

# Indiana County Revolving Loan Fund 2021 CARES Act Loan Application

**APPLICANT:** The undersigned certifies that he/she is the (Title) \_\_\_\_\_  
\_\_\_\_\_ of (Business Name) \_\_\_\_\_ applying for financing from the  
Indiana County RLF, that, he/she is familiar with the records of the Business (the Borrower) and  
contents of this application, and that he/she is authorized to submit and sign the application. The  
information contained in this application, including all exhibits, is to the best knowledge of the  
undersigned, complete and accurate and presents fairly the condition of the applicant and project.

**Furthermore, the undersigned certifies that he/she has reviewed the fee structure associated with  
the Indiana County CARES Act RLF loan application and by his/her signature, acknowledges that  
he/she is responsible for payment.**

Name & Title: \_\_\_\_\_

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

## Notice to Applicants (CARES Act)

This is Notice, as required by the "Right to Financial Privacy Act of 1978," of the access rights to financial records held by financial institutions that are, or have been doing business with you or your business, including financial institutions participating in this loan. Access rights continue for the term of any approved loan without further authorization.

By signing this, you authorize Indiana County to use or Transfer financial records on an application for an approved loan as necessary to process, service, or foreclose a loan or collect on a defaulted loan. No other transfer of your financial records will be permitted.

### CERTIFICATION OF COMPLIANCE

1. Loan proceeds will be disbursed at the loan closing to the Borrower and/or another designee (vendor) identified by Borrower if all required documentation has been provided.
2. **CIVIL RIGHTS:** I/WE will NOT discriminate on the grounds of race, color, sex, religion, marital status, disability, age, or national origin. These certifications are applicable to anyone who buys or takes control of the business. I/WE realize that if I/WE do not comply with these non-discrimination requirements, Indiana County can call, terminate, or accelerate repayment on MY/OUR loan.
3. **ENVIRONMENT:** That MY/OUR project has no adverse environmental impact and that I/WE will comply with all applicable Federal, State and local environmental protection standards and regulations. Indiana County reserves the right to require documentation at the borrower's cost to substantiate environmental clearance claims or to substantiate and develop mitigation measures for adverse environmental impacts determined during application or at monitoring visits. The cost of all clean-up and mitigation measures is the responsibility of the borrower.
4. **FLOOD HAZARD:** That I/WE will obtain required flood hazard insurance, if applicable.
5. **HISTORIC PRESERVATION:** That, to the best of MY/OUR knowledge, MY/OUR project has no effect upon historical/ archaeological properties in compliance with the requirements and objectives of the National Historic Preservation Act of 1966, as amended, Presidential Executive Order 11593, May 13, 1971, and Procedures for the Protection of Historic and Cultural Properties.
6. **DAVIS-BACON:** I/WE give the assurance that all laborers and mechanics employed by contractors or subcontractors on construction work which is associated with this project, will be paid wages not less than those prevailing on similar construction in the locality, as determined by the U.S. Secretary of Labor pursuant to the Davis-Bacon Act. Therefore, the Recipient and any borrower, contractor or subcontractor must comply with Davis-Bacon prevailing wage rates where RLF funds are used for construction work financed in whole or in part with such RLF funds.
7. **HANDICAPPED ACCESS:** That if MY/OUR project involves construction for public use, I/WE will comply with accessibility to the handicapped standards of 41 CRF, subpart 101-19-6.
8. **AUTHORITY TO COLLECT PERSONAL INFORMATION:** This information is provided pursuant to Public Law 93-579 (Privacy Act of 1974).
9. **EFFECTS OF NON-DISCLOSURE:** Omission of any items means your application might not receive full consideration.
10. **AGREEMENT OF NON-EMPLOYMENT OF INDIANA COUNTY PERSONNEL:** I/WE agree that if Indiana County approves this loan application, I/WE will not, for at least two (2) years, hire as an employee or consultant anyone that was employed by Indiana County during the one-year period prior to the disbursement of the loan. Furthermore, the undersigned hereby certifies that no officer, director, or employee of the Indiana County Loan Review Committee personally has any substantial ownership, employment, fiduciary, creditor, contractual or consultative relationship with the applicant or project except as disclosed by applicant.

11. **NON-RELOCATION:** That MY/OUR project does not involve the relocation of existing jobs outside of Indiana County to within Indiana County in competition with other U.S. jurisdictions for those same jobs.
12. That jobs proposed to be created and/or retained will be accomplished within three (3) years of the closing or other mutually agreed to date.
13. I/WE certify that all loan activities and economic benefits resulting from loan activities will be located within Indiana County. Funding received from the RLF will become due and payable in full, if, for any reason, the activity financed, jobs, or the economic benefit is moved outside of the Indiana County service area.

I/WE certify that all information in this application and the exhibits are true and complete to the best of MY/OUR knowledge. I/WE authorize disclosure of all information submitted in connection with this application to Indiana County and the financial institution(s) agreeing to participate in this loan. As consideration for any technical assistance that may be provided, I/WE waive all claims against Indiana County and its consultants.

**Furthermore, I/WE agree to pay to Indiana County a loan closing fee of \$250 due at the time the loan is closed and any filing fees associated with the closing of the loan. I hereby certify that I have read, understand, and agree to comply with all the statements listed under the Notice to Applicants.**

Name & Title: \_\_\_\_\_

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

Legal Business Name: \_\_\_\_\_

## Application Checklist (CARES Act)

- 1. RLF Application
- 2. Notice to Applicants
- 3. Environmental Checklist
- 4. Debt Schedule. Please list all current business debts.
- 5. **Signed and Dated narrative with the following information:**
  - A. Brief history of the business;
  - B. Description of products or services;
  - C. The amount and uses of CARES Act RLF working capital funds you are requesting. You may request six months of working capital, up to a maximum of \$50,000 as determined using the formula: twelve months of working capital expenses, divided by twelve, and then multiplied by six. This amount shall be the amount of the borrower's loan request;
  - D. Use the chart below to list how you plan to use the loan funds requested along with the amount(s).

Payroll	Rent	Inventory	Utilities
\$	\$	\$	\$

- E. A brief description indicating whether or not the business temporarily closed operations due to the Governor's closure if so, the date the closure started, as well as the date operations resumed, if applicable;
- F. Provide a brief description of the adverse financial impact caused to date by COVID-19 (how was your business financially injured). Submit documentation to establish that the business experienced a revenue reduction in 2020 relative to 2019. Documentation should include annual Federal tax returns or Accountant Prepared Financial Statements for 2019 and 2020 (company prepared financials would suffice for 2020).
- 6. If you received PPP fund and/or EIDL funds:
  - 1.) When did you receive the PPP funds and/or EIDL funds?
  - 2.) What was the amount of those funds?
  - 3.) What the money was applied to (used for)?
  - 4.) And whether the funds are exhausted as of the date of your letter
- 7. Submit Year-to-Date balance sheet and profit/loss statement for the business.
- 8. Organizational Documents:
  - A. By-Laws
  - B. Articles of Incorporation / Organization (depending on the entity type)
  - C. Corporate Resolution
  - D. EIN Verification – If not available a copy of the tax return would suffice

If self-employed (sole proprietorship):

  - A. Fictitious Name Filing (if applicable)
  - B. EIN Verification
- 9. Copy of the front and back of Driver's License

**These loans are made on a first-come, first-serve basis. To ensure the quickest turn around on your request, we ask that you submit a COMPLETE application.** Do not sign ANY Commitments or start ANY Procedures until you have talked with a representative from the:

# Environmental Checklist

Applicant's Plan to Meet Environmental Regulations (Complete a separate plan for each property)

Business Name	Contact Person
Address	City, State, Zip
Project Site Address	Parcel #

Environmental studies conducted to determine impact of development on the above-mentioned property have been completed by the following individual(s) and/or organization(s):

Individual/Organization	Address	Phone #
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2. Check each environmental parameter that will be impacted/involved in the proposed development for which a loan is requested. Attach a statement explaining the nature of the impact and the planned measure(s) to mitigate or eliminate the impact. Refer to environmental studies where applicable.

<p><b>AIR</b></p> <p><input type="checkbox"/> Air Quality (other than from ordinary utility use such as air conditioning, heating)</p> <p><b>WATER RESOURCES</b> (other than sanitary waste)</p> <p><input type="checkbox"/> Water quality or quantity in a stream, brook, creek, river (denote if wild and scenic river), or other running water system</p> <p><input type="checkbox"/> Water quality or quantity in a pond, lake (or other still water body)</p> <p><input type="checkbox"/> Water quality or quantity in subsurface water (including aquifers)</p> <p><input type="checkbox"/> Wetlands</p> <p><input type="checkbox"/> Stormwater</p> <p><input type="checkbox"/> Wastewater</p> <p><b>ECONOMIC &amp; CULTURAL RESOURCES</b></p> <p><input type="checkbox"/> Farmland Preservation</p> <p><input type="checkbox"/> Archeological / Cultural / Historical sites</p>	<p><b>SOILS</b></p> <p><input type="checkbox"/> Surface soil quality or quantity (including potential for erosion)</p> <p><input type="checkbox"/> Subsurface soil quantity or quality</p> <p><b>PLANT &amp; ANIMAL LIFE</b></p> <p><input type="checkbox"/> Plant species numbers or diversity</p> <p><input type="checkbox"/> Animal species numbers or diversity</p> <p><input type="checkbox"/> State or Federal endangered /threatened species</p> <p><b>QUALITY of LIFE RESOURCES</b></p> <p><input type="checkbox"/> Traffic flow / volume</p> <p><input type="checkbox"/> Ambient noise levels</p> <p><b>WASTE DISPOSAL</b> (other than trash &amp; debris)</p> <p><input type="checkbox"/> Hazardous wastes</p> <p><input type="checkbox"/> Radioactive wastes</p> <p><input type="checkbox"/> Solid wastes</p>
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3. For any processes using chemical reagents, indicate quantity and chemical names for all such reagents and method for storing and disposing of these items. (NOTE: Some applicants may be required to comply with the Federal "Right to Know" Act.)

**The undersigned hereby irrevocably warrants to Indiana County, PA that the facts presented herein are true and complete to the best of the undersigned knowledge**

Name & Title: \_\_\_\_\_

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

Legal Business Name: \_\_\_\_\_

## Debt Schedule

Complete the following from for all installment debts, contracts, notes, and mortgages payable, including shareholder notes. Do not include accounts payable or accrued liabilities. *Use a separate sheet if needed.*

Name of Creditor Address of Creditor Point of Contact Contact Phone # & Email	Original Loan Amount	Current Balance as of __/__/____	Interest Rate	Monthly Payment	Maturity Date	Term	Security for the Loan	Current (Y or N)

Name & Title: \_\_\_\_\_

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

Legal Business Name: \_\_\_\_\_

# Indiana County Revolving Loan Fund Application – Cares Act

## APPLICANT INFORMATION

Applicant / Co-Applicant \_\_\_\_\_

Mailing Address of Business \_\_\_\_\_

Project Address \_\_\_\_\_

Contact Person / Title \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_  Start-Up  Expansion  Retention

Email \_\_\_\_\_

Type of Business \_\_\_\_\_

NAICS \_\_\_\_\_ Date Est. \_\_\_\_\_ Fed Tax ID \_\_\_\_\_

Legal Structure:  Corporation  S-Corporation  Partnership  Proprietorship  LLC

## OWNERHIP BREAKDOWN

Name, Title and % Owned \_\_\_\_\_

Name, Title and % Owned \_\_\_\_\_

Name, Title and % Owned \_\_\_\_\_

## PROJECT INFORMATION

Project Description \_\_\_\_\_

\_\_\_\_\_

## PROJECT BUDGET

### USES

Land Acquisition	_____
Building Acquisition	_____
Expansion / Renovation	_____
Infrastructure / Site-Prep	_____
New Construction	_____
New Equipment	_____
Used Equipment	_____
Working Capital:	_____
Receivables	_____
Inventory	_____
Marketing	_____
Other	_____
Professional Services	_____
Engineering	_____
Legal / Closing Fees	_____
Other	_____
Other	_____
<b>TOTAL</b>	<b>\$</b> _____

### SOURCES

RLF	_____
Bank	_____
Equity Contribution	_____
Public Funding	_____
Private Funding	_____
<b>TOTAL</b>	<b>\$</b> _____

Collateral for this Loan (List assets that will be available for Indiana County security & list existing & future liens)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# Indiana County Revolving Loan Fund Application – Cares Act

## EMPLOYMENT INFORMATION @ project site

	Current Full Time	Jobs to be Retained	Jobs to be Created – 3-years	Average Wage
Skilled	_____	_____	_____	_____
Unskilled	_____	_____	_____	_____
Clerical	_____	_____	_____	_____
Professional	_____	_____	_____	_____
Management	_____	_____	_____	_____

Failure to meet the 3-year projections may result in the interest rate increasing to 2% above prime as quoted in the W.S.J.

## BUSINESS INFORMATION

- Does the business lease space?  
 Yes    No   If yes, what is the term of the lease: \_\_\_\_\_
- Has the company ever filed for bankruptcy?  
 Yes    No   If yes, explain on a separate sheet.
- Have the individuals associated with the company [owner, officers, and major shareholders] ever filed for bankruptcy?  
 Yes    No   If yes, explain on a separate sheet.
- Are there any tax liens or civil judgments outstanding?  
 Yes    No   If yes, explain on a separate sheet.
- Is the company or any of its principals or shareholders involved in litigation, as either a plaintiff or defendant?  
 Yes    No   If yes, explain on a separate sheet.

Major Customers and Percent of Sales:

_____	_____ %
_____	_____ %
_____	_____ %

Major Competitors and Competitor's Location:

_____	Location _____
_____	Location _____
_____	Location _____

Major Supplier's and Supplier's Location:

_____	Location _____
_____	Location _____
_____	Location _____

Describe Sales & Marketing Strategy & List Geographic Marketing Area:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## CERTIFICATION

The undersigned hereby irrevocably warrants that the facts presented herein are true and complete to the best of the undersigned knowledge.

Name & Title: \_\_\_\_\_

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