



**Applicant understands that this completed and signed application is only an application and does not constitute a commitment on behalf of the City of Danville, Danville Industrial Development Authority to extend credit, grant and or loan funds.**

**Applications are due by June 19, 2020**

Maximum Loan Amount: \$20,000

427 Patton Street, PO Box 3300, Danville, Virginia 24541

|                  |   |
|------------------|---|
| <b>Checklist</b> | <p><b>Please include these attachments with your application:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> <b>Financial Statement:</b> Profit &amp; Loss, Balance Sheet Statements for previous year, and most recent quarter or month-end</li> <li><input type="checkbox"/> Previous year's business tax returns (2018 or 2019)</li> <li><input type="checkbox"/> Previous year personal tax returns (2018 or 2019) for any guarantor (owner with at least 20% equity in business)</li> <li><input type="checkbox"/> Copy of lease agreement <b>OR</b> mortgage statement for business location</li> <li><input type="checkbox"/> Copy of your City of Danville Business License</li> <li><input type="checkbox"/> Copy of the front of your driver's license <b>OR</b> government issued ID</li> <li><input type="checkbox"/> Copy of your completed and signed W-9</li> <li><input type="checkbox"/> Copy of your SBA Economic Injury Disaster Loan Program Confirmation</li> </ul> |
|------------------|---|

|                              |                              |                            |
|------------------------------|------------------------------|----------------------------|
| <b>PROJECT SUMMARY</b>       | <input type="text"/>         | <input type="text"/>       |
|                              | <b>Business Name</b>         | <b>Date of Application</b> |
|                              | <input type="text"/>         |                            |
|                              | <b>Loan Amount Requested</b> |                            |
|                              | <input type="text"/>         | <input type="text"/>       |
|                              | <b>Business Address</b>      | <b>City</b>                |
| <input type="text"/>         | <input type="text"/>         |                            |
| <input type="text"/>         | <input type="text"/>         |                            |
| <input type="text"/>         | <input type="text"/>         |                            |
| <b>Contact Name</b>          | <b>Contact Phone</b>         |                            |
| <input type="text"/>         | <input type="text"/>         |                            |
| <input type="text"/>         | <input type="text"/>         |                            |
| <b>Contact Email Address</b> |                              |                            |
| <input type="text"/>         |                              |                            |

| <b>APPLICATION SUMMARY</b>   | <input type="text"/>   | <input type="text"/>                |             |             |                  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|-------------------------------------|-------------|-------------|------------------|--|--|--|--|--|--|--|--|--|--|--|
|  | <b>Business Type</b> (i.e. Restaurant, Retail, Service)  | <b>Tax ID Number</b>                |             |             |                  |  |  |  |  |  |  |  |  |  |  |  |
|  | <b>Entity Type:</b>  |                                     |             |             |                  |  |  |  |  |  |  |  |  |  |  |  |
|  | <input type="checkbox"/> LLC   | <input type="checkbox"/> Sole Owner |             |             |                  |  |  |  |  |  |  |  |  |  |  |  |
|  | <input type="checkbox"/> Partnership   |                                     |             |             |                  |  |  |  |  |  |  |  |  |  |  |  |
|  | <input type="checkbox"/> C Corp  | <input type="checkbox"/> S Corp     |             |             |                  |  |  |  |  |  |  |  |  |  |  |  |
|  | <input type="checkbox"/> Other: <input type="text"/>   |                                     |             |             |                  |  |  |  |  |  |  |  |  |  |  |  |
|  | <b>Incorporation:</b> <input type="text"/>   |                                     |             |             |                  |  |  |  |  |  |  |  |  |  |  |  |
|  | <b>Ownership: Provide the following information for officers and shareholders owning 20% or more of the entity.</b>  |                                     |             |             |                  |  |  |  |  |  |  |  |  |  |  |  |
|  | <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 45%;">Name, Title</th> <th style="width: 20%;">% Ownership</th> <th style="width: 35%;">Role In Business</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table> |                                     | Name, Title | % Ownership | Role In Business |  |  |  |  |  |  |  |  |  |  |  |
| Name, Title  | % Ownership  | Role In Business                    |             |             |                  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |                                     |             |             |                  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |                                     |             |             |                  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |                                     |             |             |                  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |                                     |             |             |                  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Are there any judgements or liens outstanding against the applicant?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No |  |                                     |             |             |                  |  |  |  |  |  |  |  |  |  |  |  |

GUARANTOR INFORMATION

**Guarantor (owners with at least 20% equity share business)**

|                       |                      |                                |                      |
|-----------------------|----------------------|--------------------------------|----------------------|
| <input type="text"/>  |                      | <input type="text"/>           |                      |
| <b>Full Name</b>      |                      | <b>Social Security or ITIN</b> |                      |
| <input type="text"/>  | <input type="text"/> | <input type="text"/>           | <input type="text"/> |
| <b>Street Address</b> | <b>City</b>          | <b>State</b>                   | <b>Zip</b>           |
| <input type="text"/>  | <input type="text"/> | <input type="text"/>           |                      |
| <b>Date of Birth</b>  | <b>Email Address</b> | <b>Phone Number</b>            |                      |

**Guarantor (owners with at least 20% equity share business)**

|                       |                      |                                |                      |
|-----------------------|----------------------|--------------------------------|----------------------|
| <input type="text"/>  |                      | <input type="text"/>           |                      |
| <b>Full Name</b>      |                      | <b>Social Security or ITIN</b> |                      |
| <input type="text"/>  | <input type="text"/> | <input type="text"/>           | <input type="text"/> |
| <b>Street Address</b> | <b>City</b>          | <b>State</b>                   | <b>Zip</b>           |
| <input type="text"/>  | <input type="text"/> | <input type="text"/>           |                      |
| <b>Date of Birth</b>  | <b>Email Address</b> | <b>Phone Number</b>            |                      |

FINANCIAL STRUCTURE

**Current Business Debt**

Does your business have current obligations? Please describe below from largest to smallest.

|           |                      |
|-----------|----------------------|
| Lender 1: | <input type="text"/> |
| Lender 2: | <input type="text"/> |
| Lender 3: | <input type="text"/> |
| Lender 4: | <input type="text"/> |

FINANCIAL STRUCTURE

**Recent Financials**

Please fill out the following for the previous fiscal year:

|                |                      |
|----------------|----------------------|
| Revenues:      | <input type="text"/> |
| Expenses:      | <input type="text"/> |
| Debt Payments: | <input type="text"/> |
| Net Profit:    | <input type="text"/> |

**JOB RETENTION**

Number of current full-time employees

Number of full-time employees to be retained because of the loan?

Number of current part-time employees

Number of part-time employees to be retained because of the loan?

**GRANT NARRATIVE**

**Please provide a brief written description answering the following questions:**

- Describe business operations and financial well-being prior to COVID-19
- Describe how COVID-19 has affected your business, including impact on your workforce, revenue and profits, or mandated shutdowns for social distancing
- Describe use of funds for the loan (i.e. Payroll, Rent, Etc.)
- Describe how you plan to pay back this loan

Are you current on utility payments?  Yes  No

Are you current on all taxes?  Yes  No

Do you have any outstanding code violations with the City of Danville?  Yes  No

**Application Certification**

The undersigned certifies, to the best of his or her knowledge and belief that:

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant or Federal loan, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant or loan.

2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant or loan, the undersigned shall complete and submit Standard Form - LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into.

Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby submit this application and I fully understand that any false statement on this application may subject the applicant to criminal prosecution. I also understand that additional information may be required to complete the application.

By signing this application I am authorizing \_\_\_\_\_ (name of bank or credit reference), as well as the City of Danville Division of Central Collections and the City of Danville Finance Department to provide the Danville Office of Economic Development and Danville Industrial Development Authority, on a confidential basis, with any information it deems necessary to verify the information on this application as well as information needed to make a determination of grant eligibility.

**Applicant(s) and Guarantor(s) Signature**

|              |       |              |       |
|--------------|-------|--------------|-------|
| <hr/>        | <hr/> | <hr/>        | <hr/> |
| Contact Name | Date  | Contact Name | Date  |
| <hr/>        | <hr/> | <hr/>        | <hr/> |
| Contact Name | Date  | Contact Name | Date  |

# Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

|  |   |   |
|--|---|---|
| Print or type.<br>See Specific Instructions on page 3. | 1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.   |   |
|  | 2 Business name/disregarded entity name, if different from above  |   |
|  | 3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.   | 4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): |
|  | <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate   | Exempt payee code (if any) _____  |
|  | <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____<br><b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. | Exemption from FATCA reporting code (if any) _____  |
|  | <input type="checkbox"/> Other (see instructions) ▶ _____   | (Applies to accounts maintained outside the U.S.)   |
|  | 5 Address (number, street, and apt. or suite no.) See instructions.   | Requester's name and address (optional)   |
| 6 City, state, and ZIP code                            |   |   |
| 7 List account number(s) here (optional)               |   |   |

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

|                                       |  |  |  |   |  |  |   |  |  |  |  |
|---------------------------------------|--|--|--|---|--|--|---|--|--|--|--|
| <b>Social security number</b>         |  |  |  |   |  |  |   |  |  |  |  |
|                                       |  |  |  |   |  |  |   |  |  |  |  |
|                                       |  |  |  | - |  |  | - |  |  |  |  |
| <b>or</b>                             |  |  |  |   |  |  |   |  |  |  |  |
| <b>Employer identification number</b> |  |  |  |   |  |  |   |  |  |  |  |
|                                       |  |  |  |   |  |  |   |  |  |  |  |
|                                       |  |  |  | - |  |  |   |  |  |  |  |

## Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

|                  |                            |        |
|------------------|----------------------------|--------|
| <b>Sign Here</b> | Signature of U.S. person ▶ | Date ▶ |
|------------------|----------------------------|--------|

## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

## Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*