



	um Loan Amoi						
451 S	South State, Po	O Box 145590, Salt La	ke City, Uta	ah 84111		I ELP@sl	cgov.com
Please include these attachment Financial Statement: Profit & and most recent quarter or quarter or quarter or quarter or quarter or qua			Loss and Enth eturns (201 nt) OR Own siness Lice is license C gned W9 urns (2018	8 or 201 on (Morto ense (NC OR gover	Sheet Statements for 9) gage statement) for bu DT REQUIRED FOR Nornment issued ID In for at least one guara	siness location. ION-PROFITS) intor (owner	
PROJECT SUMMARY	Proposed Loa Business Add	ress		City	,	Date of Application State	Zip
PR	Contact Name Contact Pho Is your Business West of I-15?			e 🗌 No		Contact Email	Address
APPLICATION SUMMARY	-		nation for offi		(c)3 er: shareho	Partnership Iders owning 20% or Business	
API		judgements or liens outst				Yes	□ No

	Guarantor	Guarantor (owners with at least 19% equity share business)								
	Full Name					_	Social Se	ecurity or I	<u> </u>	
							•			
	Street Address			City			State Z		Zip	
	Date of Birth		Email Add	Email Address			Phone Number			
	Race/Ethnicity: American		n Indian or Ala	Indian or Alaska Native Asian BI			ack or African American			
tion	Hispanic or Latino Native Hawaiian Or Pacific Islander White Other									
Guarantor information	Personal: [Veteran	Disabled	I	(Gender:	Male	Fema	ile	
ntor in	Guarantor (owners with at least 19% equity share in business)									
araı										
en B	Full Name						Social Security / ITIN			
	Street Addre	SS			City		Sta	ite	Zip	
	Date of Birth		Email Add	Email Address			Phone Number			
	Race/Ethnicity: American Indian or Alaska Native Asian Black or African American									
	Hispanic or Latino Native Hawaiian Or Pacific Islander White Other									
	Personal: [Veteran	☐ Disabled	i	(Gender:	Male	Fema	ile	
	Current Bu	siness Debt								
Financial Structure	Does your business have current obligations? Please describe below from largest to smallest.									
ruc		Lender	Amount	Term Le	ngth	Interest	Rate	Monthly	Payments	
St	Lender 1:									
cia	Lender 2:									
inar	Lender 3:									
ĬĹ.	Lender 4:									
	I									

Financial Structure

Recent Financials If an existing business, please fill out the following for the previous fiscal year: Revenues: Expenses: Debt Payments: Net Profit:

Job Retention

Number of current full-time employees	Number of full-time employees to be retained because of the loan?			
Number of current part-time employees	Number of part-time employees to be retained because of the loan?			

Please provide a written description answering the following questions:

- Describe business operations and financial well-being prior to COVID-19
- Describe how COVID-19 has affected your business, including impact on your workforce, revenue and profits, or mandated shutdowns for social distancing.
- Describe use of funds for the loan (i.e. Payroll, Rent, Etc)
- Describe how you plan to pay back this loan

Loan Narrative

Application Certification

Please thoroughly read and sign the following— one for each business applicant (see also personal financial statement):

- 1. The Applicant authorizes Salt Lake City Corporation to make inquires as necessary to verify the accuracy of the statements made and to determine the Applicant's creditworthiness (including, but not limited to, inquiring with individuals or groups familiar with the applicants, regular and investigative reports, credit reports, financial statements and other documents submitted by Applicant(s) in connection with this application). The statements made herein are made for the purpose of either obtaining a loan or guaranteeing a loan. By signing below, Applicant(s) understand that false statements may result in forfeiture of benefits and possible prosecution by the
- U.S. Attorney General (Reference 18 USC 1001).
- 3. Applicant understands that this completed and signed application is only an application and does not constitute a commitment on part of Salt Lake City Corporation to extend credit or offer a loan.
- 4. The Borrower agrees to comply with Federal and State laws which prohibit discrimination based on race, color, sex culture, social origin, sexual orientation, condition, or political or religious ideas.
- 5. Borrower represents that it has not: (1) provided an illegal gift or payoff to a City officer or employee or former City officer or employee, or his or her relative or business entity (see City Executive Order "Employee's Acceptance of Gifts"); (2) retained any person to solicit or secure this contract upon an agreement or understanding for a commission, percentage, or brokerage or contingent fee, other than bona fide employees or bona fide commercial selling agencies for the purpose of securing business; (3) knowingly breached any of the ethical standards set forth in the City's conflict of interest ordinance, Chapter 2.44, Salt Lake City Code; or (4) knowingly influenced, and hereby promises that it will not knowingly influence, a City officer or employee or former City officer or employee to breach any of the ethical standards set forth in the City's conflict of interest ordinance, Chapter 2.44, Salt Lake City Code.
- 6. The undersigned agrees to notify Salt Lake City Corporation immediately in writing if any of the information contained in this application becomes inaccurate or misleading in any respect.
- 7. As a condition of considering the application and at any time once the loan is approved, Salt Lake City Corporation and its agents are granted the right to inspect the business facilities.
- 8. If the loan is approved, Salt Lake City Corporation may include the business and any information provided for public disclosure including in meetings, photographs of facilities, reports, on-site signs, newsletters, slide presentations, or other promotional or success story materials. As a public entity, certain aspects of the application may need to be disclosed to the public under GRAMA disclosure laws or similar, except private personal and corporate information will be redacted.
- 9. All information in this application and the attached exhibits is true and complete to the best of my/our knowledge and is submitted so Salt Lake City Corporation can decide whether to extend financing to the business.
- 10. Borrower authorizes credit report to be pulled for each applicant/guarantor.

Applicant(s) and Guarantors(s) Signature								
Signature	Date	Signature	Date					
Signature	Date	Signature	Date					



Request for Taxpayer Identification Number and Certification

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

	I Name (as snown on your income tax return). Name is required on this line, do not leave this line blank.							
	2 Business name/disregarded entity name, if different from above							
on page 3.	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check following seven boxes. Individual/sole proprietor or C Corporation S Corporation Partnership	cert	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):					
ns e	single-member LLC	Exer	npt payee	code	(if any)			
ty p	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partne	_			_			
Print or type. See Specific Instructions on page	Note: Check the appropriate box in the line above for the tax classification of the single-member of LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single is disregarded from the owner should check the appropriate box for the tax classification of its own	is cod	Exemption from FATCA reporting code (if any)					
eci	☐ Other (see instructions) ▶		(Appli	(Applies to accounts maintained outside the U.S.)				
Sp	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's nar	ne and a	ddress (op	tional)		
See								
0,	6 City, state, and ZIP code							
	7 List account number(s) here (optional)							
Par								
	your TIN in the appropriate box. The TIN provided must match the name given on line 1 to av	0.0	security	ecurity number				
	up withholding. For individuals, this is generally your social security number (SSN). However, the sent alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other	or a	_	-	_			
entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a</i>]	\Box		
TIN, la	ater.	or						
	If the account is in more than one name, see the instructions for line 1. Also see What Name	and Emplo	yer ident	r identification number				
Numb	per To Give the Requester for guidelines on whose number to enter.		1 _1					
Par	t II Certification							
Unde	r penalties of perjury, I certify that:							
2. I ar Ser	e number shown on this form is my correct taxpayer identification number (or I am waiting for n not subject to backup withholding because: (a) I am exempt from backup withholding, or (b rvice (IRS) that I am subject to backup withholding as a result of a failure to report all interest longer subject to backup withholding; and) I have not bee	n notifie	d by the	Inter			
3. I ar	n a U.S. citizen or other U.S. person (defined below); and							
4. The	e FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting	na is correct.						

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid,

other than	1 1 2	outions to an individual retirement arrangement (IRA), and generally, payments in, but you must provide your correct TIN. See the instructions for Part II, later.	
Sign Here	Signature of U.S. person ▶	Date ▶	

General Instructions

Section references are to the Internal Revenue Code unless otherwise

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN). individual taxpaver identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

• Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding,