



South County Economic Development Council

780 Bay Blvd., Suite 204

Chula Vista, CA 91910

(619) 424-5143

scedc@southcountyedc.com

Emergency Business Loan Request

Business Name _____

Business Street Address _____

City _____ State _____ Zip _____

Phone () _____ Cell Phone () _____ E-mail Address _____

Fax () _____ Tax ID/SSN _____

Business License Number _____ Expiration Date _____ Date Business Established _____

Number of Employees at Present _____ Is this business open today? Yes No Is this business an eating establishment? Yes No

Owner Name _____ Owner Home Address _____

Owner Home Phone _____ Do you reside in San Diego County? Yes No

Ownership & Business Structure

- Sole Proprietorship
- Corporation
- Professional Corporation
- LLC (Limited Liability Company)
- LLP (Limited Liability Partnership)
- Other
- General Partnership
- Limited Partnership

Officers/Members/Partners/Owners (Attach additional sheet if necessary)

	Full Legal Name	Title	Ownership Interest
1.			%
2.			%
3.			%

Affiliate Businesses

Does your business own or have an interest in other business(es)? Yes No

If yes, please provide the company name(s), a description of the business and the relationship with your company:

I am applying for a \$5,000 Emergency Business Loan. I would use these funds for the following:

May we release information about your company and the use of the funds? Yes No

Please provide the following:

	Copy of Current Driver License and another residency I.D.	Attached <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Legal Documents reflecting you have the authority to sign on behalf of your business	Attached <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Promissory Note	Attached <input type="checkbox"/> Yes <input type="checkbox"/> No	Promissory Note Link (Click Here)
	W-9 IRS form	Attached <input type="checkbox"/> Yes <input type="checkbox"/> No	https://w9form-online.com/

I have read and understand the application and qualifications for this loan. I declare that the information provided in the application is true and correct. I further authorize South County EDC to release information as is required to ensure compliance and for auditing purposes.

Borrower's Name: _____ Borrower's Signature: _____

Date: _____

Please return form and supporting documentation to South County Economic Development Council (South County EDC) via email to scedc@southcountyedc.com