



COVID-19 Small Business Loan Application

St. Croix County's COVID-19 Small Business Loan Program was established as a resource for St. Croix County businesses experiencing unanticipated financial pressures due to the COVID-19 pandemic. This fund is designed to work with other federal, state, and regional financial assistance programs when possible. The fund is intended to sustain what otherwise were healthy businesses through this period of economic disruption.

Program Terms

Individual loan amounts: \$5,000-\$10,000

- 0% interest rate
- 3-5-year term (determined on a case-by-case basis)
- No payments for at least one year
- No prepayment penalties
- Owner Guarantees

Eligible Criteria

- Business has a physical location in St. Croix County
- Business has been adversely impacted by COVID-19
- Property owner must be current on property taxes and special assessments

Eligible Use of Funds

Working capital including but not limited to:

- Rent/Mortgage
- Commercial Utilities
- Pre-existing purchase orders (placed prior to 6/15/2020)
- Payroll expenses
- Modifications and/or upgrades related to adjusting business practices due to COVID-19

How to Apply

Applications are due by end of day Thursday, September 10, 2020. Completed applications and attachments should be sent to the West Central Wisconsin Regional Planning Commission using either of the email or mail addresses provided below. West Central Wisconsin Regional Planning Commission will notify you of the status of your submitted application. Applications are processed on a first come, first served basis, subject to completeness.

- **Email:** Heidi Biesterveld - hbiesterveld@wcrpc.org
- **Mail:** 800 Wisconsin Street, Mail Box 9 Eau Claire, WI 54703

Loan Application

Applicant Name and Contact Information

Date of Submission: _____

Company's Legal Name: _____

Company's DBA Name (if different): _____

Date Established: _____

Type of Company/Organization:

LLC

C Corporation

LLP

Sole Proprietorship

Partnership

Non-Profit

S Corporation

Contact Person: _____

Title: _____

Company Mailing Address: _____

Contact's Address: _____

Telephone Number: _____

Email Address: _____

Website: _____

Tax ID#: _____

Management Information

In the table below, include the owner(s), officer(s), director(s), & shareholder(s) who own 20% or more shares of the company* (please attach additional page(s) if more space is needed)

Name	Title	Ownership Percentage	Minority Owner	Woman Owner	Veteran Owner

**Personal financial statements and tax returns are required for those with 20% or greater ownership interest.*

*West Central Wisconsin Regional Planning Commission reserves the right to obtain **credit bureaus** on any business or individual in connection with this application.*

Bank Information

Name of Lead Bank and Contact Person: _____

Phone Number: _____

E-mail Address: _____

Loan Amount and Terms

Amount of Loan (\$5,000 - \$10,000): _____

Use of Funds: _____

Repayment Terms (3-5 years): _____

Do you, your spouse, any member of your household, or anyone who owns, manages, or directs your business, or their spouses, or members of their households work for St. Croix County or hold an official position with the county?

Yes

No

Demonstrate why you need the St. Croix County COVID-19 Small Business Loan and how this loan will help you stay in business until the economy recovers? (please attach additional page(s) if more space is needed)

Employee Information and Job Retention

Enter the numbers of existing employees:

Full Time	Part Time	Woman	Minority	Total

Enter the numbers of jobs you are projected to create within the next two years:

Year 1 Full Time	Year 1 Part Time	Year 2 Full Time	Year 2 Part Time	Total

Has the company, any officer, subsidiary or affiliate of your company been involved in any bankruptcy or insolvency proceedings in the last 36 months? *If yes, please provide the details as a separate exhibit.*

Yes No

Has the company, any officer, subsidiary or affiliate of your company been involved in any lawsuits in the last 36 months? *If yes, please provide the details as a separate exhibit.*

Yes No

Does the company, any officer, subsidiary or affiliate have any outstanding tax liens?

Yes No

Does the company, owner(s), or member of management have a controlling interest in other businesses? *If yes, please provide their names and relationship with your company along with a current balance sheet and income statement for each as a separate exhibit.*

Yes No

Does the company buy from, sell to, or use the services in which owner(s), shareholder(s) or member(s) of management have a significant financial interest? *If yes, please provide the details as a separate exhibit.*

Yes No

Are any of the individuals listed under "Management" on parole or probation? *If yes, please provide the details as a separate exhibit.*

Yes No

Certification Statement

The applicant:

1. Certifies that to the best of the applicant's knowledge and belief, the information being submitted to West Central Wisconsin Regional Planning Commission and St. Croix EDC as part of the St. Croix County COVID-19 Small Business Loan Program application is true and correct.
2. Certifies that the request for a loan from the St. Croix County COVID-19 Small Business Loan Fund is purely due to events resulting from the COVID-19 pandemic. It is not due to events unrelated to the pandemic.
3. Certifies that the applicant is in compliance with all laws, regulations, ordinances, and orders of public authorities applicable to it.
4. Certifies that the applicant is not in default under the terms and conditions of any grant or loan agreements, leases, or financing arrangements with its other creditors.
5. Certifies that St. Croix EDC and/or West Central Wisconsin Regional Planning Commission is authorized to obtain background checks, including a credit check on the applicant, the business, and/or the individual(s).
6. Certifies that the applicant has disclosed and will continue to disclose any occurrence or event that could have an adverse material impact on the project. Adverse material impact includes but is not limited to lawsuits, criminal or civil actions, bankruptcy proceedings, regulatory intervention, or inadequate capital to complete the project.
7. Understands submitting false or misleading information in connection with an application may result in the applicant being found ineligible for financial assistance under the funding program, and the applicant or its representative may be subject to civil and/or criminal prosecution.
8. Understands that unless it qualifies as a trade secret, all information submitted to West Central Wisconsin Regional Planning Commission is subject to Wisconsin's Open Records Law.
9. Agrees to complete a direct payment authorization form allowing loan payments to be electronically debited via automatic clearing house (ACH) in the event credit is extended.

Authorized Representative Signature: _____

Date: _____

Social Security #: _____

Other 20% Owner Representative Signature: _____

Date: _____

Social Security #: _____

Other 20% Owner Representative Signature: _____

Date: _____

Social Security #: _____

Additional Documentation

The following exhibits must be completed where applicable and included as part of your application.

West Central Wisconsin Regional Planning Commission and /or the St. Croix EDC reserve the right to request additional information not listed here.

Business Narrative. At a minimum this should include:

Brief business description and company history

Project summary

Description of the business industry, sales, markets, and competition

Business Tax return for the last year (2019) and balance sheet/profit and loss statement for an interim period less than ninety days from date of application with schedule of business debt.

Personal financial statement of principal owners and first two pages of most recent income tax return (all owners with 20% or more ownership).

Copy of the driver's licenses of everyone with 20% or more ownership in the business

Business organizational articles (i.e. Articles of Incorporation/Organization, Membership Agreement (if one exists), Bylaws)

Voided check for the account from which future loan payments will be deducted via ACH.