

#### Superior California Economic Development Fire Relief Loan Fund for Small Businesses

The Fire Relief Loan Fund was created to boost recovery for small businesses suffering physical or economic losses from the Carr and Klamathon Fires by providing short-term loan funds for continued business operations.

#### **Loan Guidelines:**

- Loans up to \$5,000 will be based on demonstrated need.
- Businesses must have ten (10) or fewer employees.
- There are no loan fees and no prepayment penalties.
- The loan term is 24 months and the interest rate is 6%. Loans will have a two-month grace period before payments begin.
- An automatic withdrawal (ACH) will be set up for the monthly loan payment.
- A business may receive only one loan from the fund.
- Loans made be used for: rent, payroll, inventory/supplies, utilities, equipment replacement and fire-related clean-up.
- Affected businesses that have insurance claims pending or have applied for a business loan from another source MAY also apply for this loan.

#### **Process:**

The loan application gathers information about the business, how it was affected by the Klamathon or Carr Fire, how much financial assistance is needed, and how loan funds will be used if the loan is approved.

- Applicants should submit a complete, signed Fire Relief Fund Application to SCED at 350
  Hartnell Avenue, Suite A, Redding, CA 96001, or via email to <a href="mailto:ryan@scedd.org">ryan@scedd.org</a>.
- Business owners will be contacted by a SCED staff member to schedule a site visit and to
  discuss business needs and how the funds will be used. Staff will also verify the financial
  status of the business prior to the associated fire loss.
- The loan request will be considered taking into account the financial health of the business before the fire and how the loan funds may have a significant effect on the businesses' ability to reopen or continue operations.
- If approved, SCED will try to make funds available to the business owner within 72 hours of receiving and approving the application. This timeline may be longer depending on the volume and completeness of loan applications.
- To help determine the effectiveness of this disaster loan program and as part of participating in the program, business owners will be asked periodically to provide updates on the financial condition of the business for one year from the date of the loan.

For more information: Ryan at (530) 225-2760, x206, or ryan@scedd.org



## **Superior California Economic Development Fire Relief Loan Fund Application**

Instructions: Please complete this application in its entirety. If you have questions while completing the application, please contact Ryan Richardson at (530) 225-2760, x206, or <a href="mailto:ryan@scedd.org">ryan@scedd.org</a>.

Name:	
Business Name:	
Cell Phone:	Business Phone:
Home Phone:	Email:
Business Physical Address:	
Business Mailing Address:	
Home Physical Address:	
Age of business: ☐ 0-1 Years ☐ 1-2 Years	□ Over 2 Years
Loan amount requested:	
Number of employees:	
Services or products you provide:	
How will you use loan funds?	
☐ Rent ☐ Payroll ☐ Inventory	☐ Utilities ☐ Equipment ☐ Fire related clean-up
☐ Other:	
How was your business impacted by the fire?	
<ul><li>☐ Physical damage</li><li>☐ Business interruption - How long? _</li><li>☐ Closure</li><li>☐ Loss of employees</li></ul>	Are you open/doing business again?
What is the estimated financial impact to your distribute, physical damage, interruption in su	business (lost sales, inability to manufacture and pply chain, other impacts) \$

To what degree, if any, is your business insured for any of your	
What is the status of any insurance settlement/payments?	
Have you received any other loans, donations, or grants because	
Applicant Signature:	Date:
Title:	-
Co-Applicant Signature:	_

#### Submit completed loan application to:

Superior California Economic Development 350 Hartnell Avenue, Suite A Redding, CA 96002 Or via email to <a href="mailto:ryan@scedd.org">ryan@scedd.org</a>

#### Please provide the following documents:

- 2017 Federal Tax Returns Personal
- 2017 Federal tax return Business
- If 2017 tax returns are on extension provide a copy of the extension and 2017 year end Profit and Loss and Balance Sheet
- Current business Profit & Loss (P&L) and Balance Sheet
- Credit Report Authorization form attached
- Personal financial statement form attached

#### **Credit Report Authorization**

I/We the undersigned hereby authorize Superior California Economic Development, Inc. (SCED) to make any credit inquiries which SCED may deem necessary, in connection with our application for a business loan. This authorization also applies to inquiries/checks that SCED may deem necessary in the future, in connection with the servicing of our loan.

Applicant	Spouse		
Signature	Signature		
Print Full Length Name	Print Full Length Name		
Street Address	Street Address		
City, State, Zip	City, State, Zip		
Social Security Number	Social Security Number		
Date of Birth	 Date of Birth		



OMB APPROVAL NO.: 3245-0188 EXPIRATION DATE: 01/31/2018

### PERSONAL FINANCIAL STATEMENT 7(a) / 504 LOANS AND SURETY BONDS

U.S. SMALL	. BUSINESS ADMINISTRATION
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As of	

SBA uses the information required by this Form 413 as one of a number of data sources in analyzing the repayment ability and creditworthiness of an application for an SBA guaranteed 7(a) or 504 loan or a guaranteed surety.

Complete this form for: (1) each proprietor; (2) general partner; (3) managing member of a limited liability company (LLC); (4) each owner of 20% or more of the equity of the Applicant (including the assets of the owner's spouse and any minor children); and (5) any person providing a guaranty on the loan

#### Return completed form to:

For 7(a) loans: the lender processing the application for SBA guaranty

For 504 loans: the Certified Development Company (CDC) processing the application for SBA guaranty For Surety Bonds: the Surety Company or Agent processing the application for surety bond guaranty

Name	Business Phone					
Home Address	Home Phone					
City, State, & Zip Code						
Business Name of Applicant						
ASSETS	(Omit Cents)	LIABILITIES (Omit Cents)				
Cash on Hand & in banks		Notes Payable to Banks and Others\$ (Describe in Section 2) Installment Account (Auto)\$ Mo. Payments \$				
Section 1. Source of Income.		Contingent Liabilities				
Salary	\$ \$	Legal Claims & Judgments\$  Provision for Federal Income Tax\$				

\*Alimony or child support payments should not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

ection 2. Notes Payab			1	ı		1		1		
Names and Addr Noteholder		of	Original Balance	Current Balance	Payment Amount	Frequ (month				
Section 3. Stocks and	l Bond	<b>S.</b> (Use a	ttachments if neo	essary. Each at	tachment must be	identified as pa	art of this state	ement and signed	d.)	
Number of Shares	Na	ame of S	Securities Cost			Market Value Quotation/Exchange		Date of Quotation/Exchange Total Va		
ection 4. Real Estate	Owned	<b>j.</b> (List ea	ach parcel separa	ately. Use attach	nment if necessary	. Each attachr	nent must be	identified as a pa	art of this statement	
nd signed.)			Property	<b>A</b>	-	Property B		Pr	operty C	
Type of Real Estate (e.general Primary Residence, Othe Residence, Rental Proplement, etc.)	ner					41.7				
Address										
Date Purchased										
Original Cost										
Present Market Value										
Name & Address of Mortgage Holder										
Mortgage Account Num	ber									
Mortgage Balance										
Amount of Payment per Month/Year	-									
Status of Mortgage										
Section 5. Other Pers nolder, amount of lien, t							s security, s	state name an	d address of lien	
Section 6. Unpaid Taien attaches.)	axes.	(Describ	e in detail as	to type, to wl	nom payable, v	when due, a	mount, and	d to what prop	perty, if any, a ta	

<b>Section 8. Life Insurance Held.</b> (Give face amount and cash Beneficiaries.)	h surrender value of policies – name of insurance company and
I authorize the SBA/Lender/Surety Company to make inquiries a	as necessary to verify the accuracy of the statements made and to
determine my creditworthiness.	
<b><u>CERTIFICATION</u></b> : (to be completed by each person submitting	the information requested on this form)
By signing this form, I certify under penalty of criminal prosecution	ion that all information on this form and any additional supporting
	best of my knowledge. I understand that SBA or its participating
	anies will rely on this information when making decisions regarding ar ve read the attached statements required by law and executive order
	2
Signature	Date
Print Name	Social Security No.
Signature	Date
Print Name	Social Security No.
Tille realite	Cocial Security No.
NOTICE TO LOAN AND SUBETY BOND ADDITIONTS. COM	MINAL PENALITIES AND ADMINISTRATIVE REMEDIES FOR
FALSE STATEMENTS:	MINAL PENALITIES AND ADMINISTRATIVE REMEDIES FOR
Knowingly making a false statement on this form is a violation of	of Federal law and could result in criminal prosecution, significant civil
	A false statement is punishable under 18 U.S.C. §§ 1001 and 3571 b
imprisonment of not more than five years and/or a fine of up to \$	\$250,000; under 15 U.S.C. § 645 by imprisonment of not more than
•	ed to a Federally-insured institution, a false statement is punishable
- , ,	years and/or a fine of not more than \$1,000,000. Additionally, false r the False Claims Act, 31 U.S.C. § 3729, and other administrative
remedies including suspension and debarment.	The False Glaims Act, 31 0.3.0. § 3729, and other administrative

The estimated average burden hours for the completion of this form is 1.5 hours per response. If you have questions or comments concerning this estimate or any other aspect of this information, please contact Chief, Administrative Branch, U.S. Small Business Administration, Washington, D.C. 20416, and Clearance officer, paper Reduction Project (3245-0188), Office of Management and Budget, Washington, D.C. 20503. PLEASE DO NOT SEND FORMS TO OMB.

PLEASE NOTE:

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For Superior California Economic Development Use Only: