

CITY OF UNION, OREGON



City of Victorian Heritage

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Home of Buffalo Peak Championship Golf Course

Revolving Loan Fund Application

Amount Requested: _____ Terms: Up to 12-36 months set by committee _____

Purpose of Funds: _____ Date of Application: _____

BUSINESS INFORMATION

Business Name: _____ Phone No.: () - _____

Street Address: _____ Fax No.: () - _____

Mailing Address: _____ Use for Contact: Yes No

Email Address/Website: _____ Length of time under current management: _____

Month/Year Established: _____ Tax Identification No.: _____

Business Type: _____

Sole Proprietorship Partnership Corporation Other _____

Yes No Is this business or its principals involved in any claim or lawsuit?

Yes No Has this business, its owners, or any guarantors been involved in a failure or bankruptcy in last 7 yrs.?

Yes No Does this business owe any taxes for years prior to this year?

Yes No Does business have liens and if so how many? ____ To whom? ____

If you answered 'yes' to any of these questions, please attach a written explanation.

1. Owner/Principal

Full Name: _____ Date of Birth: _____

Home Phone: () - _____ Cell Phone: () - _____

Street Address: _____

Mailing Address: _____

Years/ Months at Address: _____ Position at Company: _____ % Ownership: _____

2.Owner/Principal

Full Name: _____ Date of Birth: _____

Home Phone:() - _____ Cell Phone: () - _____

Street Address: _____

Mailing Address: _____

Years/ Months at Address: _____ Position at Company: _____ % Ownership: _____

If more please attach.

Business Owners or Principals

Each person signing (below) certifies he/she is authorized to sign for the business related to this application.

Each person signing (below) certifies that he/she is applying for a Revolving Loan Fund loan either in the capacity as the owner, partner, principal, shareholder or authorized signer on behalf of the business.

Each signer submits the information contained in this application and any supplemental documents as full, true, and correct statements on the date stated.

Each signer authorizes and directs the Revolving Loan Fund Committee to obtain personal credit reports for the business and the signer in conjunction with this application, or any renewal, monitoring, or collection of credit, if this credit request is approved.

This application is for individual joint credit (please mark one)

1. Signer: _____ Title: _____ Date: _____

2. Signer: _____ Title: _____ Date: _____

Any commitments or agreements on the part of RLF Committee must be in writing to be enforceable under state law.

ATTACHMENTS

Project

- Detailed budget showing revenues and expenditures
- Design sketch, Photos helpful
- Application fee

RLF Use Only

Application Name: _____ Date Received: _____ Rec. by: _____

Application Submitted: In Person Phone Electronic Mail/Fax

Comments:

