



# **COVID-19 Small Business Recovery Program Revolving Loan Fund**

## **APPLICATION FOR LOAN**

### **I. APPLICANT INFORMATION**

Name of Applicant (person or entity taking out the loan): \_\_\_\_\_

Name of Contact Person (if different): \_\_\_\_\_

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

City, State, Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

### **II. INFORMATION ABOUT YOUR BUSINESS**

Name of Business: \_\_\_\_\_

Address of Business: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

County: \_\_\_\_\_

Legal Status (circle one)      Corporation      Limited Liability Company      Limited Partnership  
Partnership      Limited Liability Partnership      Sole Proprietorship  
Other (please explain): \_\_\_\_\_

NYS Region:      Capital District      North Country

Type of Business: \_\_\_\_\_ Current # of Employees: \_\_\_\_\_

Date Established: \_\_\_\_\_ Current # of Minorities: \_\_\_\_\_

IRS Employer ID #: \_\_\_\_\_ Current # of Veterans: \_\_\_\_\_

Number of Employees before COVID-19 pandemic: \_\_\_\_\_

Number of Jobs Retained: \_\_\_\_\_

**III. MANAGEMENT**

List the names of all owners, officers, directors and/or partners.

Name & Title: \_\_\_\_\_ % Ownership: \_\_\_\_\_

Name & Title: \_\_\_\_\_ % Ownership: \_\_\_\_\_

Name & Title: \_\_\_\_\_ % Ownership: \_\_\_\_\_

Name & Title: \_\_\_\_\_ % Ownership: \_\_\_\_\_

Attorney for Applicant: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Firm Name and Address: \_\_\_\_\_

Accountant for Applicant: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Firm Name and Address: \_\_\_\_\_

**IV. BACKGROUND INFORMATION**

Is the Company/person presently the subject of any litigation, or is any litigation threatened, which would have a material adverse effect on the Company/person's financial condition?	Yes	No
Is the Applicant delinquent in the payment of any loans?	Yes	No
Has the Applicant been declared in default on any of its loans?	Yes	No
Has the Company or any of its affiliates ever been involved in a bankruptcy, a creditor's rights or receiving proceeding, or sought protection from creditors?	Yes	No
Has the Company ever settled debt with a lending institution for less than the full amount outstanding?	Yes	No
Are there currently any unsatisfied judgements against any principal of the Company?	Yes	No
Has any senior manager or principal of the Company ever been convicted of any felony or misdemeanor, other than a minor traffic violation, or are any such charges pending?	Yes	No
Has the Company or any of its affiliates, been cited for a violation of federal, state or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution or other operating practices?	Yes	No
Are there any outstanding judgements or liens pending against the Company other than liens in the normal course of business?	Yes	No
Is the Company or any principal's delinquent on and New York State, federal or local tax obligations?	Yes	No

If you answered "Yes" to any of these questions, please provide an explanation below:

I hereby certify that the information provided above is true and accurate to the best of my knowledge and belief.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

**V. REFERENCES**

Please provide the following information on three (3) current customers/clients

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Provide the following information on the Applicant's primary banking relationship.

Bank Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Contact Person: \_\_\_\_\_

**VI. DESCRIPTIVE INFORMATION**

Provide a Brief Narrative of the Applicant's history:

Describe the Applicant's current operations, including products, customers/markets, etc.

Identify and describe the Applicant's current operating facilities – both owned and/or leased

**VII. PROJECT DESCRIPTION**

How did you hear about this Loan Program?

Will the proposed project result in any business or residential relocation?                      Yes                      No

Provide a description on how your business was negatively affected by the COVID-19 pandemic

**VII. NON-DUPLICATION OF GOVERNMENT SUPPORT**

Did the Applicant receive any COVID-19 related government assistance?

Yes

No

If yes, please describe:

Name of Loan/Grant	Granting Agency	Total Dollar Amount	Time Period of Covered Expenses	Description of Expenses Covered	Collateral Used to Secure Loan

Did any other business owned by a principal or the Applicant receive any COVID-19 related government assistance?

Yes

No

If yes, please describe:

Name of Loan/Grant	Granting Agency	Total Dollar Amount	Time Period of Covered Expenses	Description of Expenses Covered	Collateral Used to Secure Loan

I hereby certify that no proceeds from this loan will be used to fund expenses for which the applicant, any subsidiaries or any other businesses owned by a principal of the Applicant, has received other government funding for.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

**VIII. FUNDING**

Requested Loan Amount: \$ _____	Requested Repayment Term: _____ Years
Special Conditions	

Project Cost		Source of Funds	
Construction/Renovations	\$	LCLGPRB	\$
Equipment	\$	Bank Financing	\$
Supplies/Materials	\$	Applicant's Cash	\$
Working Capital	\$	Applicant's Equity	\$
Other:	\$	Other:	\$
Other:	\$	Other:	\$
<b>Total</b>	\$	<b>Total</b>	\$

*Note: LCLGRP loans are between \$25,000 - \$150,000*

**Please attach to the application any vendor quotes, negotiated sales prices, purchase agreements, catalog prices, etc.**

Summarize the status of any other proposed financial assistance, public or private, for the business.

**IX. COLLATERAL**

Type of Collateral	Present Market Value	Present Mortgage Balance	Cost Less Depreciation
Land & Building	\$	\$	\$
Accounts Receivable	\$	\$	\$
Machinery & Equipment	\$	\$	\$
Furniture/Fixtures	\$	\$	\$
Other	\$	\$	\$
Total	\$	\$	\$

*Please attach justification paperwork to the application.*

**X. JOBS**

What is the Company's current employment and projected job retention for each of the next three years?				
	Current	Year 1	Year 2	Year 3
Full Time				
Part Time				

Please describe the types of jobs retained (titles and number in each title, full/part time, salaries/hourly wages, benefits, required skills, etc)

## **XI. LIST OF DATA REQUIRED WITH APPLICATION**

Financial statements of the company for the last **three** years

Projected balance sheet and income statement for **three** years following the receipt of the loan

Projected cash flows for at least the **three** years following receipt of the loan

Business debt schedule

Interim financial statements of the company through the most recent month available, but in no case more than three months prior to the loan application date

Previous **three** years of business Federal Tax Returns and Schedule C

Previous **three** years of personal Federal Tax Returns and Schedule C

Personal financial statements (either on a standard bank form or in a comparable format) for each principal owning at least 20% of the company

Aging accounts Receivable and Payable Schedule

Financial statements for each company and/or individual who will act as a guarantor of the requested financing

Current business plan

Resumes of owner(s) and key management personnel

Projected employment descriptions and salary estimates

Copy of dba, partnership papers or incorporation agreement

Completed Credit Authorization form

Franchise Agreement (if applicable)

Disclaimer(s)

Certification(s) regarding disbarment/information on pending litigation (if applicable)

Supporting documentation of worth of collateral

If funds are being used to purchase equipment or materials, a quote or bid from a reputable vendor must be provided. The LCLGRP strongly suggest that borrowers obtain at least three quotes to ensure the best value is found.

If funds are being used for any form of construction or renovation project, a quote or bid from a reputable contractor must be provided. The LCLGRP strongly suggest that borrowers obtain at least three quotes to ensure the best value contractor is hired.

If funds are being used for working capital, a cash flow statement from the past three years must be provided.



**XII. APPLICANTS CERTIFICATION**

I (we) authorize the Lake Champlain – Lake George Regional Planning Board (LCLGRP) to order credit reports and/or other financial background information on my (our) personal and business financial background. I (we) authorize disclosure of all information submitted in connection with this application to any financial institution in consideration of any assistance that may be provided. I (we) waive all claims against the LCLGRP and its consultants.

I (we) attest that to the best of my (our) knowledge and belief, the information contained in the foregoing application and its attachments is correct and true. I (we) an (are) aware that the filing of a false instrument in connection with this application may constitute an attempt to defraud the LCLGRP and the US Economic Development Administration and may be a felony under the laws of New York State and federal government.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

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Date

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Print Name

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Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

STATE OF NEW YORK, COUNTY OF \_\_\_\_\_: ss

On the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, before me, the undersigned, a Notary Public in and for the State, personally appeared \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signatures(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

\_\_\_\_\_  
Notary Public

STATE OF NEW YORK, COUNTY OF \_\_\_\_\_: ss

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\_\_\_\_\_  
Notary Public

LAKE CHAMPLAIN – LAKE GEORGE REGIONAL PLANNING BOARD

REVOLVING LOAN FUND

CREDIT AUTHORIZATION

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

In connection with my application for a business loan through the Lake Champlain – Lake George Regional Planning Board, I hereby authorize you to investigate my credit worthiness as part of the loan review process.

Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

Signed: \_\_\_\_\_