



Hancock County Small Business Revolving Loan Fund Application

APPLICANT NAME: _____

ADDRESS: _____

HOME PHONE: _____

WORK PHONE: _____

CELL PHONE: _____

EMAIL: _____

BUSINESS NAME: _____

TYPE: _____

ADDRESS: _____

PROJECT ADDRESS: _____

FINANCIAL INSTITUTION: _____

CONTACT NAME: _____

CONTACT PHONE: _____

1. Does the applicant own the project building? ___ Yes ___ No
If not, please provide building owner's name and address:

The HCSBRLF Board reserves the right to request written permission from the building owner prior to construction proceeding.

2. Please describe the project. Attach additional sheets if needed.



3. Estimate of total cost: _____
Please attach a detailed project budget or equivalent financial document and business plan if available.

4. Amount of funding requested: _____

5. Approximate timeframe for project: _____
Attach schedule if necessary

I have read the Hancock county Small Business Revolving Loan Fund Guidelines, and , believing I qualify submit this application in good faith on behalf of the above listed business. I certify that I have authority to enter into contracts on behalf of the business at the business address listed.

The HCSBRLF is authorized to make all inquiries deemed necessary to verify the accuracy of the statements made herein, and to determine my/our credit worthiness. The HCSBRLF is authorized to answer questions about any credit experience with the applicant. The undersigned acknowledges receipt of a copy of this instrument.

APPLICANT SIGNATURE: _____

APPLICANT PRINTED NAME: _____

DATE: _____

Application Check List:

- Original signed application*
- One copy of application*
- Completed Personal Financial Statement*
- Project budget or equivalent financial document*
- Signed ACH form*
- Business plan if available*
- Project schedule if necessary*
- Letter of reference from your financial institution*

FOR OFFICE USE ONLY	
Date Submitted:	_____
Amount Approved:	_____
Date Funds Dispersed:	_____