

**North Central New Mexico
Economic Development District**



***Working Now* Loan Application**

NCNMEDD's *Working Now* Loan Program was developed in response to the COVID-19 Pandemic through funding from the US Economic Development Administration (EDA). These loans are available to small businesses in the NCNMEDD region for relief from the impacts of COVID-19. *Working Now* funds can be used for to help businesses affected by the pandemic. Uses may include but are not limited to payroll, rent, inventory, marketing, ecommerce development, personal protective equipment, other equipment and small capital improvements.

Loan Application Checklist

- SECTION 1: Business Information
- SECTION 2: Guarantor/Co-Borrower Information
- SECTION 3: Loan Request
- SECTION 4: Financial Information
- SECTION 5: Demographic and Impact Data (Optional)
- SECTION 6: Narratives
 - Description of business
 - Business viability before COVID-19
 - How business was impacted by COVID-19
 - Business recovery plan
- SECTION 7: Authorization and Certifications
- ATTACHMENT 1: Personal Financial Statement
- ATTACHMENT 2: 2019 Tax Returns for Borrowing Entity and Guarantor/s or Profit & Loss Statement and Balance Sheet as of 12.31.19
- ATTACHMENT 3: Most Recent Profit & Loss Statement and Balance Sheet
- ATTACHMENT 4: Current Business License
- ATTACHMENT 5: Valid Drivers License or Passport

Borrower Assistance

For more information or assistance with this loan application, please contact:

Keith Flynn, Loan Officer

North Central New Mexico Economic Development District
3900 Paseo del Sol
Santa Fe, NM 87507
505-356-9600
keithf@ncnmedd.com

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SECTION 1: Business Information

Legal Name: _____ Tax ID #: _____

Description of Business: _____

Street Address: _____

Mailing Address: _____

Phone #: _____ Cell #: _____ Contact Name: _____

County: _____ Year Established: _____ Business Year End: _____

Legal Entity: Proprietorship Partnership LLC Corporation Non-Profit Other

SECTION 2: Guarantor/Co-Borrower Information

Name: _____ Tax ID #: _____

Street Address: _____

Mailing Address: _____

Home #: _____ Work #: _____

Cell #: _____ Email: _____

Relationship: Guarantor Co-Borrower

Guarantor/Co-Borrower Information

Name: _____ Tax ID #: _____

Street Address: _____

Mailing Address: _____

Home #: _____ Work #: _____

Cell #: _____ Email: _____

Relationship: Guarantor Co-Borrower

SECTION 3: Loan Request (Maximum of \$10,000)

Amount	Loan Purpose (e.g. equipment, working capital, inventory, PPE, etc.)
\$ _____	_____
\$ _____	_____
\$ _____	_____
\$ _____	= TOTAL LOAN REQUEST

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SECTION 4: Financial Information

Have you or your business ever filed bankruptcy?

No Yes, type & date _____

Are you or your business involved in any pending lawsuits?

No Yes, please explain _____

Are any tax returns being contested or audited?

No Yes, please explain _____

Are you or your business delinquent on any taxes?

No Yes, please explain _____

Has your business received any other Federal CARES Act Funding (PPP loans, EIDL loans or grants, etc.)?

No Yes

Are you or your business delinquent on any debt, including loans from NCNMEDD?

No Yes, please list amounts and debtors _____

Name(s) and title(s) of persons authorized to borrow money on behalf of the business:

Name: _____ Title: _____

Name: _____ Title: _____

Name: _____ Title: _____

Accountant or accounting firm: _____

SECTION 5: Demographic and Impact Data: (Optional)

This data is used to record demographics and measure the impact of assistance provided by NCNMEDD. It is used internally and reported in aggregate only. None of the responses will affect your eligibility or consideration for a loan from NCNMEDD.

Applicant

Are you: Male Female

Living with a disability? No Yes

Are you a veteran? No Yes

Race/Ethnicity: _____

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SECTION 6: Narratives

Provide a brief description of your business, including location, goods or services sold, number of full, part time and/or seasonal employees and other information relevant to this loan request.

Explain how your business was viable prior to the COVID-19 pandemic.

How did COVID-19 affect your business?

What is your business' recovery plan?

How many jobs is this loan projected to retain? _____

How many jobs is this loan projected to create? _____

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SECTION 7: Authorizations and Certifications

I/We hereby certify that all information contained in this document and any attachments is true and correct to the best of my/our knowledge.

I/We authorize the North Central New Mexico Economic Development District and/or its agents to make any investigations of credit either directly or through any agency which has credit information.

I/We agree that this application and any attachments shall remain NCNMEDD's property whether or not the loan is granted.

I/We specifically waive and release any claims now or in the future regarding the assistance provided by NCNMEDD and/or its agents.

Applicant Signature

Date

Guarantor Signature

Date

NOTICE: NCNMEDD does not discriminate against applicants on the basis of race, color, religion, national origin, sex, marital status, physical or mental disability, or age (provided the applicant has the capacity to enter into a binding contract).

NOTICE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act.

NOTICE: Neither NCNMEDD nor its agents will directly benefit from this relationship. NCNMEDD does not warrant or guarantee in any manner that its assistance will result in business success.