



# U.S. Small Business Administration DISASTER BUSINESS LOAN APPLICATION

OMB No.: 3245-0017  
Expiration: 08/31/2021

FOR SBA INTERNAL USE ONLY

Date Received \_\_\_\_\_ Location \_\_\_\_\_ By \_\_\_\_\_

Physical Declaration Number

Economic Injury Declaration Number

FEMA Registration Number   
(if known)

Filing Deadline Date

Filing Deadline Date

SBA Application Number

## 1. ARE YOU APPLYING FOR:

- Physical Damage** -- Indicate type of damage
- Real Property       Business Contents
- Economic Injury (EIDL)**

## **Military Reservist EIDL (MREIDL)**

(complete the following)

- \* Name of Essential Employee \_\_\_\_\_
- \* Employee's Social Security Number \_\_\_\_\_

**PLEASE PROVIDE ALL INFORMATION OR DOCUMENTATION REQUESTED IN THE ATTACHED FILING REQUIREMENTS.**

\* For information about these questions, see the attached Statements Required by Laws and Executive Orders.

**Apply online at <https://disasterloan.sba.gov/ela/> OR send completed applications to:**

**U.S. Small Business Administration, Processing and Disbursement Center, 14925 Kingsport Road, Fort Worth, Texas 76155**

## 2. ORGANIZATION TYPE \*Sole Proprietors should complete form 5C

- Partnership       Limited Partnership       Limited Liability Entity
- Corporation       Nonprofit Organization       Trust       Other: \_\_\_\_\_

## 3. APPLICANT'S LEGAL NAME

## 4. FEDERAL E.I.N. (if applicable)

## 5. TRADE NAME (if different from legal name)

## 6. BUSINESS PHONE NUMBER (Including area code)

## 7. MAILING ADDRESS

- Business       Home       Temp       Other \_\_\_\_\_

Number, Street, and/or Post Office Box  City  County  State  Zip

## 8. DAMAGED PROPERTY ADDRESS(ES)

## BUSINESS PROPERTY IS:

- (If you need more space, attach additional sheets.)       Same as mailing address       Owned       Leased

Number and Street Name  City  County  State  Zip

## 9. PROVIDE THE NAME(S) OF THE INDIVIDUAL(S) TO CONTACT FOR:

### Loss Verification Inspection

### Information necessary to process the Application

Name       Name

Telephone Number       Telephone Number

## 10. ALTERNATE WAY TO CONTACT YOU

- Cell Number       E-mail
- Fax Number       Other

## 11. BUSINESS ACTIVITY:

## 12. NUMBER OF EMPLOYEES (pre-disaster):

## 13. DATE BUSINESS ESTABLISHED:

## 14. CURRENT MANAGEMENT SINCE:

15. AMOUNT OF ESTIMATED LOSS: If unknown, enter a question mark       Real Estate        Inventory

Machinery & Equipment        Leasehold Improvements

## 16. INSURANCE COVERAGE (IF ANY)

(If you need more space, attach additional sheets.)

Coverage Type:

Name of Insurance Company and Agent

Phone Number of Insurance Agent       Policy Number

**17. OWNERS** (Individuals and businesses.) Complete for each: 1) proprietor, or 2) limited partner who owns 20% or more interest and each general partner, or 3) stockholder or entity owning 20% or more voting stock.  
 (If you need more space attach additional sheets.)

Legal Name				Title/Office	% Owned	E-mail Address	
SSN/EIN*	Marital Status	Date of Birth*	Place of Birth*	Telephone Number (area code)		US Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No	
Mailing Address				City	State	Zip	

\* For information about these questions, see the attached Statements Required by Laws and Executive Orders.

Business Entity Owner Name				EIN	Type of Business	% Ownership	
Mailing Address				City	State	Zip Code	
E-mail Address					Phone		

**18. For the applicant business and each owner listed in item 17, please respond to the following questions, providing dates and details on any question answered YES (Attach an additional sheet for detailed responses).**

a. Has the business or a listed owner ever been involved in a bankruptcy or insolvency proceeding? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b. Does the business or a listed owner have any outstanding judgments, tax liens, or pending lawsuits against them? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
c. In the past year, has the business or a listed owner been convicted of a criminal offense committed during and in connection with a riot or civil disorder or other declared disaster, or ever been engaged in the production or distribution of any product or service that has been determined to be obscene by a court of competent jurisdiction? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
d. Has the business or a listed owner ever had or guaranteed a Federal loan or a Federally guaranteed loan? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
e. Is the business or a listed owner delinquent on any Federal taxes, direct or guaranteed Federal loans (SBA, FHA, VA, student, etc.), Federal contracts, Federal grants, or any child support payments? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
f. Does any owner, owner's spouse, or household member work for SBA or serve as a member of SBA's SCORE, ACE, or Advisory Council? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
g. Is the applicant or any listed owner currently suspended or debarred from contracting with the Federal government or receiving Federal grants or loans? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**19. Regarding you or any joint applicant listed in Item 17:**

a) are you presently subject to an indictment, criminal information, arraignment, or other means by which formal criminal charges are brought in any jurisdiction; b) have you been arrested in the past six months for any criminal offense; c) for any criminal offense - other than a minor vehicle violation - have you ever: 1) been convicted, 2) plead guilty, 3) plead nolo contendere, 4) been placed on pretrial diversion, or 5) been placed on any form of parole or probation (including probation before judgement)?

Yes  No If yes, Name: \_\_\_\_\_

**20. PHYSICAL DAMAGE LOANS ONLY.** If your application is approved, you may be eligible for additional funds to cover the cost of mitigating measures (real property improvements or devices to minimize or protect against future damage from the same type of disaster event). It is not necessary for you to submit the description and cost estimates with the application. SBA must approve the mitigating measures before any loan increase. **By checking this box, I am interested in having SBA consider this increase.**

**21. If anyone assisted you in completing this application, whether you pay a fee for this service or not, that person must print and sign their name in the space below.**

Name and Address of Representative (please include the individual name and their company)

_____ (Signature of Individual)	_____ (Print Individual Name)
_____ (Name of Company)	_____ Phone Number (include Area Code)
_____ Street Address, City, State, Zip	_____ Fee Charged or Agreed Upon

**Unless the NO box is checked, I give permission for SBA to discuss any portion of this application with the representative listed above. NO**

**AGREEMENTS AND CERTIFICATIONS**

On behalf of the undersigned individually and for the applicant business:  
 I/We authorize my/our insurance company, bank, financial institution, or other creditors to release to SBA all records and information necessary to process this application.  
 If my/our loan is approved, additional information may be required prior to loan closing. I/We will be advised in writing what information will be required to obtain my/our loan funds.  
 I/We hereby authorize the SBA to verify my/our past and present employment information and salary history as needed to process and service a disaster loan.  
 I/We authorize SBA, as required by the Privacy Act, to release any information collected in connection with this application to Federal, state, local, tribal or nonprofit organizations (e.g. Red Cross Salvation Army, Mennonite Disaster Services, SBA Resource Partners) for the purpose of assisting me with my/our SBA application, evaluating eligibility for additional assistance, or notifying me of the availability of such assistance.  
 I/We will not exclude from participating in or deny the benefits of, or otherwise subject to discrimination under any program or activity for which I/we receive Federal financial assistance from SBA, any person on grounds of age, color, handicap, marital status, national origin, race, religion, or sex.  
 I/We will report to the SBA Office of the Inspector General, Washington, DC 20416, any Federal employee who offers, in return for compensation of any kind, to help get this loan approved. I/We have not paid anyone connected with the Federal government for help in getting this loan.  
**CERTIFICATION AS TO TRUTHFUL INFORMATION:** By signing this application, you certify that all information in your application and submitted with your application is true and correct to the best of your knowledge, and that you will submit truthful information in the future.  
**WARNING:** Whoever wrongfully misapplies the proceeds of an SBA disaster loan shall be civilly liable to the Administrator in an amount equal to one-and-one half times the original principal amount of the loan under 15 U.S.C. 636(b). In addition, any false statement or misrepresentation to SBA may result in criminal, civil or administrative sanctions including, but not limited to: 1) fines and imprisonment, or both, under 15 U.S.C. 645, 18 U.S.C. 1001, 18 U.S.C. 1014, 18 U.S.C. 1040, 18 U.S.C. 3571, and any other applicable laws; 2) treble damages and civil penalties under the False Claims Act, 31 U.S.C. 3729; 3) double damages and civil penalties under the Program Fraud Civil Remedies Act, 31 U.S.C. 3802; and 4) suspension and/or debarment from all Federal procurement and non-procurement transactions. Statutory fines may increase if amended by the Federal Civil Penalties Inflation Adjustment Act Improvements Act of 2015.

<b>SIGNATURE</b> _____	<b>TITLE</b> _____	<b>DATE</b> _____
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# U. S. Small Business Administration DISASTER BUSINESS LOAN APPLICATION

If you have questions about this application or problems providing the required information, please contact our Customer Service Center at 1-800-659-2955 or [disastercustomerservice@sba.gov](mailto:disastercustomerservice@sba.gov)  
If more space is needed for any section of this application, please attach additional sheets.  
SBA will contact you by phone or E-mail to discuss your loan request.

## Filing Requirements

### **FOR ALL APPLICATIONS, EXCLUDING NON-PROFIT ORGANIZATION, THE FOLLOWING ITEMS MUST BE SUBMITTED.**

- This application (SBA Form 5), completed and signed
- Tax Information Authorization (IRS Form 4506T), completed and signed by each applicant, each principal owning 20 percent or more of the applicant business, each general partner or managing member; and, for any owner who has greater than 50 percent ownership in an affiliate business. Affiliates include, but are not limited to, business parents, subsidiaries, and/or other businesses with common ownership or management
- Complete copies, including all schedules, of the most recent Federal income tax returns for the applicant business; an explanation if not available
- Personal Financial Statement (SBA Form 413) completed, signed, and dated by the applicant, each principal owning 20 percent or more of the applicant business, and each general partner or managing member
- Schedule of Liabilities listing all fixed debts (SBA Form 2202 may be used)

### **NON-PROFIT ORGANIZATION (including Houses of Worship, Association, etc), THE FOLLOWING ITEMS MUST BE SUBMITTED:**

- This application (SBA Form 5), completed and signed
- A complete copy of the organization's most recent tax return **OR** a copy of the organizations's IRS tax-exempt certification and complete copies of the organization's three most recent years' "Statement of Activities"
- Schedule of Liabilities.
- Tax Information Authorization (IRS Form 4506-T), completed and signed for each applicant and for any affiliated entity. Affiliates include, but are not limited to, business parents, subsidiaries, and/or other businesses with common ownership or management.

### **ADDITIONAL REQUIREMENTS FOR MILITARY RESERVIST ECONOMIC INJURY (MREIDL):**

- A copy of the essential employee's notice of expected call-up to active duty, or official call-up orders, or release/discharge from active duty
- A written explanation and financial estimate of how the call-up of the essential employee has or will result in economic injury to your business, and the steps your business is taking to alleviate the economic injury
- MREIDL Certification Form P-0002, which includes:
  - Your statement that the reservist is essential to the successful day-to-day operations of the business
  - Your certification that the essential employee will be offered the same or a similar job upon the employee's return from active duty
  - The essential employee's concurrence with your statements

### **ADDITIONAL INFORMATION MAY BE NECESSARY TO PROCESS YOUR APPLICATION. IF REQUESTED, PLEASE PROVIDE WITHIN 7 DAYS OF THE INFORMATION REQUEST;**

- Complete copy, including all schedules, of the most recent Federal income tax return for each principal owning 20 percent or more, each general partner or managing member, and each affiliate when any owner has more than 50 percent ownership in the affiliate business. Affiliates include, but are not limited to, business parents, subsidiaries, and/or other businesses with common ownership or management
- If the most recent Federal income tax return has not been filed, a year-end profit-and-loss statement and balance sheet for that tax year
- A current year-to-date profit-and-loss statement
- Additional Filing Requirements (SBA Form 1368) providing monthly sales figures for will generally be required when requesting an increase in the amount of economic injury.

**NOTE: PLEASE READ, DETACH AND KEEP FOR YOUR RECORDS**  
**STATEMENTS REQUIRED BY LAWS AND EXECUTIVE ORDERS**

To comply with legislation passed by the Congress and Executive Orders issued by the President, Federal executive agencies, including the Small Business Administration (SBA), must notify you of certain information. You can find the regulations and policies implementing these laws and Executive Orders in Title 13, Code of Federal Regulations (CFR), Chapter 1, or our Standard Operating Procedures (SOPs). In order to provide the required notices, the following is a brief summary of the various laws and Executive Orders that affect SBA's Disaster Loan Programs. A glossary of terms can be found at [Disasterloan.sba.gov](http://Disasterloan.sba.gov).

**FREEDOM OF INFORMATION ACT (5 U.S.C. § 552)**

This law provides, with some exceptions, that we must make records or portions of records contained in our files available to persons requesting them. This generally includes aggregate statistical information on our disaster loan programs and other information such as names of borrowers (and their officers, directors, stockholders or partners), loan amounts at maturity, the collateral pledged, and the general purpose of loans. We do not routinely make available to third parties your proprietary data without first notifying you, required by Executive Order 12600, or information that would cause competitive harm or constitute a clearly unwarranted invasion of personal privacy.

Freedom of Information Act (FOIA) requests must describe the specific records you want. For information about the FOIA, contact the Chief, FOI/PA Office, 409 3<sup>rd</sup> Street, SW, Suite 5900, Washington, DC 20416, or by e-mail at [foia@sba.gov](mailto:foia@sba.gov).

**PRIVACY ACT (5 U.S.C. § 552a)**

Anyone can request to see or get copies of any personal information that we have in your file. Any personal information in your file that is retrieved by individual identifiers, such as name or social security number is protected by the Privacy Act, which means requests for information about you may be denied unless we have your written permission to release the information to the requestor or unless the information is subject to disclosure under the Freedom of Information Act. The Agreements and Certifications section of this form contains written permission for us to disclose the information resulting from this collection to state, local or private disaster relief services.

The Privacy Act authorizes SBA to make certain "routine uses" of information protected by that Act. One such routine use for SBA's loan system of records is that when this information indicates a violation or potential violation of law, whether civil, criminal, or administrative in nature, SBA may refer it to the appropriate agency, whether Federal, State, local or foreign, charged with responsibility for or otherwise involved in investigation, prosecution, enforcement or prevention of such violations. Another routine use of personal information is to assist in obtaining credit bureau reports, on the Disaster Loan Applicants and guarantors for purposes of originating, servicing, and liquidating Disaster loans. See, 69 F.R. 58598, 58617 (and as amended from time to time) for additional background and other routine uses.

Under the provisions of the Privacy Act, you are not required to provide social security numbers. (But see the information under Debt Collection Act below) We use social security numbers to distinguish between people with a similar or the same name for credit decisions and for debt collection purposes. Failure to provide this number may not affect any right, benefit or privilege to which you are entitled by law, but having the number makes it easier for us to more accurately identify to whom adverse credit information applies and to keep accurate loan records.

Note: Any person concerned with the collection, use and disclosure of information, under the Privacy Act may contact the Chief, FOI/PA Office, 409 3<sup>rd</sup> Street, SW, Suite 5900, Washington, DC 20416 or by e-mail at [foia@sba.gov](mailto:foia@sba.gov) for information about the Agency's procedures relating to the Privacy Act and the Freedom of Information Act.

**DEBT COLLECTION ACT OF 1982; DEFICIT REDUCTION ACT OF 1984; DEBT COLLECTION IMPROVEMENT ACT OF 1996 & other titles (31 U.S.C. 3701 et seq.)**

These laws require us to aggressively collect any delinquent loan payments and to require you to give your taxpayer identification number to us when you apply for a loan. If you receive a loan and do not make payments when they become due, we may take one or more of the following actions (this list may not be exhaustive):

- \*Report the delinquency to credit reporting bureaus.
- \*Offset your income tax refunds or other amounts due to you from the Federal Government.
- \*Refer the account to a private collection agency or other agency operating a debt collection center.
- \*Suspend or debar you from doing business with the Federal Government.
- \*Refer your loan to the Department of Justice.
- \*Foreclose on collateral or take other actions permitted in the loan instruments.
- \*Garnish wages.
- \*Sell the debt.
- \*Litigate or foreclose.

#### **RIGHT TO FINANCIAL PRIVACY ACT OF 1978 (12 U.S.C. § 3401 et seq.)**

This notifies you, as required by the Right to Financial Privacy Act of 1978 (Act), of our right to access financial records held by financial institutions that were or are doing business with you or your business. This includes financial institutions participating in loans or loan guarantees.

The law provides that we may access your financial records when considering or administering Government loan or loan guaranty assistance to you. We must give a financial institution a certificate of our compliance with the Act when we first request access to your financial records. No other certification is required for later access. Our access rights continue for the term of any approved loan or loan guaranty. We do not have to give you any additional notice of our access rights during the term of the loan or loan guaranty.

We may transfer to another Government authority any financial records included in a loan application or about an approved loan or loan guaranty as necessary to process, service, liquidate, or foreclose a loan or loan guaranty. We will not permit any transfer of your financial records to another Government authority except as required or permitted by law.

#### **Paperwork Reduction Act (44 U.S.C. Chapter 35)**

We are collecting the information on this form in order to make disaster loans available to qualified small businesses. The form is designed to collect the information necessary for us to make eligibility and credit decisions in order to fund or deny loan requests. We will also use the information collected on this form to produce summary reports for program and management analysis, as required by law.

PLEASE NOTE: The estimated burden for completing this form is 2 hours. Your responses to the requested information are required in order to obtain a benefit under SBA's Disaster Business Loan Programs. However, you are not required to respond to any collection of information unless it displays a currently valid OMB approval number. If you have any questions or comments concerning any aspects of this information collection, please contact the U.S. Small Business Administration Information Branch, 409 3<sup>rd</sup> St., SW, Washington, DC 20416 and Desk Officer for SBA, Office of Management and Budget, Office of Information and Regulatory Affairs, 725 17<sup>th</sup> St., NW, Washington, DC 20503. (3245-0017) **PLEASE DO NOT SEND FORMS TO OMB.**

#### **Policy Concerning Representatives and Their Fees**

When you apply for an SBA loan, you may use an attorney, accountant, engineer, appraiser or other representative to help prepare and present the application to us. You are not required to have representation. If an application is approved, you may need an attorney to help prepare closing documents.

There are no "authorized representatives" of SBA, other than our regular salaried employees. Payment of a fee or gratuity to our employees is illegal and will subject those involved to prosecution.

SBA Regulations prohibit representatives from proposing or charging any fee for services performed in connection with your loan unless we consider the services necessary and the amount reasonable. The Regulations also prohibit charging you any commitment, bonus, broker, commission, referral or similar fee. We will not approve the payment of any bonus, brokerage fee or commission. Also, we will not approve placement or finder's fees for using or trying to use influence in the SBA loan application process.

Fees to representatives must be reasonable for services provided in connection with the application or the closing and based upon the time and effort required, the qualifications of the representative, and the nature and extent of work performed. Representatives must execute a compensation agreement.

In the appropriate section of the application, you must state the names of everyone employed by you or on your behalf. You must also notify the SBA disaster office in writing of the names and fees of any representative you employ after you file your application.

If you have any questions concerning payment of fees or reasonableness of fees, contact the Field Office where you filed or will file your application.

#### **Occupational Safety and Health Act (29 U.S.C. 3651 et seq.)**

This legislation authorizes the Occupational Safety and Health Administration (OSHA) in the Department of Labor to require businesses to modify facilities and procedures to protect employees when appropriate. If your business does not do so, you may be penalized, forced to close or prevented from starting operations in a new facility. Because of this, we may require information from you to determine whether your business complies with OSHA regulations and may continue operating after the loan is approved or disbursed. You must certify to us that OSHA requirements applying to your business have been determined and that you are, to the best of your knowledge, in compliance.



# U. S. Small Business Administration DISASTER HOME / SOLE PROPRIETOR LOAN APPLICATION

OMB No. : 3245-0018  
Expiration: 07/31/2021

SBA Internal Use Only:

Date Received \_\_\_\_\_ Location \_\_\_\_\_ By \_\_\_\_\_

SBA Application Number: \_\_\_\_\_ FEMA Registration Number: \_\_\_\_\_ Filing Deadline: \_\_\_\_\_ Declaration Number: \_\_\_\_\_

### ARE YOU APPLYING FOR:

Primary Residence  Sole Proprietor - Physical Damage  Sole Proprietor - Economic Injury

### INFORMATION ABOUT THE APPLICANT(S)

#### Primary Applicant

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_  
Last Name \_\_\_\_\_ Suffix \_\_\_\_\_  
Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Household Size \_\_\_\_\_  
Marital Status  Married  Not Married  
Are you a U.S. Citizen?  Yes  No  
Are you an SBA Employee?  Yes  No

#### Joint Applicant

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_  
Last Name \_\_\_\_\_ Suffix \_\_\_\_\_  
Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Marital Status  Married  Not Married  
Are you a U.S. Citizen?  Yes  No  
Are you an SBA Employee?  Yes  No

### CONTACT INFORMATION

Check your preferred method of contact:

E-mail Address \_\_\_\_\_   
Cell Phone \_\_\_\_\_   
Home Phone \_\_\_\_\_   
Work Phone \_\_\_\_\_

Check your preferred method of contact:

E-mail Address \_\_\_\_\_   
Cell Phone \_\_\_\_\_   
Home Phone \_\_\_\_\_   
Work Phone \_\_\_\_\_

Closest Relative Not Living With You: Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

### DAMAGED PROPERTY INFORMATION

#### DAMAGED PROPERTY ADDRESS additional damaged properties added in "additional comments" section

Address \_\_\_\_\_  
City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Type of Damage:  Real Estate  Personal Property  Automobile

Do you own or rent this property?  Own  Rent

Is this property your Primary Residence?  Yes  No

If No, please select from the list below:

- Vacation/secondary home
- I own the property but a family member/friend lives in the property
- Rental/Business Property

#### MAILING ADDRESS if different than the damaged property address.

Address \_\_\_\_\_  
City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### INCOME INFORMATION

#### Primary Applicant

Employed  Unemployed  Self Employed  Retired

Total Annual Income (before deductions) \$ \_\_\_\_\_

Employer Name \_\_\_\_\_

Employer Phone Number \_\_\_\_\_

**Note:** Include all reoccurring income from all sources such as employment, self-employment, part-time work, social security, retirement income, disability income, interest income, child support, alimony, etc.

Do not include one-time or non-reoccurring income.

#### Joint Applicant

Employed  Unemployed  Self Employed  Retired

Total Annual Income (before deductions) \$ \_\_\_\_\_

Employer Name \_\_\_\_\_

Employer Phone Number \_\_\_\_\_

**Note:** Include all reoccurring income from all sources such as employment, self-employment, part-time work, social security, retirement income, disability income, interest income, child support, alimony, etc.

Do not include one-time or non-reoccurring income. Do not include items covered by Primary Applicant

**DEBTS**  I have no debts

<b>Mortgage Holder or Landlord's Name (Primary Residence)</b>	<b>Monthly Payment/Rent</b>	<b>Current Balance</b>
Name <input style="width:90%;" type="text"/>	\$ <input style="width:80%;" type="text"/>	\$ <input style="width:80%;" type="text"/>
<b>2nd Mortgage Holder Name (if applicable)</b>	<b>Monthly Payment/Rent</b>	<b>Current Balance</b>
Name <input style="width:90%;" type="text"/>	\$ <input style="width:80%;" type="text"/>	\$ <input style="width:80%;" type="text"/>

Note: Please complete the section below if the amounts are NOT included in your mortgage payment:

<b>Real Estate Taxes</b>	<b>Homeowner's Insurance</b>	<b>Condo/Townhome/HOA/Co-Op Fees</b>
\$ <input style="width:80%;" type="text"/> per year	\$ <input style="width:80%;" type="text"/> per year	\$ <input style="width:80%;" type="text"/> per year

**Other Debt including auto payments, credit cards, installment loans, student loans, etc.** **Note: Only include debts that will last longer than 10 months.**

Name of Creditor	Monthly Payment	Current Balance
<input style="width:95%;" type="text"/>	\$ <input style="width:80%;" type="text"/>	\$ <input style="width:80%;" type="text"/>
<input style="width:95%;" type="text"/>	\$ <input style="width:80%;" type="text"/>	\$ <input style="width:80%;" type="text"/>
<input style="width:95%;" type="text"/>	\$ <input style="width:80%;" type="text"/>	\$ <input style="width:80%;" type="text"/>
<input style="width:95%;" type="text"/>	\$ <input style="width:80%;" type="text"/>	\$ <input style="width:80%;" type="text"/>
<input style="width:95%;" type="text"/>	\$ <input style="width:80%;" type="text"/>	\$ <input style="width:80%;" type="text"/>
<input style="width:95%;" type="text"/>	\$ <input style="width:80%;" type="text"/>	\$ <input style="width:80%;" type="text"/>

**INSURANCE INFORMATION**

Please check all insurance in force for the damaged property: (describe)

Homeowner's  
  Flood  
  Automobile  
  Renter's  
  No Insurance  
  Other:

Policy Type	Insurance Company Name	Policy Number	Phone Number	Amount Received
<input style="width:90%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:90%;" type="text"/>	<input style="width:90%;" type="text"/>	\$ <input style="width:80%;" type="text"/>
<input style="width:90%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:90%;" type="text"/>	<input style="width:90%;" type="text"/>	\$ <input style="width:80%;" type="text"/>
<input style="width:90%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:90%;" type="text"/>	<input style="width:90%;" type="text"/>	\$ <input style="width:80%;" type="text"/>

**OTHER DISASTER ASSISTANCE**

Other than FEMA, have you received any grant award (i.e. city grants, county grants, state grants, etc.):  Yes  No

**ASSETS**

**Pre-disaster values:**

Cash, Bank Accounts and Marketable Securities (e.g. Stock & Bonds, CDs, etc.) (Not including retirement accounts) .....	\$ <input style="width:80%;" type="text"/>
Retirement Accounts (e.g. IRAs, Keogh, TSP or other similar accounts) .....	\$ <input style="width:80%;" type="text"/>
Personal Property (furniture, appliances, vehicles, RVs, etc.) .....	\$ <input style="width:80%;" type="text"/>
Primary Residence .....	\$ <input style="width:80%;" type="text"/>
All Other Real Estate (describe) <input style="width:500px;" type="text"/>	\$ <input style="width:80%;" type="text"/>

**DISCLOSURES**

The responses below apply to the Applicant and Joint Applicant, if any. Please explain any "Yes" responses on the last page.

- Are you delinquent on any Federal taxes, Federal loans, Federal grants, or 60 days past due on any child support obligation?  Yes  No
- Are you currently a defendant in any lawsuits or have pending judgements against you?  Yes  No
- Are you currently suspended or debarred from contracting with Federal government or receiving Federal grants or loans?  Yes  No
- Do you have federal loans, federally guaranteed loans, or previous SBA loans?  Yes  No
- Are you engaged in the production or distribution of any product that has been determined to be obscene by a court of competent jurisdiction?  Yes  No
- In the past year, have you been convicted of a felony committed in connection with a riot or civil disorder?  Yes  No
- Are you presently, a) subject to an indictment, criminal information, arraignment, or other means by which formal criminal charges are brought in any jurisdiction; b) have you been arrested in the past six months for any criminal offense; c) for any criminal offense - other than a minor vehicle violation - have you ever: 1) been convicted, 2) plead guilty, 3) plead nolo contendere, 4) been placed on pretrial diversion, or 5) been placed on any form of parole or probation (including probation before judgment)?  Yes  No

**REPRESENTATIVE INFORMATION**

If you have paid a representative (packager, attorney, accountant, etc.) to assist you in completing the application, please complete the section below:

Name and Address of Representative:

Fee charged or agreed upon

\$

**CONSENT**

I authorize my insurance company, bank, financial institution, or other creditors to release to SBA all records and financial information necessary to process this application.

SBA has my permission, as required by the Privacy Act, to release any information collected in connection with this application to Federal, state, local, tribal or nonprofit organizations (e.g. Red Cross, Salvation Army, Mennonite Disaster Services, SBA Resource Partners) for the purpose of assisting me with my SBA application, evaluating my eligibility for additional disaster assistance, or notifying me of the availability of such assistance.

If my loan is approved, I may be eligible for additional funds to safeguard my property from damages similar to those caused by this disaster. Although it is not necessary for me to provide with my application, a description and cost estimate will be required prior to SBA approval of the mitigation measure.

I have received and read a copy of the "STATEMENTS REQUIRED BY LAWS AND EXECUTIVE ORDERS" which was attached to this application.

**CERTIFICATION AS TO TRUTHFUL INFORMATION:** By signing this application, you certify that all information in your application and submitted with your application is true and correct to the best of your knowledge, and that you will submit truthful information in the future.

**WARNING:** Whoever wrongfully misapplies the proceeds of an SBA disaster loan shall be civilly liable to the Administrator in an amount equal to one-and-one half times the original principal amount of the loan under 15 U.S.C. 636(b). In addition, any false statement or misrepresentation to SBA may result in criminal, civil or administrative sanctions including, but not limited to: 1) fines and imprisonment, or both, under 15 U.S.C. 645, 18 U.S.C. 1001, 18 U.S.C. 1014, 18 U.S.C. 1040, 18 U.S.C. 3571, and any other applicable laws; 2) treble damages and civil penalties under the False Claims Act, 31 U.S.C. 3729; 3) double damages and civil penalties under the Program Fraud Civil Remedies Act, 31 U.S.C. 3802; and 4) suspension and/or debarment from all Federal procurement and non-procurement transactions. Statutory fines may increase if amended by the Federal Civil Penalties Inflation Adjustment Act Improvements Act of 2015.

Signature of Applicant

Date

Signature of Joint Applicant

Date

**ADDITIONAL COMMENTS**



# U.S. Small Business Administration

## DISASTER HOME LOAN APPLICATION

If you have questions about this application or problems providing the required information, please contact our Customer Service Center at 1-800-659-2955 or [disastercustomerservice@sba.gov](mailto:disastercustomerservice@sba.gov). If more space is needed for any section of this application, please attach additional sheets.

SBA will contact you by phone or Email to discuss your loan request.

### **FILING REQUIREMENTS**

#### **REQUIRED FOR ALL LOAN APPLICATIONS:**

- Complete and sign this application form (SBA Form 5C)
- Complete and sign the Tax Information Authorization (IRS Form 4506T) enclosed with this application. This income information, obtained from the IRS, will help us determine your repayment ability. U.S. Territories that have their own taxing authority outside of the IRS may require additional form(s) in order to obtain copies of their transcripts. The exact form(s) required will be determined at the onset of the declared disaster. All other filing requirements remain the same.

**WHILE NOT NECESSARY TO ACCEPT YOUR APPLICATION, YOU MAY BE REQUIRED TO SUPPLY THE FOLLOWING INFORMATION TO PROCESS THE APPLICATION. IF REQUESTED, PLEASE PROVIDE WITHIN 7 DAYS OF THE INFORMATION REQUEST:**

- If any applicant has changed employment within the past two years, provide a copy of a current (within 1 month of the application date) pay stub for all applicants
- If we need additional income information, you may be asked to provide copies of your Federal income tax returns, including all schedules

**IF SBA APPROVES YOUR LOAN, WE MAY REQUIRE THE FOLLOWING ITEMS BEFORE LOAN CLOSING. WE WILL ADVISE YOU, IN WRITING, OF THE DOCUMENTS WE NEED.**

- If you own your residence, a COMPLETE legible copy of the deed, including the legal description of the property
- If the damaged property is your primary residence, proof of residency at the damaged address
- If you had damage to a manufactured home, a copy of the title. If you own the lot where the home is located, a COMPLETE legible copy of the deed, including the legal description of the property
- If you have damage to an automobile or other vehicle, proof of ownership (a copy of the registration, title, bill of sale, etc.)

**NOTE: PLEASE READ, DETACH AND KEEP FOR YOUR RECORDS  
STATEMENTS REQUIRED BY LAWS AND EXECUTIVE ORDERS**

To comply with legislation passed by the Congress and Executive Orders issued by the President, Federal executive agencies, including the Small Business Administration (SBA), must notify you of certain information. You can find the regulations and policies implementing these laws and Executive Orders in Title 13, Code of Federal Regulations (CFR), Chapter 1, or our Standard Operating Procedures (SOPs). In order to provide the required notices, the following is a brief summary of the various laws and Executive Orders that affect SBA's Disaster Loan Programs. A glossary of terms can be found at [Disasterloan.SBA.GOV](http://Disasterloan.SBA.GOV)

**FREEDOM OF INFORMATION ACT (5 U.S.C. 552)**

This law provides, with some exceptions, that we must make records or portions of records contained in our files available to persons requesting them. This generally includes aggregate statistical information on our disaster loan programs and other information such as names of borrowers (and their officers, directors, stockholders or partners), loan amounts at maturity, the collateral pledged, and the general purpose of loans. We do not routinely make available to third parties your proprietary data without first notifying you, as required by Executive Order #12600, or information that would cause competitive harm or constitute a clearly unwarranted invasion of personal privacy.

Freedom of Information Act (FOIA) requests must describe the specific records you want. For information about the FOIA, contact the Chief, FOI/PA Office, 409 3rd Street, SW, Suite 5900, Washington, DC 20416, or by e-mail at [foia@sba.gov](mailto:foia@sba.gov).

**PRIVACY ACT (5 U.S.C. § 552a)**

Anyone can request to see or get copies of any personal information that we have in your file. Any personal information in your file that is retrieved by individual identifiers, such as name or social security number is protected by the Privacy Act, which means requests for information about you may be denied unless we have your written permission to release the information to the requestor or unless the information is subject to disclosure under the Freedom of Information Act. The Agreements and Certifications section of this form contains written permission for us to disclose the information resulting from this collection to state, local or private disaster relief services.

The Privacy Act authorizes SBA to make certain "routine uses" of information protected by that Act. One such routine use for SBA's loan system of records is that when this information indicates a violation or potential violation of law, whether civil, criminal, or administrative in nature, SBA may refer it to the appropriate agency, whether Federal, State, local or foreign, charged with responsibility for or otherwise involved in investigation, prosecution, enforcement or prevention of such violations. Another routine use of personal information is to assist in obtaining credit bureau reports, on the Disaster Loan Applicants and guarantors for purposes of originating, servicing, and liquidating Disaster loans. See, 69 F.R. 58598, 58617 (and as amended from time to time) for additional background and other routine uses.

Under the provisions of the Privacy Act, you are not required to provide social security numbers. (But see the information under Debt Collection Act below) We use social security numbers to distinguish between people with a similar or the same name for credit decisions and for debt collection purposes. Failure to provide this number may not affect any right, benefit or privilege to which you are entitled by law, but having the number makes it easier for us to more accurately identify to whom adverse credit information applies and to keep accurate loan records.

Note: Any person concerned with the collection, use and disclosure of information, under the Privacy Act may contact the Chief, FOI/PA Office, 409 3rd Street, SW, Suite 5900, Washington, DC 20416 or by e-mail at [foia@sba.gov](mailto:foia@sba.gov) for information about the Agency's procedures relating to the Privacy Act and the Freedom of Information Act.

## DEBT COLLECTION ACT OF 1982; DEFICIT REDUCTION ACT OF 1984; DEBT COLLECTION IMPROVEMENT ACT OF 1996 & other titles (31 U.S.C. 3701 et seq.)

These laws require us to aggressively collect any delinquent loan payments and to require you to give your taxpayer identification number to us when you apply for a loan. If you receive a loan and do not make payments when they become due, we may take one or more of the following actions (this list may not be exhaustive):

- \*Report the delinquency to credit reporting bureaus.
- \*Offset your income tax refunds or other amounts due to you from the Federal Government.
- \*Refer the account to a private collection agency or other agency operating a debt collection center.
- \*Suspend or debar you from doing business with the Federal Government.
- \*Refer your loan to the Department of Justice.
- \*Foreclose on collateral or take other actions permitted in the loan instruments.
- \*Garnish wages.
- \*Sell the debt.
- \*Litigate or foreclose.

## RIGHT TO FINANCIAL PRIVACY ACT OF 1978 (12 U.S.C. § 3401 et seq.)

This notifies you, as required by the Right to Financial Privacy Act of 1978 (Act), of our right to access financial records held by financial institutions that were or are doing business with you or your business. This includes financial institutions participating in loans or loan guaranties.

The law provides that we may access your financial records when considering or administering Government loan or loan guaranty assistance to you. We must give a financial institution a certificate of our compliance with the Act when we first request access to your financial records. No other certification is required for later access. Our access rights continue for the term of any approved loan or loan guaranty. We do not have to give you any additional notice of our access rights during the term of the loan or loan guaranty.

We may transfer to another Government authority any financial records included in a loan application or about an approved loan or loan guaranty as necessary to process, service, liquidate, or foreclose a loan or loan guaranty. We will not permit any transfer of your financial records to another Government authority except as required or permitted by law.

## CONSUMER CREDIT PROTECTION ACT (15 U.S.C. 1601 et seq.)

This legislation gives an applicant who is refused credit because of adverse information about the applicant's credit, reputation, character or mode of living an opportunity to refute or challenge the accuracy of such reports. Therefore, if we decline your loan in whole or in part because of adverse information in a credit report, you will be given the name and address of the reporting agency so you can seek to have that agency correct its report, if inaccurate. If we decline your loan in whole or in part because of adverse information received from a source other than a credit reporting agency, you will be given information but not the source of the report.

Within 3 days after the consummation of the transaction, any recipient of an SBA loan which is secured in whole or in part by a lien on the recipient's residence or household contents may rescind such a loan in accordance with "Regulation Z" of the Federal Reserve Board.

**PLEASE NOTE:** The estimated burden for completing this form is 1.25 hours. Your responses to the requested information are required in order to obtain a benefit under our Disaster Home Loan Program. However, you are not required to respond to any collection of information unless it displays a currently valid OMB approval number. If you have questions or comments concerning any aspects of this information collection, please contact the U.S. Small Business Administration Information Branch, 409 3rd Street, SW, Washington, DC 20416 and Desk Officer for SBA, Office of Management and Budget, Office of Information and Regulatory Affairs, 725 17th Street, NW, Washington, DC 20503. (3245-0018) PLEASE DO NOT SEND FORMS TO OMB.



**Section 2. Notes Payable to Banks and Others.** (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

**Section 3. Stocks and Bonds.** (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value

**Section 4. Real Estate Owned.** (List each parcel separately. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed.)

	Property A	Property B	Property C
Type of Real Estate (e.g. Primary Residence, Other Residence, Rental Property, Land, etc.)			
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Month/Year			
Status of Mortgage			

**Section 5. Other Personal Property and Other Assets.** (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and if delinquent, describe delinquency)

**Section 6. Unpaid Taxes.** (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

**Section 7. Other Liabilities.** (Describe in detail.)

**Section 8. Life Insurance Held.** (Give face amount and cash surrender value of policies - name of insurance company and beneficiaries)

I authorize SBA to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness.  
**CERTIFICATION:** (to be completed by each person submitting the information requested on this form)

By signing this form, I certify under penalty of criminal prosecution that all information on this form and any additional supporting information submitted with this form is true and complete to the best of my knowledge. I understand that SBA will rely on this information when making decisions regarding an application for a loan from SBA.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

Social Security No. \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

Social Security No. \_\_\_\_\_

**NOTICE TO LOAN APPLICANTS: CRIMINAL PENALTIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:**

Whoever wrongfully misapplies the proceeds of an SBA disaster loan shall be civilly liable to the Administrator in an amount equal to one-and-one half times the original principal amount of the loan under 15 U.S.C. 636(b). In addition, any false statement or misrepresentation to SBA may result in criminal, civil or administrative sanctions including, but not limited to: 1) fines and imprisonment, or both, under 15 U.S.C. 645, 18 U.S.C. 1001, 18 U.S.C. 1014, 18 U.S.C. 1040, 18 U.S.C. 3571, and any other applicable laws; 2) treble damages and civil penalties under the False Claims Act, 31 U.S.C. 3729; 3) double damages and civil penalties under the Program Fraud Civil Remedies Act, 31 U.S.C. 3802; and 4) suspension and/or debarment from all Federal procurement and non-procurement transactions. Statutory fines may increase if amended by the Federal Civil Penalties Inflation Adjustment Act Improvements Act of 2015.

**PLEASE NOTE:** The estimated average burden hours for the completion of this form is 1.5 hours per response. You are not required to respond to this collection of information unless it displays a currently valid OMB Control Number. If you have questions or comments concerning the burden estimate or any other aspect of this information collection, please contact: Director, Records Management Division, Small Business Administration, 409 Third Street, SW, Washington, D.C. 20416, and SBA Desk Officer, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, D.C. 20503.

**PLEASE DO NOT SEND COMPLETED FORMS TO OMB.**

## PLEASE READ, DETACH, AND RETAIN FOR YOUR RECORDS

### STATEMENTS REQUIRED BY LAW AND EXECUTIVE ORDER

SBA is required to withhold or limit financial assistance, to impose special conditions on approved loans, to provide special notices to applicants or borrowers and to require special reports and data from borrowers in order to comply with legislation passed by the Congress and Executive Orders issued by the President and by the provisions of various inter-agency agreements. SBA has issued regulations and procedures that implement these laws and executive orders. These are contained in Parts 112, 113, and 117 of Title 13 of the Code of Federal Regulations and in Standard Operating Procedures.

#### **Privacy Act (5 U.S.C. 552a)**

Any person can request to see or get copies of any personal information that SBA has in his or her file when that file is retrieved by individual identifiers such as name or social security numbers. Requests for information about another party may be denied unless SBA has the written permission of the individual to release the information to the requestor or unless the information is subject to disclosure under the Freedom of Information Act.

Under the provisions of the Privacy Act, you are not required to provide your social security number. Failure to provide your social security number may not affect any right, benefit or privilege to which you are entitled. Disclosures of name and other personal identifiers are, however, required for a benefit, as SBA requires an individual seeking assistance from SBA to provide it with sufficient information for it to make a character determination. In determining whether an individual is of good character, SBA considers the person's integrity, candor, and disposition toward criminal actions. Additionally, SBA is specifically authorized to verify your criminal history, or lack thereof, pursuant to section 7(a)(1)(B), 15 USC Section 636(a)(1)(B) of the Small Business Act (the Act). Further, for all forms of assistance, SBA is authorized to make all investigations necessary to ensure that a person has not engaged in acts that violate or will violate the Act or the Small Business Investment Act, 15 USC Sections 634(b)(11) and 687(b)(a), respectively. For these purposes, you are asked to voluntarily provide your social security number to assist SBA in making a character determination and to distinguish you from other individuals with the same or similar name or other personal identifier.

The Privacy Act authorizes SBA to make certain "routine uses" of information protected by that Act. One such routine use is the disclosure of information maintained in SBA's investigative files system of records when this information indicates a violation or potential violation of law, whether civil, criminal, or administrative in nature. Specifically, SBA may refer the information to the appropriate agency, whether Federal, State, local or foreign, charged with responsibility for, or otherwise involved in investigation, prosecution, enforcement or prevention of such violations. Another routine use is disclosure to other Federal agencies conducting background checks; only to the extent the information is relevant to the requesting agencies' function. See, 74 F.R. 14890 (2009), and as amended from time to time for additional background and other routine uses.

**Right to Financial Privacy Act of 1978 (12 U.S.C. 3401)** -- This is notice to you as required by the Right to Financial Privacy Act of 1978, of SBA's access rights to financial records held by financial institutions that are or have been doing business with you or your business, including any financial institutions participating in a loan or loan guaranty. The law provides that SBA shall have a right of access to your financial records in connection with its consideration or administration of assistance to you in the form of a Government guaranteed loan. SBA is required to provide a certificate of its compliance with the Act to a financial institution in connection with its first request for access to your financial records, after which no further certification is required for subsequent accesses. The law also provides that SBA's access rights continue for the term of any approved loan guaranty agreement. No further notice to you of SBA's access rights is required during the term of any such agreement. The law also authorizes SBA to transfer to another Government authority any financial records included in an application for a loan, or concerning an approved loan or loan guaranty, as necessary to process, service or foreclose on a loan guaranty or collect on a defaulted loan guaranty.

#### **Freedom of Information Act (5 U.S.C. 552)**

This law provides, with some exceptions, that SBA must supply information reflected in agency files and records to a person requesting it. Information about approved loans that will be automatically released includes, among other things, statistics on our loan programs (individual borrowers are not identified in the statistics) and other information such as the names of the borrowers (and their officers, directors, stockholders or partners), the collateral pledged to secure the loan, the amount of the loan, its purpose in general terms and the maturity. Proprietary data on a borrower would not routinely be made available to third parties. All requests under this Act are to be addressed to the nearest SBA office and be identified as a Freedom of Information request.

#### **Executive Order 12549, Debarment and Suspension (2 CFR 2700)**

1. The prospective borrower certifies, by submission of its loan application, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
2. Where the borrower is unable to certify to any of the statements in this certification, such shall attach an explanation to the application.







## U. S. Small Business Administration

### ADDITIONAL FILING REQUIREMENTS ECONOMIC INJURY DISASTER LOAN (EIDL), and MILITARY RESERVIST ECONOMIC INJURY DISASTER LOAN (MREIDL)

- \* An EIDL is limited to providing working capital that is unavailable from other sources, as determined by the U.S. Small Business Administration (SBA), for an eligible business to continue operations until the effects of the declared disaster have passed.
- \* A MREIDL is limited to providing working capital that is unavailable from other sources, as determined by the SBA, for an eligible business to continue operations until the effects of a call-up to active duty (as a result of a military conflict) of an essential employee have passed.
- \* The APPLICANT must be a small business or small agricultural cooperative, as defined in SBA's published size standards, or an eligible private non-profit organization of any size.
- \* The APPLICANT must establish that the claimed economic injury is substantial and is a direct result of the declared disaster. For MREIDL, the applicant must establish the claimed economic injury is substantial and is a direct result of the call-up of an essential employee. Substantial economic injury generally means a decrease in income from operations or working capital with the result that the business is unable to meet its obligations and pay ordinary and necessary operating expenses in the normal course of business.

**PROVIDE THE FOLLOWING INFORMATION IN ADDITION TO THE REQUIREMENTS ON THE  
 "DISASTER BUSINESS LOAN APPLICATION," SBA FORM 5  
Monthly Sales Figures**

Provide monthly sales figures (you may estimate if actual figures are not available) beginning 3 years prior to the disaster and continuing through the most recent month available.

**PLEASE NOTE: Identify any estimates with a small letter "e" after the number.**

Month	Fiscal year	Fiscal year	Fiscal year	Current year/ to date
*Totals				

\*Please note: the total figures for each year should reconcile to the sales figures on your tax returns for the corresponding fiscal year.

PLEASE SUBMIT ANY ADDITIONAL NARRATIVE OR FINANCIAL INFORMATION  
 YOU FEEL WILL HELP ESTABLISH YOUR ECONOMIC LOSS

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CONTINUED ON REVERSE

It can be helpful to provide a financial forecast to illustrate what the income and expenses for the business will be during the period affected by the disaster until normal operations resume. This is not required.

This optional format is provided for your convenience.

Period covered by this forecast. From	To
Net sales (receipts)	
Less cost of goods sold	
Gross profit	
Less expenses	
Officers salaries	
Employee wages	
Advertising	
Rent	
Utilities	
Interest	
Taxes	
Insurance	
Other expenses	
Total expenses	
Net profit <Loss> before income taxes	

**PLEASE SUBMIT ANY ADDITIONAL NARRATIVE OR FINANCIAL INFORMATION  
YOU FEEL WILL HELP ESTABLISH YOUR ECONOMIC LOSS**

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Please note: The estimated burden for completing this form is 1 hour. You are not required to respond to any collection of information unless it displays a current valid OMB approval number. Comments on the burden should be sent to U.S. Small Business Administration; Chief, AIB; 409 3rd St., SW, Washington, DC 20416 and Desk Officer for the Small Business Administration; Office of Management and Budget, New Executive Office Building, Room 10202, Washington, DC 20503. OMB Approval (3245-0017). Please do not send forms to OMB.