#### ELA Business Growthinc. Financing for Growing Businesses

# EDA CARES ACT Loan Application

The applicant shall complete this entire form, sign and provide all requested supporting documentation. Applicant is notified that the information contained herein will be utilized by ECIA to determine whether the Applicant meets eligibility requirements and is credit worthy.

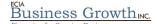
<b>General Business Information</b>	l							
Business Applicant Legal Name:				Legal Structure:		]	Federal Tax I.D. #:	
Applicant Physical Address:			City:		County:		State:	Zip:
Contact Name:	Phone:			Email:			Duns #	<b>#:</b>
Nature of Business Operations:		# of E	mployees:	State Incorp	orated:	Dat	te Establ	ished:

Loan Request Inform	ation
Loan Request Amount:	
Loan Purpose:	

<b>Business</b> P	rincipal Owners							
Identify each p	Identify each person or entity with at least 20% or more ownership interest in the Applicant. Attach additional sheet if needed.							
Name:	Social Security No.:	Birthdate:	Address:	Title:	Phone No.:	% of Ownership:		

References		
Bank Name:	Contact Name:	Phone:
Accountant – Firm Name:	Accountant Name:	Phone:
Attorney-Firm Name:	Attorney Name:	Phone:

Employment & Job Creat	ion:								
# of Current Employees:	Full-time:		Part-time						
How many new employees as a	result of this project	t? Full	Full-time:		Part-t	ime:			
COVID-19 Impact:									
Describe impact of COVID-19	on								
business:									
Federal Support:									
Describe COVID-19 Federal S	upport that received	1 (i.e. PPI	P, EIDL,	SBA	, etc) [Inclu	ıde an	nount and terr	ns for repayment]	]:



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## **Certification, Authorization & Signature**

## **EQUAL OPPORTUNITY:**

The Federal Equal Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided that the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal agency that administers compliance with this law is the Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.

#### FINANCIAL PRIVACY:

ECIA commits to protecting any and all personal information provided in conjunction with a loan application, and also commits to collect and disclose this information only as allowed by law.

#### **IDENTIFICATION PROCEDURES:**

To help the government fight the funding of terrorism and money laundering activities, federal law requires ECIA to obtain, verify, and record information that identifies each person who applies for a loan. This means that you will be required to provide your legal name, address, date of birth, and other information, including a copy of a driver's license or other identifying document.

#### **INDEMNIFICATION PROVISIONS:**

Applicant(s) will indemnify and hold ECIA and/or its agents harmless from any and all loss or injury, including reasonable attorney fees, resulting or arising from failure by the applicant to receive such loan, and/or any loss or liability to applicants or the businesses of the applicant. All parties agree that there are no other promises, terms, or agreements (oral or written) between ECIA and the applicant business, and that the ECIA loan program rules and fees are subject to change at any time.

The undersigned certifies, warrants and represents that all information in this application and on each document required to be submitted herewith, including federal income tax returns are true, correct, and complete to the best of its knowledge, information and belief. Applicant understands and acknowledges that ECIA is relying on the information contained herein in making eligibility determinations and financing decisions and has the right to so rely. False information, in addition to disqualifying the applicant from any further consideration for financial assistance, may also subject applicant and the undersigned to litigation to recover ECIA's expenses related to reviewing this application and/or the costs to collect any loan balances.

The undersigned is an authorize signer on behalf of the applicant. The undersigned hereby consents to and authorizes ECIA staff's investigation into the credit worthiness of the applicant and applicant's principal owners. The undersigned authorizes ECIA to make such inquiries and gather such information as ECIA deems necessary and reasonable concerning any information provided to ECIA on their application or on any such required document, including inquiries to the Internal Revenue Service and any local credit bureau reporting agencies.

The applicant agrees to comply with all reporting requirements on forms supplied by ECIA. The applicant agrees to comply with all state and federal requirements.

The undersigned further agrees to notify ECIA promptly of any material change in any such information. Further, the undersigned understands that ECIA may share information regarding the application and loan documents with the city of Dubuque.

Business Applica	ant Name:	
Signature:		Date:
Print Name:		Title:
Signature:		Date:
Print Name:		Title:

## A non-refundable Application fee of \$500 is due at the time this application is submitted. The application fee will be subtracted from the processing fee of 1.5% of the loan amount at loan closing time. DATA COLLECTION FORM

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## EDA CARES ACT Loan Application

## IMPORTANT NOTICE TO ALL APPLICANTS FOR ASSISTANCE

In order to meet the requirements of the Federal Register Vol 62 No. 210, Revision to the Standards for the Classification of Federal Data on Race and Ethnicity, all application forms for the Rural Development financed programs must include the following disclosure statement:

The following information is requested by the Federal Government in order to monitor compliance with Federal Laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, but are encouraged to do so. However, if you choose not to furnish it, we are required to note the race/national origin of individual applicants on the basis of visual observations or surname. The information on this page will not be used in evaluating your application or to discriminate against you in any way. The information on this sheet will be kept strictly confidential.

<b>Business Name:</b>	
<b>Owner Name*:</b>	
*If the business seek	ing assistance is owned by more than one individual, please provide the following

information for each individual owner.

## □ I DO NOT WISH TO PROVIDE THIS INFORMATION.

# RACE ETHNICITY GENDER Asian Hispanic or Latino Male American Indian/Alaska Native Not Hispanic or Latino Female Black or African American Image: Comparison of C

## NOTE: MARK ONLY ONE BOX PER SECTION

## For Office Use Only:

Information completed by:
□ Applicant
$\Box$ E.C.I.A. Staff

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## **EDA CARES ACT Loan Application**

## Additional Required Documentation (submit with application):

 $\Box$  Letter requesting the funds and detailing the exact uses of the loan proceeds.

- $\hfill\square$  Business plan to include at minimum the following:
  - Description and history of the business
  - Detail the proposed project for which funding is being requested
  - Timeline for the proposed project
  - Description of project costs
  - Analysis of target market and competition
  - Marketing and sales strategies of the business
  - Background of owners and/or management if resume not provided
  - Pro forma balance sheet and three-year projected profit and loss statement with notes and assumptions
- $\Box$  Current interim financial statements dated within 60 days of the application.
- $\Box$  Business balance sheet and profit & loss statement for the previous two years
- □ Last 3 years signed/dated applicant tax returns
- □ A schedule of existing debt including creditor name, balance, payment amount, purpose, & collateral
- □ Entity legal documents: (i.e. Evidence of Incorporation: Articles of Incorporation; Articles of Organization; Bylaws; Board Resolutions; Certificate of Limited Partnership; Partnership Agreement; Tax-Exempt Status Letter; etc.)
- Resolution or document authorizing the applicant to enter into a financial assistance agreement with ECIA
- Personal financial statement and most recent signed/dated tax return of all owners with 20% or more interest in property
- Copy of driver's license for each owner and for individual(s) authorized to execute on a loan for the applicant
- $\Box$  Data Collection form for each owner
- $\Box$  Duns # of Business and related entities
- □ Copy of lease and/or purchase agreement, if applicable
- □ Copy of franchising agreements, if applicable

## Mail or deliver application materials to:

Matt Specht ECIA Business Growth 7600 Commerce Park Dubuque, IA 52002 <u>mspecht@ecia.org</u> Questions: (563) 690-5721