



451 South State Street, Room 425, PO Box 145484, Salt Lake City, Utah 84114 | 801-535-7258 | www.slccgov.com/edlf

## PART A APPLICATION

Part A of the EDLF Loan Program Application is the first part of a two-part process to request a loan from Salt Lake City's Community and Neighborhood Development Department. Please complete the application in full. Within 10 business day of submission, staff will notify the applicant as to whether or not the Part A application is approved. Once Part A is approved, the applicant will be invited to submit the Part B application. For more information, please refer to the *EDLF Loan Program Policies & Guidelines* handbook, or visit [www.slccgov.com/edlf](http://www.slccgov.com/edlf).

I: PROJECT SUMMARY

<b>Project Type</b>	<b>Date of Application</b>		
<b>Proposed Loan Amount</b>	<b>Total Project Cost</b>		
<b>Estimated Project Start Date</b>	<b>Estimated Project Completion Date</b>		
<b>Project Address</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Contact Name</b>	<b>Contact Phone</b>	<b>Contact Email Address</b>	

II: APPLICANT SUMMARY

<b>Business Name</b>	<b>Tax ID Number</b>		
<b>Street Address</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Entity Type:</b>	<input type="checkbox"/> LLC	<input type="checkbox"/> Sole Owner	<input type="checkbox"/> 501(c) 3
	<input type="checkbox"/> C Corp	<input type="checkbox"/> S Corp	<input type="checkbox"/> Partnership
	<input type="checkbox"/> Joint Venture		
<b>Incorporation Date:</b>	_____		
<b>Ownership- Provide the following information for officers and shareholders owning 20% or more of the entity.</b>			
Name, Title	% Ownership	Role in Proposed Project	
<b>Are there any judgments or liens outstanding against the applicant?</b>			
<input type="checkbox"/> Yes <input type="checkbox"/> No			

II: GUARANTEE INFORMATION

Guarantor (owners with at least 20% equity share in business)

Full Name

Social Security Number

Street Address

City

State

Zip

Date of Birth

Email Address

Phone Number

Citizenship:

U.S. Citizen

U.S. Legal Resident

Signature

Guarantor (owners with at least 20% equity share in business)

Full Name

Social Security Number

Street Address

City

State

Zip

Date of Birth

Email Address

Phone Number

Citizenship:

U.S. Citizen

U.S. Legal Resident

Signature

III: PROJECT OVERVIEW

Project Summary: Provide a brief summary of the project.

[Empty text box for project summary]

Use of Loan Proceeds (check all that apply)

Real Estate Acquisition

Furniture and Fixtures

Building Construction/Renovation

Contingencies

Machinery and Equipment

Working Capital

Available Collateral (check all that apply)

Commercial Real Estate

Equipment (wholesale)

Residential Real Estate

Inventory

Vehicles

Other

What is the estimated value of your collateral?

\_\_\_\_\_

Please describe other sources of loan repayment:

[Empty text box for other sources of loan repayment]

**Sources of Financing**

Are you providing additional financing for this project? Please describe below:

	Amount	Loan (y/n)	Term Length	Interest Rate	Monthly Payments
Owner Equity:	_____	_____	_____	_____	_____
Lender:	_____	_____	_____	_____	_____
Investor:	_____	_____	_____	_____	_____
Other:	_____	_____	_____	_____	_____

**Current Business Debt**

Does your business have current obligations? Please describe below from largest to smallest:

	Lender	Amount	Term Length	Interest Rate	Monthly Payments
Lender 1:	_____	_____	_____	_____	_____
Lender 2:	_____	_____	_____	_____	_____
Lender 3:	_____	_____	_____	_____	_____
Lender 4:	_____	_____	_____	_____	_____

**Recent Financials**

If an existing business, please fill out the following for the previous fiscal year:

Revenues:	_____
Expenses:	_____
Debt payments:	_____
Net Profit:	_____

**Does the proposed project include a Public Benefit that will qualify for an interest rate reduction?** Check all that apply. Refer to the *EDLF Loan Program Policies & Guidelines* for more information on Public Benefit criteria.

- |  |  |
|--|--|
| <input type="checkbox"/> Sustainability              | <input type="checkbox"/> Transit Alternatives  |
| <input type="checkbox"/> Public Amenities            | <input type="checkbox"/> Economic Impact   |
| <input type="checkbox"/> Adaptive Reuse              | <input type="checkbox"/> Disadvantaged Business Owner (i.e. woman, disabled, minority) |
| <input type="checkbox"/> Historic Preservation       | <input type="checkbox"/> Low to Moderate Income Business Owner                         |
| <input type="checkbox"/> Permanent Job Creation      | <input type="checkbox"/> U.S. Veteran Business Owner                                   |
| <input type="checkbox"/> Architecture & Urban Design |  |

Describe how the proposed project will meet the criteria for each of the Public Benefits selected above.

**Applicant Certification**

I/We hereby certify that all statements in this application are true and complete and are made for the purpose of obtaining credit. I/We fully understand that it is a federal crime punishable by fine or imprisonment or both to knowingly make any false statements concerning any of the above facts, as applicable under the provisions of Title 18, United States Code, Section 101.

\_\_\_\_\_  
**Applicant (print)**

\_\_\_\_\_  
**By (signature)**

\_\_\_\_\_  
**Title**

\_\_\_\_\_  
**Date**

Submit all paperwork to our office at:  
451 South State Street, Room 425, Salt Lake City, UT 84114 or electronically to [edlf@slcgov.com](mailto:edlf@slcgov.com)

How did you hear about us?