



Alamance Small Business Recovery Loan Application Addendum

Name of Applicant(s): _____

Name of Business: _____

This Business is For-Profit or Non-profit?: _____

Business address: _____

I/We acknowledge that I/We are applying for a Small Business Community Recovery Loan through a lending partnership between Alamance County Foundation and Self-Help Credit Union. This loan program is designed to help small businesses within Alamance County, North Carolina negatively impacted by the coronavirus pandemic. The loans from this lending partnership are available to for-profit and nonprofit businesses, sole proprietors/1099 businesses and LLCs. Individuals with more than 20% ownership must also be an applicant on the loan. The need for individual signatures on the loan for a nonprofit is addressed on a case-by-case basis.

Loan amounts up to \$25,000 for terms up to 66 months (maximum term determined by loan amount) are available until the fund is depleted. The possible loan amount will be based on loan payments that could have been afforded pre-COVID, and the loan amount may be no more than 6 months of pre-March 1, 2020 expenses (2019).

Loans will be approved in the order that qualified applications are received. Monthly payments of the loan will be deferred for the first six (6) months. The interest rate on this loan is 4%. Although interest will accrue from the date of loan origination, the first payment will be delayed for 6 months. Further payment deferments will be addressed on a case-by-case basis.

Checklist of Documentation required for this loan application includes:

- Signed Small Business Information form
- Signed Consumer Loan Application for information on the individual signer(s)
- Signed 'Alamance Small Business Recovery Loan Application Addendum' (these two pages)
- 2020 YTD internal Profit and Loss on the business (or at least a rough draft)
- 2019 tax returns, both business and personal returns
- If 2019 returns have not yet been filed, then the 2018 business and personal returns and a 2019 Profit and Loss statement from the business
- If unable to demonstrate that business was profitable in 2019, SHCU may consider alternative methods of ability to repay, such as:
 - Proof of income from other verifiable sources (Note: If other verifiable income is from the income of another person, including a spouse, then that person must also be a borrower on the loan)
 - NOTE: Strong personal credit history of individual signer(s) will be required in these situations.
- Proof of current operations (e.g. bank statement, payroll documentation), OR documentation that Borrower is still under a pandemic prevention close order
- I understand that a review of my/our application may result in the need for additional documentation.



The loan applicant hereby certifies the following:

- 1) The loan proceeds will be used for purposes of assisting the business in recovering from COVID's economic costs including rent or mortgage for the principal place of business, payroll, PPE, sanitation supplies, restocking inventory, outdoor seating, and any other related expenses necessary to maintaining, redesigning or re-opening the business.
- 2) All loan proceeds will be solely for commercial purposes, and not for consumer or personal purposes.
- 3) The business applicant (business address) is located within the boundaries of Alamance County, North Carolina.
- 4) The total number of individuals on payroll of the business whether a corporate entity or sole proprietorship does not exceed 25 full-time-equivalent employees, and the business had under \$2 million in annual revenue as of the end of its last full fiscal year prior to March 1, 2020
- 5) Neither my company nor I have any unsatisfied judgments or tax liens, or any bankruptcy proceedings, within past year
- 6) If I/We have received an SBA PPP loan, the loan funds for this loan will be used for different purposes or time periods than the PPP loan.
- 7) The business listed above has been in business continuously since April 1, 2019.

The loan applicant hereby authorizes the following:

- 1) Self-Help Credit Union may share the following information with Alamance Community Foundation during and after the term of the subject loan: Loan amount; Business type; Date of Loan; City/town where Borrower is located; Whether the Borrower is a minority, a woman, or is minority- or woman-owned; Whether the Borrower is a Nonprofit; Number of Full-Time Equivalent Employees as of March 1, 2020; Status of loan (current, charged-off, or past due)
- 2) The information on the application and application addendum is accurate and verifiable.

Borrower gender: male female other

Hispanic?: yes no

Race: Black or African-American White American Indian or Alaska Native Asian
 Native Hawaiian or Other Pacific Islander

Number of Full-time employees prior to COVID-19 pandemic: _____

Number of Part-time employees prior to COVID-19 pandemic: _____

Number of 1099(contract) workers prior to COVID-19 pandemic: _____

Signature: _____ Date: _____

Signature: _____ Date: _____



Small Business & Non-Profit Information

Business or Organization Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____ County _____

Type of Business: _____ Date Started: _____

Federal Tax ID #: _____

Who referred you to us? _____

Today's Date: _____

Legal Structure:

- C Corporation S Corporation Nonprofit Corporation
 Legal Partnership Sole Proprietorship Limited Liability Corporation

Contact Person for this application: _____ Cell Phone of Contact: _____

Business Phone: _____ E-mail: _____

Number of full-time employees now _____ Number of part-time employees now _____

Briefly describe what you plan to do with this loan:

MANAGEMENT INFORMATION AND ACKNOWLEDGMENTS:

Please read the following and complete the information below.

The undersigned hereby certifies that the information contained in this application and related materials is true and correct. The undersigned hereby further certifies that the proceeds of any loan made as a result of this application will be used for business or organizational purposes only, and will not be used for personal or consumer purposes. The undersigned hereby affirms that he or she does not discriminate on the basis of race, color, religion, national origin, gender, marital status, or age. The undersigned hereby acknowledges that (1) no loan officer has authority to commit Self-Help to any loan without prior approval by Self-Help's credit committee and (2) any loan commitment must be in writing and signed by an authorized representative of Self-Help. Self-Help is authorized to make all inquiries Self-Help deems necessary to verify the accuracy of this statement and to determine the creditworthiness of the business or organization. The undersigned also authorizes Self-Help to answer questions and inquiries from others seeking credit experience information about the business or organization.

Each individual owner of 20% or more of this business must sign below and fill in the information requested. For nonprofit organizations, please provide this information for the Executive Director, Treasurer and/or Board Chairperson. (Please note that for non-profit applicants, individual signers as indicated below may not be personally liable for the subject loan – please check with your loan officer)

Name: _____
Title: _____
Ownership%: _____
Date: _____
Signature: _____

Name: _____
Title: _____
Ownership%: _____
Date: _____
Signature: _____

Name: _____
Title: _____
Ownership%: _____
Date: _____
Signature: _____



CONSUMER LOAN APPLICATION

ACCOUNT NUMBER	DATE
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MARRIED APPLICANTS may apply for a separate account. **Check the type of credit account for which you wish to apply.**
 Individual Credit – You must complete the applicant section about yourself and the other section about your spouse if: (1) You live in a community property state (AK, AZ, CA, ID, LA, NM, NV, P.R., TX, WA, WI); (2) your spouse will use the account; or (3) you are relying on your spouse's income as a source of repayment.
 Joint Credit – If you are applying for a joint account or an account that you and another person will use, you must complete the applicant and Spouse Co-Applicant section.
 _____ Initial here if you intend to apply for Joint Credit

Type of Credit Applied For:

Loan Type: _____ Amount Requested: _____ Term (mos) _____
 Purpose: _____ Collateral Offered: _____
 Payment Method: Cash Military Allotment Payroll Deduction Automatic Payment
 Payment Frequency: Monthly Other _____

APPLICANT

Complete for secured credit or if you live in a community property state.
 MARRIED SEPARATED UNMARRIED (Single, Divorced, Widowed)

APPLICANT NAME _____

SOCIAL SECURITY NO.	DRIVER'S LICENSE NO. & STATE	BIRTH DATE
HOME PHONE NO.	CELL PHONE NO.	NO. OF DEP.
MOTHER'S MAIDEN NAME *		E-MAIL ADDRESS
CURRENT STREET ADDRESS	APT. NO.	SINCE
CITY/STATE/ZIP CODE		
FORMER STREET ADDRESS (if current less than 2 years)		YEARS THERE
CITY/STATE/ZIP		
PERSONAL REFERENCE 1 (Name and Address)	PHONE NO. & RELATIONSHIP	
PERSONAL REFERENCE 2 (Name and Address)	PHONE NO. & RELATIONSHIP	

SPOUSE **CO-APPLICANT**

Complete for secured credit or if you live in a community property state.
 MARRIED SEPARATED UNMARRIED (Single, Divorced, Widowed)

SPOUSE/CO-APPLICANT NAME _____

SOCIAL SECURITY NO.	DRIVER'S LICENSE NO. & STATE	BIRTH DATE
HOME PHONE NO.	CELL PHONE NO.	NO. OF DEP.
MOTHER'S MAIDEN NAME		RELATIONSHIP TO APPLICANT
CURRENT STREET ADDRESS	APT. NO.	SINCE
CITY/STATE/ZIP CODE		
FORMER STREET ADDRESS (if current less than 2 years)		YEARS THERE
CITY/STATE/ZIP		
PERSONAL REFERENCE 1 (Name and Address)	PHONE NO. & RELATIONSHIP	
PERSONAL REFERENCE 2 (Name and Address)	PHONE NO. & RELATIONSHIP	

EMPLOYMENT & INCOME If you are self-employed, attach a financial statement and your most recent income tax return.

CURRENT EMPLOYER	HIRE DATE	
CURRENT ADDRESS		
WORK PHONE NO.	POSITION	MONTHLY GROSS INCOME
FORMER EMPLOYER (if current less than 2 years)		

OTHER INCOME You need not list income from alimony, child support or separate maintenance unless you wish it considered for purposes of granting this credit.

SOURCE OF OTHER INCOME	FREQUENCY	MONTHLY INCOME
1.		\$

ASSETS & DEPOSITS Please check the appropriate box below. INDICATE: **A** - Applicant **OR** **C** - Spouse/Co-Applicant

CHECK ONE			FINANCIAL INSTITUTION NAME	CURRENT BALANCE	CHECK ONE			FINANCIAL INSTITUTION NAME	CURRENT BALANCE
A	C	TYPE			A	C	TYPE		
				\$				\$	
				\$				\$	
AUTO #1 MAKE		MODEL	YEAR	VALUE	AUTO #2 MAKE	MODEL	YEAR	VALUE	
REAL ESTATE TYPE				VALUE	OTHER ASSETS			VALUE	
				\$				\$	

CREDIT INFORMATION

Be sure to list all open accounts with or without a balance. Attach separate sheet if necessary
A - APPLICANT C - SPOUSE/CO-APPLICANT D - DEBTS TO BE PAID OFF IF LOAN IS GRANTED

PLEASE CHECK			LIST ALL OBLIGATIONS INCLUDING CREDIT UNION LOANS	ACCOUNT NUMBER	BALANCE	MONTHLY PAYMENTS
A	C	D				
			RENT OR MORTGAGE			

PLEASE ANSWER THE FOLLOWING QUESTIONS AND INDICATE: A = Applicant C = Spouse/Co-Applicant	A		C			A		C	
	YES	NO	YES	NO		YES	NO	YES	NO
1. Have you ever filed a petition for bankruptcy? Date:					6. Have you ever had credit in any other name? What Name?				
2. Have you ever had any auto, or furniture repossessed or property foreclosed upon? Date:					7. Have you any suits pending, judgments filed, alimony or child support awards against you?				
3. Are you a co-borrower or co-signer of any loan or lease? For Whom? Where?					8. Are you on temporary work assignment or internship?				
4. Do you have any past due bills?					9. Are you a U.S. citizen or permanent resident alien?				
5. Is income listed likely to be reduced in the next two years?									

SIGNATURES – Are you currently on active military duty? Yes No

You promise that the information stated in this TotalLoan Consumer Loan Application is true and correct to the best of your knowledge. The Credit Union or its agent is authorized to investigate your credit worthiness, employment history, and to obtain a credit report and to answer questions about its credit history with you. The Credit Union may also obtain credit reports to update, increase, extend or renew credit with you. False or misleading statements in your application may cause any loan to be in default. You agree that this application shall be the Credit Union's property whether or not this application is approved. You will notify the Credit Union in writing immediately of any changes in your name, address or employment. You understand that it is a crime to willfully and deliberately provide incomplete or incorrect information to obtain credit. If you request, you will be provided the name and address of any credit bureau from which we received a credit report. **As security for any loan to you or on your behalf, you grant the Credit Union a Security Interest in all individual and joint share or other accounts you have with the Credit Union now and in the future. When you are in default you authorize the Credit Union to take that money and apply it to what you owe. Shares and deposits that would have an adverse tax consequence if pledged as security are not subject to this Security Interest.** To help the government fight the funding of Terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license and other identifying information.

X _____ **X** _____
 Applicant/Co-Signer Date Spouse/Co-Applicant Date

Credit Union Use Only	
Loan Approved <input type="checkbox"/> Yes <input type="checkbox"/> No, reason _____ Debt Ratio/Score: Before _____ After _____ <input type="checkbox"/> ECOA Notice and reason for Rejection sent or delivered on _____	Comments: Loan Officer Signature _____ Date _____ X