

Economic and Community Development Department
1st Floor, Auburn Hall, 60 Court Street, Auburn, ME 04210
Telephone 333-6601 Ext. 1218

CITY OF AUBURN EMERGENCY BUSINESS LOAN PROGRAM

- Maximum loan amount: \$2,500
- Loans approved by City of Auburn Loan Committee
- Eligible use of funds
 - Payroll
 - Rent/mortgage
- 0% interest, to be paid back June 1, 2021

The City Council of Auburn Maine has created a short-term loan program for Auburn Businesses affected by the COVID-19 pandemic. \$50,000 dollars total has been allocated, applications will be reviewed and approved on a first come first served basis until the funds have been exhausted. Your complete application helps to assure taxpayers that you have a legitimate urgent need and will use the funds appropriately and responsibly.

1. APPLICANT INFORMATION Please print legibly.

Applicant: _____ Email Address: _____

Mailing Address _____

Phone: Home _____ Work _____ Cell _____

2. BUSINESS ORGANIZATION

Business Name: _____

Business Address: _____

Business Telephone # _____ Web Address _____

Email _____ Date Established _____

Type of Business: Sole Proprietor, Corporation, Partnership, S-Corporation, LLC _____

Federal Tax ID # _____ Dun & Bradstreet # _____

of years operating in Auburn: _____

Name of Principals of Business _____

Legal Representative: _____ Tel. # _____

Job Title	Full Time (FT) or Part Time (PT)	# of Positions

Number of Owners Employed _____
 Number of Employees _____
 Total _____

Primary Bank Name: _____

Tel. # _____ Contact Person _____

Cash on hand: _____

ATTACH A MONTHLY BUDGET FOR THE BUSINESS APPLYING FOR ASSISTANCE

3. URGENT NEED

Briefly describe the urgent need: _____

Amount requested (\$2,500 max): _____

How will the City's funds be used?: _____

Briefly describe the business's ability to pay back City of Auburn funds by June 1, 2021: _____

4. CONSUMER CREDIT AUTHORIZATION

The following information is needed to complete a personal credit investigation. This form is to be completed by each applicant (individual, corporation or partnership), co-applicant, and a separate form for each shareholder holding a 20% or more interest in the company.

Applicant: _____ Applicant's Social Security # _____

Co-Applicant: _____ Co-Applicant's Social Security # _____

Address: _____

Have you been denied credit in the past year? Y/N What were the reasons for denial? _____

I/We authorize the City of Auburn to contact credit reporting agencies and creditors with regard to the status of any past or outstanding debt, or such other credit information that such agencies normally hold available for credit worthiness evaluation at present or at any time in the future for the purpose of making or monitoring the loan.

Client information may be shared with only those individuals, entities, or committee members designated or acknowledged by the City as an interested party to the client's application process, excluding information declared as public records, pursuant to M.R.S.A. Title 1 §401, Public Records and Proceedings. Otherwise, the information furnished will be held in strict confidence.

I/We hereby certify the information in this application is accurate and complete to the best of my/our knowledge and belief.

Date

Applicant's Signature

Date

Co-Applicant's Signature