

*Personal Information*

Name: \_\_\_\_\_  
First Middle Maiden Last

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Employer: \_\_\_\_\_ Monthly Income: \_\_\_\_\_

Other Monthly Income (list source): \_\_\_\_\_

Previous Business Ownership or Management: \_\_\_\_\_

How did you hear about us?  
 \_\_\_\_\_ (Name) \_\_\_\_\_ (Organization)

**Circle yes or no for each question below.**

Have you been involved in any bankruptcy proceedings?	Yes	No	(If yes, explain on separate sheet)
Have you had property foreclosed upon?	Yes	No	(If yes, explain on separate sheet)
Are any of your federal, state or local taxes delinquent?	Yes	No	(If yes, explain on separate sheet)
Are you currently delinquent on any child support?	Yes	No	(If yes, explain on separate sheet)
Are there any pending lawsuits or outstanding judgments?	Yes	No	(If yes, explain on separate sheet)
Are you behind on any payments?	Yes	No	(If yes, explain on separate sheet)
Are you a U.S. Citizen?	Yes	No	

Veteran	<input type="checkbox"/> Non-Veteran <input type="checkbox"/> Veteran-Other <input type="checkbox"/> Service-Disabled Veteran <input type="checkbox"/> Not Disclosed
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other <input type="checkbox"/> Not Disclosed
Race	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African-American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Two or More Races <input type="checkbox"/> Not Disclosed
Ethnicity	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> Not Disclosed

**This data is collected for program reporting purposes only. Disclosure is voluntary and has no bearing on the credit decision.**

*Business Information*

Business Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Type of Organization:  Sole Proprietor  C Corp  S Corp  LLC  Partnership

Type of Business:  Service  Retail  Wholesale  Manufacturer  Other \_\_\_\_\_

Date Business Founded: \_\_\_\_\_ Federal Tax # \_\_\_\_\_

Amt. Requested \$ \_\_\_\_\_ Number of Full Time Equivalent Employees currently: \_\_\_\_\_

Direct economic impact of Covid-19 on business: \_\_\_\_\_  
 \_\_\_\_\_

Please list the purpose of loan below:

Please list debt below:

Loan Purpose Description	Amount
Real Estate	
Purchase Business	
Buildout/Renovations	
Equipment, furniture, fixtures	
Inventory/supplies	
Software	
Advertising/Marketing	
Other (Describe below)	
<b>Total Request</b>	

Description of Debt	Balance owed	Monthly Payment
<b>Total Business Debt</b>		

**AUTHORIZATION FOR VERIFICATION OF INFORMATION PLEASE READ CAREFULLY BEFORE SIGNING APPLICATION:**

I understand that this Loan Eligibility Application may serve as the first step of a loan application and that may request supporting documents to verify the information provided. As part of the application process, I authorize COMMUNITIES UNLIMITED, INC. to investigate and verify all of the above information. I authorize COMMUNITIES UNLIMITED, INC. to perform a credit check, now or in the future, including obtaining consumer and/or commercial credit reports and to exchange information about credit experience with other creditors, from time to time, as authorized by law including retrieving a copy of my personal credit report. I also understand that the information provided on this Form or on my credit report may be used by COMMUNITIES UNLIMITED, INC. to either approve or decline my request for credit and that I may be required to provide other information in addition to this application. The release in any manner of all information by COMMUNITIES UNLIMITED, INC. is hereby authorized whether such information is of record or not, and I hereby release all persons, agencies, firms, companies, etc., from any damages resulting from such information.

\_\_\_\_\_  
Borrower Print Name

\_\_\_\_\_  
Co-Borrower Print Name

\_\_\_\_\_  
Borrower Signature

\_\_\_\_\_  
Co-Borrower Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

*Notices: Intentional falsification of information, statements or values for any purpose including, but not limited to the purpose of obtaining a loan from Communities Unlimited, Inc., may lead to disqualification of the applicant and possible criminal prosecution.*

*To help the Federal Government fight the funding of terrorism and money laundering activities, Federal law requires all Government program lenders to obtain, verify, and record information that identifies each person who applies for a loan under a Federal Government program. This means that when you apply for a loan under a Federal Government program, we will ask for your name, address, date of birth and other information will allow us to identify you. We may also ask to see your driver's license or other identifying documents.*

**Contact Information**

Communities Unlimited, Inc. • #3 East Colt Square • Fayetteville, AR 72703  
[www.CommunitiesU.org](http://www.CommunitiesU.org) • [Loans@CommunitiesU.org](mailto:Loans@CommunitiesU.org) • 479.443.2700 (Phone) • 479.443.5036 (Fax)