Langlade County Economic Development Corporation (LCEDC) EMERGENCY RESPONSE LOAN BUSINESS APPLICATION

The LCEDC, the Fund Lender, may ask for additional information not included in this application.

	OLO HON I-DOO	SECTION I-BUSINESS INFORMATION				
Legal Entity: □C Corp □S Corp □LLC □LLP □Partnership □Sole Proprietor						
Legal Name:						
Trade Name:						
Mailing Address:						
City, State, Zip:		County:				
(Federal Employee Identification Nur	FEIN: (Federal Employee Identification Number –Tax ID)					
Date Established:		State of Organization (Per A				
Current Employment	Full-time:	Part-tin	ne:			
Website URL:		Phone:				
Head of Organization:		Title:				
Phone:		Email:				
Briefly describe the business including products/services, locations and customers. Please attach business summary:						
	SECTION IL PRIMARY	APPLICATION CONTACT				
Project Contact:	SECTION II- I KIMAK	Title:				
Email:		Office Phone:				
Cell Phone:		Mailing Address:				
City, State, Zip:		mamig / tau ooo.				
5.1. 3 , 5.1.1.6, 2. 1 p .						
SECTION III- BUSINESS OWNERSHIP						
	SECTION III- BU	SINESS OWNERSHIP				
List All Owners:						
List All Owners: Name	SECTION III- BU Ownership %	Phone	Email			
			Email			
			Email			
			Email			
			Email			
Name	Ownership %	Phone	Email			
	Ownership %	Phone	Email			
Name	Ownership % business been under cu	Phone rrent ownership?	Email			
Name How many years has the	Ownership % business been under cu	Phone rrent ownership? LOAN REQUEST				
How many years has the Please detail how you in	Ownership % business been under cu SECTION IV	Phone rrent ownership?				
How many years has the Please detail how you in Note: Promissory Note from the	Ownership % business been under cu SECTION IV stend to use the micro-lo he applicant will be required.	Phone rrent ownership? LOAN REQUEST				
How many years has the Please detail how you in Note: Promissory Note from the Rent/Mortgage Payment:	Ownership % business been under cu SECTION IV stend to use the micro-lo he applicant will be required.	Phone rrent ownership? LOAN REQUEST				
How many years has the Please detail how you in Note: Promissory Note from the	Ownership % business been under cu SECTION IV stend to use the micro-lo he applicant will be required.	Phone rrent ownership? LOAN REQUEST				
How many years has the Please detail how you in Note: Promissory Note from the Rent/Mortgage Payment: Utility Expense:	Ownership % business been under cu SECTION IV Itend to use the micro-lo he applicant will be required.	Phone rrent ownership? LOAN REQUEST				

SECTION V- BANKING - LENDER REFERENCE			
Banking-Lender:	Banking-Lender Contact:		
Email:	Office Phone:		
Cell Phone:	Mailing Address:		
City, State, Zip:			

SECTION VI - COMPLIANCE CHECKS FOR MICRO-LOAN ELIGIBILITY

Your business and its owners need to be in compliance with several authorities including but not limited to the following.

For-profit Corporations, Limited Liability Companies, Limited Liability Partnerships, Limited Partnerships and Cooperatives doing business in the State of Wisconsin are required to register with the Department of Financial Institutions (DFI). These type of businesses must be registered using their legal name and be current with DFI. If your business is not listed as being current in DFI records your business is not eligible for a micro-loan. Businesses operating as Sole Proprietorships are not required to be registered with the DFI.

SECTION VII - CERTIFICATION

I hereby understand, attest, certify and/or agree to the following terms and conditions:

- (a) I meet the program requirements for the LCEDC Small Business Emergency Response Loan Program.
- (b) I agree that by submitting this application, the LCEDC is not under any obligation to approve the loan.
- (c) I agree to indemnify, defend and hold harmless the LCEDC, officers, officials, employees, agents and other associated parties against claims and damages relating to or arising from this application or any funds provided in connection with this application, and hereby release and waive any claims and damages arising now or in the future relating in any matter to rights, losses, liabilities, costs or expenses against them.
- (d) I acknowledge, understand and agree that I have applied for a LCEDC emergency response loan that is required to be paid back to the LCEDC.
- (e) To authorize LCEDC to check our credit and employment history and any other information necessary to make a credit decision.
- (f) The information supplied in this application and all other supplemental information submitted for review is true, accurate, complete and reflects my intended response. I understand and agree that any information determined at any time to be false, incomplete or misleading will constitute cause the LCDEC to determine this loan and the Promissory Note provided by the undersigned to become immediately due and owing, including all interest owing thereon.

Signature:	
oignature.	
Name:	
Title:	
Date:	
Date.	
Cignoture	
Signature:	
Name:	
Name:	
Title:	
nue.	
Date:	
Date.	

Include additional signatures as required to authorize the submission of this application on behalf of the business.

Submit this application and its attachments to:

Angie Close

Executive Director, LCEDC

E-mail or U.S. Mail using the following addresses:

E-Mail: aclose@co.langlade.wi.us

U.S. Mail: Langlade County Economic Development Corporation

312 Forrest Avenue Antigo, WI 54409

For questions on the application call: 715-623-5123

Economic Development Corporation

312 Forrest Avenue | Antigo, WI 54409 | 715.623.5123

www.langladecounty.org

Application Requirements

Applicants shall complete the following information:

- 1. Business Summary Provide a brief overview of your business. LCEDC reserves the right to require an up-to-date business plan for any projects. At a minimum, business overview should include:
 - History of the company's operations
 - The physical address of business of the Applicant
 - Ownership structures and any authorized agent
 - Include the number of full-time employees
 - The Number of part-time employees
 - A simple budget summary/Profit and Loss Statement
- 2. Demonstrate why Small Business Emergency Response Loan assistance is needed (please attach additional pages if necessary)

3.	Please answer following questions:
	When did the impact start and what is the anticipated end date? From: To:
	What were your business sales/revenues during the affected period:
	What were your business sales/revenues during the SAME period last year:
	Amount of business interruption insurance received or anticipated, if any:
	Is the business closed:(if yes, when did it close) or considering closing?
	How many people did you employ prior to the pandemic:
	How many are currently employed:
	How many employees do you anticipate retaining following the pandemic:
	What initiatives have been taken to reduce costs, defer loan payments, adjust lease terms, etc.
	How long do you think you will be able to support operating costs:

Located in the Wood Technology Center of Excellence at NTC's Antigo Campus



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	Economic Development corporation
	Provide details on the proposed use of funds:
	Describe what other types of assistance you have applied for or plan to apply for including State or Federal loan components like the Payment Protection Program or Economic Injury Disaster Loan, SBA Debt Relief, grants and other types of assistance. Include dates of application, amounts requested and anticipated turnaround time:
4.	Explain any other factors to consider in evaluating this request (attach additional sheet)
<u>Appli</u>	cation

SCHEDULE OF DEBTS Fill in below schedule with all business debt: including business real estate owned outside the operating company **ORIGINAL ORIGINAL MATURITY MONTHLY PAYMENTS LENDER AMOUNT** DATE **BALANCE INTEREST** DATE **CURRENT/PAST DUE** Signature Date