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## Application Preview



## Organization Profile

\* Full Name \* Name of Applicant Organization \* Contact Phone Number \* Contact E-mail Address \* Organization Address \* City and State (Use this format: Bloomington, IN) \* Zip Code \* Is your organization located in the Bloomington Urban Enterprise Zone (see map [here](#))? \* Which of the following criteria applies to your organization (please check all that apply): If you checked "contribute to tourism in some other way," please briefly explain: Which best describes your ethnicity? ☐ Hispanic/Latino ☐ Non-Hispanic/LatinoWhich best describes your race? ☐ Black ☐ Asian or Pacific Islander ☐ American Indian  
☐ White ☐ Other ☐ Prefer not to answerWhich best describes your gender? ☐ Male ☐ Female ☐ Genderqueer/nonbinary  
☐ Trans Male ☐ Trans Female ☐ Prefer not to answer  
☐ Other

Business Demographics: Please check all that apply

<input type="checkbox"/> Black-owned Business	<input type="checkbox"/> Hispanic-owned Business	<input type="checkbox"/> Asian-owned Business
<input type="checkbox"/> Woman-owned Business	<input type="checkbox"/> Disabled-owned Business	<input type="checkbox"/> Veteran-owned Business
<input type="checkbox"/> Immigrant-owned Business		

Mailing Address (if different from organization address above - please include city, state, zip)

\* Organization Type

Sole Proprietor/Individual ▼

\* Please describe what your organization does:

\* How does your organization contribute to the quality of life and/or tourism industry in Bloomington?

\* How long have you been in business?

\* Federal Employee Identification Number (EIN)

If you are a sole proprietor (and do not have an EIN), please fill in your Social Security Number:

\* Do you rent or own your business property?

Rent ▼

Lease Expiration Date (if applicable)



Please click on the calendar icon to enter date in (MM/dd/yyyy e.g., 04/16/2020 format).

Monthly Rent (if applicable)

\* Number of Full Time Employees

\* Number of Part Time Employees

COVID19 Impact on Organization

\* Please describe the impact COVID-19 has had on your business:

\* Which of the following challenges is your organization facing due to COVID-19 (check all that apply)? ☐ Payroll ☐ Vendors ☐ Rent ☐ Mortgage ☐ Other

If you answered "Other," please explain briefly

How have you adapted your business plan to respond to the COVID-19 pandemic? (Please explain briefly)

\* How will you use these loan funds to sustain your business and retain/rehire your employees?

What % revenue loss have you experienced since March 1, 2020, compared to last year's revenue?

If you feel it better reflects COVID-19's impact on your business, what % revenue loss have you experienced in March 2020, compared to January or February 2020 revenue?

\* Compared with your own projections, what % revenue loss do you expect in the next two months?



\* Do you commit to best-faith efforts to retain your employees without reducing wages? ☐ Yes ☐ No

\* Do you have insurance that will cover your business closure? ☐ Yes ☐ No

What other forms of aid have you *already* applied for?

\* What other forms of aid *do you plan* to apply for?

#### Funding Request

\* How much loan capital are you applying for?



If you wish to verbally explain your funding

request, please submit your brief comments  
here:

\* How much of your request do you plan to use  
on payroll?

\* How much do you plan to use toward rent or  
mortgage payments?

\* How much do you plan to use for utility  
payments?

\* How much do you plan to use for  
inventory/suppliers/vendor payments?

\* How much will you use for other purposes?

If you plan to spend more than \$0 on other  
purposes, please explain what those other uses  
will be:

#### Organization Finances

\* 2018 Gross Revenue

\* 2019 Gross Revenue

\* Please upload your year-to-date financial statement:

\* Does your organization have cash reserves? (If  
no, put 0; if yes, fill in the amount):

If you are a nonprofit, please attach only your 990 from 2019.

If you are a for-profit business, please attach your business tax  
returns from 2019.

If you are a for-profit business without a business tax return  
for 2019, please attach your personal tax return from 2019.

If none of these documents is available, please leave blank.

If you are a nonprofit, please attach only your 990 from 2018.

If you are a for-profit business, please attach only your  
business tax returns from 2018.

If you are a for-profit business without business tax returns from 2018, please attach your personal tax return from 2018.

If none of these documents is available, please leave blank.

If you are a nonprofit, please attach only your 990 from 2017.

If you are a for-profit business, please attach only your business tax returns from 2017.

If you are a for-profit business without business tax returns from 2017, please attach your personal tax return from 2017.

If none of these documents is available, please leave blank.

\*What was your average monthly revenue prior to COVID-19?

\*What is your projected monthly revenue while the COVID-19 crisis persists?

\*Do you have collateral you can pledge toward a loan? ☐ Yes ☐ No

\*Will you sign a personal guarantee if required by the Advisory Commission? ☐ Yes ☐ No

Unless you are applying as a nonprofit, please attach a personal financial statement. If you do not have one to upload, please fill out and upload this SBA personal financial statement form. NOTE: you do not have to get it notarized - please ignore that signature line:  [sba\\_pfs\\_2012.pdf](#)

#### SignaturePage

By signing below, you attest that the information in this application is true and accurate to the best of my knowledge. Once you have submitted this application, you will be unable to go back and edit the application. If your application is incomplete, you will receive an error message from this online platform.

Please click submit below when you are ready to submit:

Electronic Signature \*Do you attest that the information in this application is true and accurate to the best of your knowledge?  
Enter your name as "Brian Payne" to Confirm your Electronic Signature.