

PINE ISLAND

ECONOMIC DEVELOPMENT AUTHORITY

EST 1993

COVID-19 RELIEF LOAN

FIRST NAME: _____ LAST NAME: _____

BUSINESS NAME: _____ ADDRESS: _____

PHONE NUMBER: _____ CITY: _____ STATE: ___ ZIP: _____

EMAIL: _____ STATE ID#: _____ FED ID# _____

BANK ROUTING #: _____ BANK ACCOUNT #: _____

- \$10,000 \$421 PER MONTH
- \$8,000 \$336 PER MONTH
- \$6,000 \$252 PER MONTH
- \$4,000 \$168 PER MONTH
- \$2,000 \$84 PER MONTH

- THIS LOAN IS DESIGNED FOR MN GOVERNOR WALZ EXECUTIVE ORDER 20-04
- THIS IS A TWO YEAR LOAN WITH A TWO YEAR AMORTIZATION AT 1%
- THIS IS A PERSONAL GUARANTEE LOAN
- LOAN PAYMENTS START JULY 1ST 2020
- LEGAL COST WILL BE ADDED TO THE LOAN

Please provide the last 12 months of financial statements

Any information that you provide the Pine Island Economic Development Authority is strictly confidential Pine Island Economic Development Authority will not share your information with any third party unless that third party is a vendor with which we contract to provide your financial services.

By submitting this loan request, you agree that the information is correct to the best of your knowledge. You agree to notify the Pine Island Economic Development Authority of any changes to your name, address, or employment. You authorize the Pine Island Economic Development Authority to obtain credit reports in connection with this request. If you request, the Pine Island Economic Development Authority will tell you the name and address of any credit bureau from which it received a credit report on you. You understand that it is a federal crime to willfully and deliberately provide incomplete or incorrect information on loan requests. You understand that the Pine Island Economic Development Authority will rely on the information in this request and your credit report to make its decision.

Signature: _____ Social Security number _____

Approved by: _____