

City of Morganton  
Community Development Block Grant Entitlement Program  
Small Business Loan Program  
CDBG Program Application

Name of Applicant: \_\_\_\_\_  
Name of Business: \_\_\_\_\_  
Applicant's Address: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_  
Tax ID#: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
UEI # \_\_\_\_\_ (If you don't have one go to [www.sam.gov](http://www.sam.gov) to get one) **Required!!**

Type of Business: (check one)

- Sole Proprietor  
 Partnership (*Attach list of partners*)  
 Corporation (*Attach list of current Board of Directors*)  
 Limited Liability Corporation (*Attach list of any additional persons involved with Corporation*)  
 Others (*Please describe*) \_\_\_\_\_

Amount of Request for CDBG Small Business Loan Funds \$ \_\_\_\_\_

Total amount of funds contributed by the business and/or other funding source: \$ \_\_\_\_\_  
(*Describe funding source*) \_\_\_\_\_

Total Number of Full-time (at least 35 hours a week) Jobs to be created: \_\_\_\_\_

Total Number of Full-time (at least 35 hours a week) Low/Moderate Income jobs to be created: \_\_\_\_\_

Average hourly wage of job(s) created: \_\_\_\_\_

How will new jobs be advertised to the public: \_\_\_\_\_  
\_\_\_\_\_

\*What is the estimated date of the opening of the business \_\_\_\_\_

**\*\*ALL Job(s) must be created by the one year anniversary of signing the loan agreement with the city.**

Please check one:

\_\_\_\_\_ Business owner currently meets the HUD criteria as a low to moderate-income person  
(Attach applicant's latest tax return or other supporting documentation)

\_\_\_\_\_ Business will primarily employ persons that meet the HUD criteria as a low to moderate-income individual (Attach a statement that indicates the business will provide supporting documentation after the hiring of low to moderate income individuals)

\*Describe the activity or items to be funded with CDBG funds, including a budget indicating a breakdown on how the CDBG funds will be used. (Attach information on separate page(s)).

Please check one:

\_\_\_\_\_ New/Start-up Business (Include a statement or narrative of the business revenues, expenses and income, Five year business plan and marketing plan) Attach information requested on separate pages(s).

\_\_\_\_\_ Expanding Business (Include a statement or narrative of the current and proposed business revenues, expenses and income, and marketing plan. Include an up to date five year business plan) Attach information requested on separate page(s)

What other funding sources have you sought to obtain for the financial needs of your business? Please describe.

Is the applicant willing to provide quarterly cash flow statements to the Advisory Council for a period of two(2) years?

Circle One: YES NO

Is the applicant willing to authorize the City of Morganton to obtain credit reports to determine credit worthiness? (Authorization sheet included in application)

Circle One: YES NO

Describe the business location and the ability to obtain the necessary permits for the operation of the business at that location. **Contact City Building Inspector and Zoning Office for guidance on requirements.**

Provide a copy of the deed if the property is owned by applicant. If renting the property for the business provide a copy of the lease.

List three(3) persons that can be contacted for references by the CDBG staff. *(Include name, address & phone number)\*Attach separate page for this requested information.*

Submitted By: \_\_\_\_\_

Typed Name

Title

\_\_\_\_\_  
Signature                      Date

\_\_\_\_\_  
Name of Business