



# Arts & Business LOAN PROGRAM APPLICATION

A collaboration between the City of Eugene and Arts & Business Alliance of Eugene

**Applicant/Organization Name:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Applicant/Organization Address:** \_\_\_\_\_  
Street City State Zip

**Type of Business:** \_\_\_\_\_ **Tax ID:** \_\_\_\_\_

**Primary Bank:** \_\_\_\_\_

In the space below, tell us why you are seeking a loan from the Arts and Business loan fund. List the amount of loan funds you are seeking, the intended use of the funds, the anticipated revenue/returns/community benefit to be derived from this loan, and any additional details that help us understand how your project will benefit the City of Eugene.



ARTS & BUSINESS  
ALLIANCE OF EUGENE



**Business Ownership (if Business Application):**

<b>Name</b>	<b>Title</b>	<b>Social Security No.</b>	<b>% Ownership</b>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Have you ever filed bankruptcy?**            Yes            No

**Are you or your business involved in any pending lawsuits?**            Yes            No

(If you answered yes to one of the above, please provide a written explanation with your application.)

**APPLICATION AGREEMENT:** Be sure to read the agreement before signing below.

I certify that the responses within this application are true and accurate to the best of my knowledge. I have read and understood the Program Description for the Arts & Business Loan Program contained within this application and will retain a copy for my records. I understand that this application is used only to determine eligibility. In the event that the loan request is subsequently approved, I agree to comply with all applicable federal, state, and local laws, regulations, and policies. I authorize all references contained herein, as well as any other sources of information pertaining to my creditworthiness, to disclose such information to the City of Eugene, Oregon, ABAE or its agents. I further authorize the City of Eugene, or its agents, to provide information concerning my credit relationship to credit reporting agencies or other creditors.

**Name/Title:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please submit the completed application and additional information, as listed in the attached checklist, along with a \$50 non-refundable application fee.**

Applications are considered without regard to race, sex, color, national origin, age, religion, marital status, medical condition, disabilities, or any other legally protected status.

To help us comply with government record-keeping and reporting, please complete the information below (optional):

- |                        |                                  |
|------------------------|----------------------------------|
| White                  | Native Hawaiian/Pacific Islander |
| Black/African American | American Indian/Alaskan Native   |
| Asian                  | Hispanic or Latino               |