provide a summary of the contributing factors to non-compliance below.	
Loan Sequence Number	
Closing Date	
Loan Amount	
Borrower Name	
1.3. Review performed and the following statement in its entirety appears in the body of the Microloan Note or as an addendum initialed by Microloan Borrower. ☐ Yes ☐ No	

"This note has been pledged to the U.S. Small Business Administration (SBA) as collateral. Further assignment cannot be made without prior written consent of SBA."

If "No": ☐ Partial verbiage was present. ☐ No verbiage was present.

If the answer is "No", please provide the specific verbiage stated on the Note.

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a) Review performed and the Microloan Note contains original signature(s).

☐
Yes

☐ No

If "No", please provide a summary of the contributing factors to non-compliance below.

--

b) Verified the original Microloan Note is kept in a "disaster proof" cabinet.

☐
Yes

☐ No

If "No", please provide a summary of the contributing factors to non-compliance below.

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Loan Sequence Number	
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Closing Date	
--------------	--

Loan Amount	
-------------	--

Borrower Name	
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1.4. Review performed and the following statement in its entirety appears in the body of the Microloan Note or as an addendum initialed by Microloan Borrower.

☐
Yes

☐ No

"This note has been pledged to the U.S. Small Business Administration (SBA) as collateral. Further assignment cannot be made without prior written consent of SBA."

If "No": ☐ Partial verbiage was present. ☐ No verbiage was present.

If the answer is "No", please provide the specific verbiage stated on the Note.

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a) Review performed and the Microloan Note contains original signature(s).

☐
Yes

☐ No

If “No”, please provide a summary of the contributing factors to non-compliance below.

b) Verified the original Microloan Note is kept in a “disaster proof” cabinet.

☐
Yes

☐ No

If “No”, please provide a summary of the contributing factors to non-compliance below.

Paid-in-Full (PIF) /Charged Off (CO) Loan File Review

2. Files are maintained in records for a duration of six years following the final disposition of each loan.

☐
Yes

☐ No

Comments

PIF/CO Loan File Review (#1)

Loan Sequence Number

Closing Date

Loan Amount

Borrower Name

2.1. The PIF/CO loan file contains relevant documents and records. (e.g., application, credit memo, eligibility determination, CAIVRS, Sam.gov search, no credit elsewhere>\$20,000, evidence of legal status, TA records, Microloan Note, Note Modification(s) if applicable, evidence of use of proceeds, payment history, evidence of payment history, evidence of payment in full, business revenue, jobs created and retained, cause for charge off, etc.).

☐
Yes

☐ No

Comments

PIF/CO Loan File Review (#2)	
Loan Sequence Number	
Closing Date	
Loan Amount	
Borrower Name	
2.2. The PIF/CO loan file contains relevant documents and records. (e.g., application, credit memo, eligibility determination, CAIVRS, Sam.gov search, no credit elsewhere>\$20,000, evidence of legal status, TA records, Microloan Note, Note Modification(s) if applicable, payment history, evidence of payment history, evidence of payment in full, business revenue, jobs created and retained, cause for charge off, etc.). ☐ Yes ☐ No Comments	

PIF/CO Loan File Review (#3)	
Loan Sequence Number	
Closing Date	
Loan Amount	
Borrower Name	
2.3. The PIF/CO loan file contains relevant documents and records. (e.g., application, credit memo, eligibility determination, CAIVRS, Sam.gov search, no credit elsewhere>\$20,000, evidence of legal status, TA records, Microloan Note, Note Modification(s) if applicable, payment history, evidence of payment history, evidence of payment in full, business revenue, jobs created and retained, cause for charge off, etc.). ☐ Yes ☐ No Comments	

PIF/CO Loan File Review (#4)

Loan Sequence Number	
Closing Date	
Loan Amount	
Borrower Name	

2.4. The PIF/CO loan file contains relevant documents and records. (e.g., application, credit memo, eligibility determination, CAIVRS, Sam.gov search, no credit elsewhere>\$20,000, evidence of legal status, TA records, Microloan Note, Note Modification(s) if applicable, payment history, evidence of payment history, evidence of payment in full, business revenue, jobs created and retained, cause for charge off, etc.). ☐ **Yes** ☐ **No**

Comments

PIF/CO Loan File Review (#5)	
Loan Sequence Number	
Closing Date	
Loan Amount	
Borrower Name	

2.5. The PIF/CO loan file contains relevant documents and records. (e.g., application, credit memo, eligibility determination, CAIVRS, Sam.gov search, no credit elsewhere>\$20,000, evidence of legal status, TA records, Microloan Note, Note Modification(s) if applicable, payment history, evidence of payment history, evidence of payment in full, business revenue, jobs created and retained, cause for charge off, etc.). ☐ **Yes** ☐ **No**

Comments

Loan Request Denials by the Intermediary	
3. Files are maintained in records for a duration of three years following the Intermediary's decline of the loan request. ☐ Yes ☐ No If "No": ☐ Partial information was present. ☐ No information was present. Comments	

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Declined Application Review (#2)		
Date of Application		
Requested Loan Amount		
Borrower Name		
Purpose of Loan		
Reason for the loan decline		
3.2. Denied Credit Documentation includes loan application (e.g., date, applicant's information, amount requested, purpose of the loan request) AND decision letter/memo. ☐ Yes ☐ No If "No", summarize any potential reasons or challenges that may have contributed to the failure to retain declined application records consistently below: <table border="1"><tr><td></td></tr></table>		

Declined Application Review (#3)		
Date of Application		
Requested Loan Amount		
Borrower Name		
Purpose of Loan		
Reason for the loan decline		
3.3. Denied Credit Documentation includes loan application (e.g., date, applicant's information, amount requested, purpose of the loan request) AND decision letter/memo. ☐ Yes ☐ No If "No", summarize any potential reasons or challenges that may have contributed to the failure to retain declined application records consistently below: <table border="1"><tr><td></td></tr></table>		

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Declined Application Review (#4)	
Date of Application	
Requested Loan Amount	
Borrower Name	
Purpose of Loan	
Reason for the loan decline	

3.4. Denied Credit Documentation includes loan application (e.g., date, applicant’s information, amount requested, purpose of the loan request) **AND** decision letter/memo. ☐ Yes ☐ No

If “No”, summarize any potential reasons or challenges that may have contributed to the failure to retain declined application records consistently below:

Declined Application Review (#5)	
Date of Application	
Requested Loan Amount	
Borrower Name	
Purpose of Loan	
Reason for the loan decline	

3.5. Denied Credit Documentation includes loan application (e.g., date, applicant’s information, amount requested, purpose of the loan request) **AND** decision letter/memo. ☐ Yes ☐ No

If “No”, summarize any potential reasons or challenges that may have contributed to the failure to retain declined application records consistently below:

Technical Assistance Record Examination (#1)	
Select the borrower from the Note review sample and retrieve Intermediary’s records to start the review.	
Loan Sequence Number	
Borrower Name	

TA Recipient Name		
4. Does the Intermediary have a Technical Assistance (TA) Record for this recipient?	☐ Yes	☐ No
4.1. Did the Intermediary track TA hours delivered?	☐ Yes	☐ No
4.2. Did the Intermediary track what was taught?	☐ Yes	☐ No
4.3 Did the Intermediary show who delivered the TA?	☐ Yes	☐ No
4.4. Did the Intermediary track how the TA was delivered, i.e., online, one-on-one, classroom?	☐ Yes	☐ No
4.5. Did the Intermediary break out hours by Pre-loan and Post-loan?	☐ Yes	☐ No

Technical Assistance (TA) Detailed Examination	
4.6 Contacted microloan borrower to confirm receipt of the TA as reported. [Optional]	☐ Yes
Meeting Method: ☐ Phone ☐ In-person ☐ Email ☐ Virtual ☐ Drive by	
4.7 Is recipient a microloan borrower?	☐ Yes
4.8 Indicate type of TA borrower received.	
Check all that apply: ☐ Pre TA ☐ Post TA ☐ None	
4.9 What subjects have they been taught? (Please list all relevant subjects below.)	
Date Received. (Please list all relevant dates below.)	
. Total number of hours Technical Assistance Borrower received.	
<i>Pre-TA Total Hours</i>	<i>Post TA Total Hours</i>
Please explain any challenges encountered in reaching the borrower and/or any issues identified during the review process.	

Technical Assistance Record Examination (#2)

Select the borrower from the Note review sample and retrieve Intermediary's records to start the review.

Loan Sequence Number	
Borrower Name	
TA Recipient Name	

4. Does the Intermediary have a Technical Assistance (TA) Record for this recipient?	☐ Yes	☐ No
4.1. Did the Intermediary track TA hours delivered?	☐ Yes	☐ No
4.2. Did the Intermediary track what was taught?	☐ Yes	☐ No
4.3 Did the Intermediary show who delivered the TA?	☐ Yes	☐ No
4.4. Did the Intermediary track how the TA was delivered, i.e., online, one-on-one, classroom?	☐ Yes	☐ No
4.5. Did the Intermediary break out hours by Pre-loan and Post-loan?	☐ Yes	☐ No

Technical Assistance (TA) Detailed Examination

4.6 Contacted microloan borrower to confirm receipt of the TA as reported. [Optional]	☐ Yes	☐ No
Meeting Method: ☐ Phone ☐ In-person ☐ Email ☐ Virtual ☐ Drive by		
4.7 Is recipient a microloan borrower?	☐ Yes	☐ No
4.8 Indicate type of TA borrower received.		
Check all that apply: ☐ Pre TA ☐ Post TA ☐ None		
4.9 What subjects have they been taught? (Please list all relevant subjects below.)		
Date Received. (Please list all relevant dates below.)		
Total number of hours Technical Assistance Borrower received.		
	Pre-TA Total Hours	Post TA Total Hours

Please explain any challenges encountered in reaching the borrower and/or any issues identified during the review process.

Technical Assistance Record Examination (#3)

Select the borrower from the Note review sample and retrieve Intermediary's records to start the review.

Loan Sequence Number

Borrower Name

TA Recipient Name

4. Does the Intermediary have a Technical Assistance (TA) Record for this recipient? ☐ Yes ☐ No

4.1. Did the Intermediary track TA hours delivered? ☐ Yes ☐ No

4.2. Did the Intermediary track what was taught? ☐ Yes ☐ No

4.3 Did the Intermediary show who delivered the TA? ☐ Yes ☐ No

4.4. Did the Intermediary track how the TA was delivered, i.e., online, one-on-one, classroom? ☐ Yes ☐ No

4.5. Did the Intermediary break out hours by Pre-loan and Post-loan? ☐ Yes ☐ No

Technical Assistance (TA) Detailed Examination

4.6 Contacted microloan borrower to confirm receipt of the TA as reported. [Optional] ☐ Yes ☐ No
Meeting Method: ☐ Phone ☐ In-person ☐ Email ☐ Virtual ☐ Drive by

4.7 Is recipient a microloan borrower? ☐ Yes ☐ No

4.8 Indicate type of TA borrower received.
Check all that apply: ☐ Pre TA ☐ Post TA ☐ None

4.9 What subjects have they been taught? (Please list all relevant subjects below.)

Date Received. (Please list all relevant dates below.)	
Total number of hours Technical Assistance Borrower received.	
<i>Pre-TA Total Hours</i>	<i>Post TA Total Hours</i>
Please explain any challenges encountered in reaching the borrower and/or any issues identified during the review process.	

Microloan Intermediary Operations Overview

7. Has Intermediary's primary market been subject to any natural disasters?

(e.g., fires, earthquake, tornado, flood, etc. Note: COVID-19 is not classified as a natural disaster.)

☐ Yes ☐ No ☐ NA

If "Yes", summarize negative impacts Intermediary has experienced below:

8. Intermediary is enrolled in Lender Match to receive requests for loans.

☐ Yes ☐ No ☐ NA

If "No", summarize discussion that took place with Intermediary below:

9. Describe Intermediary's use of technology.

a) **Loan Administration** (e.g., loan origination, closing, servicing, etc.)

b) **Accounting IT system** (e.g., disbursement of loans, loan status, payment history, etc.)

c) **Technical Assistance IT system** (e.g., recording or TA activities, etc.)

d) **Overall, IT system has adequate data security measures** (e.g., access controls, encryption protocols, firewalls, and intrusion detection system), **privacy and data protection to safeguard sensitive information, and business continuity and disaster recovery strategies to recover from IT disruptions** (e.g., system failures, natural disasters, or cyber incidents, etc.).

☐ Yes ☐ No

Comments

10. Intermediary wishes to request or has requested an expansion of its regions.

☐

Yes

☐

No

Comments

11. District Office has a recommendation for any training that would benefit the Intermediary.

☐

Yes

☐

No

If “Yes”, summarize training needs Intermediary has below:

12. a) Intermediary attended Microlending and/or Technical Assistance related conferences in the past two years.

☐

Yes

☐

No

If “Yes”, name the conference(s) below:

b) Intermediary has plans to attend any Microlending and/or Technical Assistance related conferences within the next 12 months.

☐

Yes

☐

No

If “Yes”, name the conference(s) below:

13. Intermediary has Microloan Program related issues they want to discuss.

☐

Yes

☐

No

If “Yes”, summarize related issues Intermediary wants to discuss below:

Additional Site Visit Locations

Additional Site Visit Location (#1) Notes			
Intermediary Site Visit Location Address	Street Address 1		
	Street Address 2		
	City	State	Zip Code

Additional Site Visit Location (#2) Notes			
Intermediary Site Visit Location Address	Street Address 1		
	Street Address 2		
	City	State	Zip Code

District Office Name	
Summary of Deficiencies: Briefly list and explain the key deficiencies discussed during the exit meeting	

Future Improvements: Note how the organization plans to strengthen its processes to prevent similar issues moving forward	
General Comments and Observations: Highlight any material changes, noteworthy developments or other information the Reviewer wishes to convey to the HQ	
Reviewer Name	
Signature	
Date	

Time Allocation: Travel Time and Duration of Review

Please provide the round-trip travel time from [origin] to the visited site.	
Please indicate the duration of time it took to complete the review.	

You have completed the Site Visit Checklist.
Save and submit to ocrmmicro@sba.gov