



Application for Section 504 Loans

Section One: Business Information

Applicant Name (Eligible Passive Company, if applicable)			
Legal Name		Business Address	
DBA or Tradename	Legal Structure	Tax ID	DUNS Number
Contact Name	Email Address	Phone Number	Business Web Address
Operating Company (if Applicant is an EPC)			
Legal Name		Business Address	
DBA or Tradename	Legal Structure	Tax ID	DUNS Number
Contact Name	Email Address	Phone Number	Business Web Address

Project Address (if different than OC Address)	Type of Business (Summary Description)

# of existing employees employed by business (including owners who work for this business)	# of jobs to be created in the next two years as a result of the loan	# of jobs to be retained in the next two years as a result of the loan (including owners who work for this business)
Loan Amount Requested	Purpose of the loan	
\$		

1. Does the Small Business Applicant have any Affiliates? Yes No
If "Yes," please attach a listing as a part of Exhibit 10
2. Have the Small Business Applicant or any Affiliates ever obtained or applied for a direct or guaranteed loan from SBA, or from any other Federal, State or local government loan program or been a guarantor on such a loan? If yes, provide relevant information in Exhibit 9 Yes No
3. Has an application for this Project previously been submitted to the SBA by any CDC or Lender in connection with any SBA program? Yes No
If yes, provide CDC/Lender Name and Loan Program: _____
4. Has the Applicant business ever declared bankruptcy? Yes No
If yes, explain and provide relevant documents in Exhibit 27
5. Is the Applicant business involved in any pending lawsuits? Yes No
If yes, explain and provide relevant documents in Exhibit 27
6. Is the Applicant business owned by one of the following? 401(k) ESOP Trust Cooperative
If the Applicant is owned by an ESOP (Employee Stock Ownership Plan) or 401(k) plan (including a Rollover as Business Start-Up (ROBS) plan), Applicant must provide evidence to the CDC that the Applicant, ESOP, and/or the 401(k) plan are in compliance with all applicable Government Agencies (e.g., IRS, Treasury, and Department of Labor) requirements and that it will comply with all relevant operating and reporting requirements.



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Business Ownership (Attach additional pages if needed)

This section requires the Small Business Applicant to disclose 100% of its ownership as well as its Key Employees that do not have an ownership stake. A Key Employee is any person (as defined in 13 C.F.R. 120.10) hired by the business to manage day-to-day operations.

If some or all of the Applicant is owned by one or more entities: For each entity, list the organization name, organization type, tax identification number, and ownership percentage, and include any individuals who own each entity (100% ownership must be disclosed). Attach additional pages as necessary.

Please be advised that the Applicant must be owned and controlled by U.S. citizens or individuals with Lawful Permanent Resident status as verified through the United States Citizenship and Immigration Services by SBA.

Eligible Passive Company (EPC) Ownership (if applicable)

Owner/Entity Name	Title/Organization Type	SSN/TIN	Ownership %

Operating Company (OC) Ownership

Owner/Entity Name	Title/Organization Type	SSN/TIN	Ownership %

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Section Two: Information Required to be Submitted by each Associate of the Applicant

Each Associate of the Applicant must separately complete and sign this Section. If the Applicant is operating under an EPC/OC structure, each of the EPC's and OC's Associates must complete and sign this section.

Name (Last, First, Middle)		Former Names and Dates Used	
U.S. Citizen?	USCIS Registration # (if Legal Permanent Resident)	If a non-US citizen or LPR, provide Country of Citizenship	
Yes <input type="checkbox"/> No <input type="checkbox"/>			
Place of Birth (City and State or Foreign Country)		SSN or IRS TIN	Date of Birth
Phone Number (Home or Cell)		Home Address (Street, City, State, Zip code)	

Answer the following Yes/No Questions and Initial to the Right of Each Answer

Initial

1. Do you have an ownership interest in any other entity that has existing SBA loans? Yes No _____

If yes, provide loan numbers and current status: _____

2. Are you presently subject to an indictment, criminal information, arraignment, or other means by which formal criminal charges are brought in any jurisdiction? Yes No _____

If yes, the Applicant is not eligible for SBA assistance

3. Have you been arrested in the last 6 months for any criminal offense? Yes No _____

If yes, please provide relevant documents as a part of Exhibit 28

4. For any criminal offense – other than a minor vehicle violation – have you ever: Yes No _____

1) been convicted; 2) pleaded guilty; 3) pleaded nolo contendere; 4) been placed on pretrial diversion; or 5) been placed on any form of parole or probation (including probation before judgment)? (If “Yes,” furnish the dates, locations, fines, sentences, level of charge (whether misdemeanor or felony), dates of parole/probation, unpaid fines or penalties, name(s) under which charged, and any other pertinent information as part of Exhibit 28)

5. Are you presently suspended, debarred, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal Department or agency? Yes No _____

If yes, the Applicant is not eligible for SBA assistance



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Section Two: Information Required to be Submitted by each Associate of the Applicant

6. If you are a 50% or more owner of the Applicant, are you more than 60 days delinquent on any obligation to pay child support arising under an administrative order, court order, repayment agreement between the holder and a custodial parent, or repayment agreement between the holder and a state agency providing child support enforcement services? **If yes, the Applicant is not eligible for SBA assistance** Yes No _____
7. Have you ever declared bankruptcy? Yes No _____
If yes, please provide relevant documents as a part of Exhibit 27
8. Are you currently the subject of any pending lawsuits (including divorce)? Yes No _____
If yes, please provide relevant documents as a part of Exhibit 27
9. Has the Applicant or any affiliated company of the Applicant as well as any Associate of the Applicant received any previous government financing? Yes No _____
If yes, please provide relevant documents as a part of Exhibit 9

Veteran/Gender/Race/Ethnicity Information

This data is collected for program reporting purposes only. Disclosure is voluntary and has no bearing on the credit decision.

Categories	Category Codes	Response
Veteran	1=Non-Veteran; 2=Veteran; 3=Service-Disabled Veteran; 4=Spouse of Veteran; X=Not Disclosed	
Gender	M=Male; F=Female; X=Not Disclosed	
Race	1=American Indian or Alaska Native; 2=Asian; 3=Black or African American; 4=Native Hawaiian or Pacific Islander; 5=White; X=Not Disclosed	
Ethnicity	H=Hispanic or Latino; N=Not Hispanic or Latino; X=Not Disclosed	

Criminal Penalties for False Statements – The undersigned certifies that all information provided in this Section Two is true and complete to the best of his or her knowledge. The undersigned acknowledges that whoever makes any false statement or report, or willfully overvalues any land property or security for the purpose of influencing in any way the action of the SBA under the Small Business Investment Act, as amended, may be fined up to \$250,000 and/or be put in jail for up to 5 years under 18 U.S.C. §1001; may be fined not more than \$5,000 and/or put in jail for not more than 2 years under 15 U.S.C. § 645; and if false statements are submitted to a Federally insured institution, may be punished by a fine of not more than \$1,000,000 or by imprisonment for up to 30 years, or both, pursuant to 18 U.S.C. § 1014. The undersigned further acknowledges that, in connection with a 504 loan, submission of any false statement to the CDC or SBA or submission of any record to the CDC or SBA omitting material information can result in civil money penalties and additional monetary liability up to three times the amount of damages which the Government sustains because of the false statement under the False Claims Act, 31 U.S.C. § 3729.

Signature: _____ Date: _____

Print Name: _____

Signer's Relationship with Applicant Business: _____