

CITY OF PORTAGE
COVID -19 BUSINESS RELIEF LOAN PROGRAM APPLICATION

Application No. _____

1. Business Owner Information :

- a. Business Name _____
- b. Owner Name _____
- c. Tax I.D (FEIN#) _____
- d. Owner Address _____
- e. Phone Number/Email _____

2. Property Owner Information:

- a. Property Address _____
- b. Owner Name _____
- c. Phone Number/Email _____

2. Briefly describe any negative financial impact your business has experienced as a result of the COVID-19 pandemic _____

3. Brief Description of what loan proceeds will be used for _____

(Attach additional pages if necessary)

- 4. Description or Type of Business _____
- 5. Number of FTE on March 12, 2020 _____ Number of PTE on March 12, 2020 _____
- 6. Number of Employees Furloughed/Laid Off after March 12, 2020 FTE _____ PTE _____
- 7. Number of Employees Today: FTE _____ PTE _____
- 8. Number of Employees Estimated in the next 6-12 months: FTE _____ PTE _____
- 9. Year Business Started: _____ - _____
- 10. Loan Amount requested: \$ _____ (Maximum \$2,000)

The undersigned applicant affirms that:

I/We are the Business Owner(s) and the information submitted is accurate to the best of my/our knowledge.

I understand and agree to comply with the Portage COVID-19 Business Relief Loan Program Guidelines.

Signature of Business Applicant(s)/Business Owner(s)

_____ Date _____
_____ Date _____

Internal Review Section-Do Not Complete.

Community Development Authority Review:

Loan Application Approved: _____ Denied: _____

Date Loan Approved: _____

Reason for denial, if applicable: _____

City Obligations CK (intl): _____ Personal Guarantee: _____ UCC Filing: _____

0 Percent Interest Rate; Number of Months _____ Monthly Payment Due: _____

First Payment Due: _____ Automatic Payment Setup: _____

Loan Paid in Full: _____ Within Terms: _____