



TOWN OF ROCKY MOUNT MICROENTERPRISE REVOLVING LOAN FUND APPLICATION FOR LOAN

SECTION I: GENERAL INFORMATION

Name: _____ Business Name: _____

Business Incorporation Type: _____ Incorporated since: _____

Home Phone Number: (____)____-____ Email: _____

Business Phone Number: (____)____-____ Mobile Phone Number: (____)____-____

Home Address: _____ Business Address: _____

SECTION II: LOAN INFORMATION

Amount Requested: _____

Number of Full Time Employee (FTE) Positions To Be Created: _____

Purpose (briefly describe what the loan will be used to fund):

Description of Collateral: _____

Microenterprise Loan Pool Board Recommendation

Approved _____ Not approved _____

Vote _____ Attest _____

Board Meeting Date _____

CHECKLIST

(Please make sure to include the following documents with your application; please do not staple any of the documents; please do not include original documents, as they will not be returned)

- ___ Business Plan
- ___ Last two years' personal tax return or one tax return and extension letter
- ___ Town Business License
- ___ Business tax return for past two years (if business is established)
- ___ Credit Report Authorization
- ___ Certificate of Insurance
- ___ Proof of equity interest in business or building
- ___ Federal Tax I. D. Number
- ___ Proof of collateral



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SECTION III: LOAN INFORMATION

ASSETS

Cash on Hand and in Banks \$ _____

Savings Accounts \$ _____

Stocks and Bonds \$ _____

Real Estate \$ _____

Automobiles - Present Value \$ _____

Personal Property \$ _____

Other Assets \$ _____

TOTAL ASSETS \$ _____

INCOME

Yearly Salary \$ _____

Other Income \$ _____

TOTAL INCOME \$ _____

LIABILITIES

Outstanding Bills \$ _____

Notes Payable to Banks and Others \$ _____

Regular Monthly Payments
(Rent, Auto, Insurance) \$ _____

Other Liabilities and Debts \$ _____

TOTAL LIABILITIES \$ _____

NET WORTH (ASSETS - LIABILITIES)

Net Worth \$ _____

Please submit all completed applications and supporting documentation to:

Daniel Pinard - dpinard@rockymountva.org
Cultural and Economic Development Director

Town of Rocky Mount

345 Donald Avenue

Rocky Mount, VA 24151

Call 540-488-2023 if you have questions about this form or about the loan requirements.

By signing this form, I acknowledge that I am the person named above and I understand that Federal Law provides that a person who obtains credit information under false pretenses shall be fined or imprisoned not more than two years or both.

Printed Name

Signature

Date

STATEMENT OF CONFIDENTIALITY: The Town of Rocky Mount assures that information and data obtained as to personal facts and circumstances related to the Town of Rocky Mount's Microenterprise Loan Program will be collected and held confidential, and will not be divulged without the individual's written consent. Any information disclosed, except to the Virginia Department of Housing and Community Development, must be in summary, statistical, or other form which does not identify particular individuals.