NYA Revolving Loan Fund Application

Date_____

Business Name_____

Legal Business Name_____

Property Address_____

Business Owner/Title_____

Business Owner Address_____

Property Owner Address (if diff from applicant) _____

Home Phone_____ Mobile Phone_____

Applicant Name_____

Applicant Address_____

Applicant DOB_____SSN#_____

Co-Applicant Name_____

Co-Applicant Address_____

Co-Applicant DOB_____SSN#_____

Type of Business_____

Years in Business_____ Business Organization: Corp_____ Partnership_____

Business Phone_____ Mobile Phone_____

Email_____ Website_____

Lease Agreement Expiration Date (if applicant is leasing) _____

**If the applicant is NOT the property owner, the owner must sign on page 3 to approve the proposed improvements and provide letter of support. If applicant is leasing the building, indicate expiration date of current lease.)

**The property must be up to date on all property taxes and assessments

Describe the business:

_____
_____

Loan Amount Requested$_____

Term_____**The amount of the request should not exceed $10,000.

Special Payment Terms or Conditions Requested_____

Describe the proposed project _____

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Conventional Business Lender_____

Contact Name/Loan Officer_____Phone_____

I authorize the City of Norwood Young America, MN Economic Development Authority to obtain background information needed in connection with my loan application such as:

- Credit report
- Employment history, dates of employment, title, income, hours worked, stability, etc.
- Banking and savings accounts, deposits, and balance verifications.
- All loan ratings, opening date, high credit, payment amount, loan balances, payment records, and pay off information.
- Any other information requested in connection with a determination of credit worthiness.

This information is for the use of this lender in connection with my/our loan application and the conduct of "Post Closing" quality control audits as required by various government and quasi-government agencies.

A photocopy of this authorization, bearing the photocopied signatures of the undersigned, may be deemed to be the equivalent of the original and may be treated and used as a duplicate original.

Applicant Signature_____Date_____

Co-Applicant Signature_____Date_____

Application Submittal:
City of NYA
PO Box 59
Norwood Young America, MN 55368
(952)467-1810
Economicdev@cityofnya.com

Internal Use Only – to be completed by program administrator

Date application received_____

Loan amount requested_____

Approval date_____

Project completion date_____

Program administration signature_____

NYA Revolving Loan Fund

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