



U.S. Small Business Administration DISASTER BUSINESS LOAN APPLICATION

OMB No. : 3245-0017
Expiration: 08/31/2021

FOR SBA INTERNAL USE ONLY

Date Received _____ Location _____ By _____

Physical Declaration Number

Economic Injury Declaration Number

FEMA Registration Number
(if known)

Filing Deadline Date

Filing Deadline Date

SBA Application Number

1. ARE YOU APPLYING FOR:

- Physical Damage -- Indicate type of damage
- Real Property Business Contents
- Economic Injury (EIDL)

Military Reservist EIDL (MREIDL)

(complete the following)

* Name of Essential Employee _____

* Employee's Social Security Number _____

PLEASE PROVIDE ALL INFORMATION OR DOCUMENTATION REQUESTED IN THE ATTACHED FILING REQUIREMENTS.

* For information about these questions, see the attached Statements Required by Laws and Executive Orders.

Apply online at <https://disasterloan.sba.gov/ela/> OR send completed applications to:

U.S. Small Business Administration, Processing and Disbursement Center, 14925 Kingsport Road, Fort Worth, Texas 76155

2. ORGANIZATION TYPE *Sole Proprietors should complete form 5C

- Partnership Limited Partnership Limited Liability Entity
- Corporation Nonprofit Organization Trust Other: _____

3. APPLICANT'S LEGAL NAME

4. FEDERAL E.I.N. (if applicable)

公司名

联邦税号:

5. TRADE NAME (if different from legal name)

6. BUSINESS PHONE NUMBER (including area code)

店名

电话

7. MAILING ADDRESS

- Business Home Temp Other _____

Number, Street, and/or Post Office Box City County State Zip

地址

8. DAMAGED PROPERTY ADDRESS(ES)

(If you need more space, attach additional sheets.)

Same as mailing address

BUSINESS PROPERTY IS:

- Owned Leased

Number and Street Name City County State Zip

9. PROVIDE THE NAME(S) OF THE INDIVIDUAL(S) TO CONTACT FOR:

Loss Verification Inspection

Information necessary to process the Application

Name

Name

Telephone Number

Telephone Number

10. ALTERNATE WAY TO CONTACT YOU

Cell Number 电话

E-mail 电邮

Fax Number

Other

11. BUSINESS ACTIVITY:

12. NUMBER OF EMPLOYEES (pre-disaster): 疫期工人数

13. DATE BUSINESS ESTABLISHED: 公司成立日期

14. CURRENT MANAGEMENT SINCE: 公司成立日期

15. AMOUNT OF ESTIMATED LOSS:

If unknown, enter a question mark

Real Estate

Inventory

Machinery & Equipment

Leasehold Improvements

16. INSURANCE COVERAGE (IF ANY)

(If you need more space, attach additional sheets.)

Coverage Type: _____

Name of Insurance Company and Agent

Phone Number of Insurance Agent

Policy Number

股东资料 - 每人一份

17. OWNERS (Individuals and businesses.) (If you need more space attach additional sheets.)		Complete for each: 1) proprietor, or 2) limited partner who owns 20% or more interest and each general partner, or 3) stockholder or entity owning 20% or more voting stock.			
Legal Name 名字	Title/Office	% Owned 持股量	E-mail Address 电邮		
SSN/EIN* 社字号	Marital Status 婚姻状况	Date of Birth* 生日	Place of Birth* 出生地	Telephone Number (area code) 电话	US Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No 公民?
Mailing Address		City	State	Zip	
Legal Name	Title/Office	% Owned	E-mail Address		
SSN/EIN*	Marital Status	Date of Birth*	Place of Birth*	Telephone Number (area code)	US Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No
Mailing Address		City	State	Zip	

* For information about these questions, see the attached Statements Required by Laws and Executive Orders.

Business Entity Owner Name	EIN	Type of Business	% Ownership
Mailing Address	City	State	Zip Code
E-mail Address	Phone		

18. For the applicant business and each owner listed in item 17, please respond to the following questions, providing dates and details on any question answered YES (Attach an additional sheet for detailed responses).

→
破产
和
犯罪
记录

- a. Has the business or a listed owner ever been involved in a bankruptcy or insolvency proceeding? Yes No
- b. Does the business or a listed owner have any outstanding judgments, tax liens, or pending lawsuits against them? Yes No
- c. In the past year, has the business or a listed owner been convicted of a criminal offense committed during and in connection with a riot or civil disorder or other declared disaster, or ever been engaged in the production or distribution of any product or service that has been determined to be obscene by a court of competent jurisdiction? Yes No
- d. Has the business or a listed owner ever had or guaranteed a Federal loan or a Federally guaranteed loan? Yes No
- e. Is the business or a listed owner delinquent on any Federal taxes, direct or guaranteed Federal loans (SBA, FHA, VA, student, etc.), Federal contracts, Federal grants, or any child support payments? Yes No
- f. Does any owner, owner's spouse, or household member work for SBA or serve as a member of SBA's SCORE, ACE, or Advisory Council? Yes No
- g. Is the applicant or any listed owner currently suspended or debarred from contracting with the Federal government or receiving Federal grants or loans? Yes No

19. Regarding you or any joint applicant listed in Item 17:

a) are you presently subject to an indictment, criminal information, arraignment, or other means by which formal criminal charges are brought in any jurisdiction; b) have you been arrested in the past six months for any criminal offense; c) for any criminal offense - other than a minor vehicle violation - have you ever: 1) been convicted, 2) plead guilty, 3) plead nolo contendere, 4) been placed on pretrial diversion, or 5) been placed on any form of parole or probation (including probation before judgement)? Yes No If yes, Name: _____

20. PHYSICAL DAMAGE LOANS ONLY. If your application is approved, you may be eligible for additional funds to cover the cost of mitigating measures (real property improvements or devices to minimize or protect against future damage from the same type of disaster event). It is not necessary for you to submit the description and cost estimates with the application. SBA must approve the mitigating measures before any loan increase. **By checking this box, I am interested in having SBA consider this increase.**

21. If anyone assisted you in completing this application, whether you pay a fee for this service or not, that person must print and sign their name in the space below.

Name and Address of Representative (please include the individual name and their company)

_____ (Signature of Individual)	_____ (Print Individual Name)
_____ (Name of Company)	_____ Phone Number (include Area Code)
_____ Street Address, City, State, Zip	_____ Fee Charged or Agreed Upon <input type="checkbox"/>

Unless the NO box is checked, I give permission for SBA to discuss any portion of this application with the representative listed above. NO

AGREEMENTS AND CERTIFICATIONS

On behalf of the undersigned individually and for the applicant business:
 I/We authorize my/our insurance company, bank, financial institution, or other creditors to release to SBA all records and information necessary to process this application. If my/our loan is approved, additional information may be required prior to loan closing. I/We will be advised in writing what information will be required to obtain my/our loan funds.
 I/We hereby authorize the SBA to verify my/our past and present employment information and salary history as needed to process and service a disaster loan.
 I/We authorize SBA, as required by the Privacy Act, to release any information collected in connection with this application to Federal, state, local, tribal or nonprofit organizations (e.g. Red Cross Salvation Army, Mennonite Disaster Services, SBA Resource Partners) for the purpose of assisting me with my/our SBA application, evaluating eligibility for additional assistance, or notifying me of the availability of such assistance.
 I/We will not exclude from participating in or deny the benefits of, or otherwise subject to discrimination under any program or activity for which I/we receive Federal financial assistance from SBA, any person on grounds of age, color, handicap, marital status, national origin, race, religion, or sex.
 I/We will report to the SBA Office of the Inspector General, Washington, DC 20416, any Federal employee who offers, in return for compensation of any kind, to help get this loan approved. I/We have not paid anyone connected with the Federal government for help in getting this loan.
CERTIFICATION AS TO TRUTHFUL INFORMATION: By signing this application, you certify that all information in your application and submitted with your application is true and correct to the best of your knowledge, and that you will submit truthful information in the future.
WARNING: Whoever wrongfully misapplies the proceeds of an SBA disaster loan shall be civilly liable to the Administrator in an amount equal to one-and-one half times the original principal amount of the loan under 15 U.S.C. 636(b). In addition, any false statement or misrepresentation to SBA may result in criminal, civil or administrative sanctions including, but not limited to: 1) fines and imprisonment, or both, under 15 U.S.C. 645, 18 U.S.C. 1001, 18 U.S.C. 1014, 18 U.S.C. 1040, 18 U.S.C. 3571, and any other applicable laws; 2) treble damages and civil penalties under the False Claims Act, 31 U.S.C. 3729; 3) double damages and civil penalties under the Program Fraud Civil Remedies Act, 31 U.S.C. 3802; and 4) suspension and/or debarment from all Federal procurement and non-procurement transactions. Statutory fines may increase if amended by the Federal Civil Penalties Inflation Adjustment Act Improvements Act of 2015.

SIGNATURE	TITLE	DATE
_____ Sign in Ink	_____	_____

**U.S. SMALL BUSINESS ADMINISTRATION
ECONOMIC INJURY DISASTER LOAN SUPPORTING INFORMATION**

The U.S. Small Business Administration Economic Injury Disaster Loan provides immediate working capital to eligible applicants. For expedited loan application processing, the business must have been operating for at least one year prior to the disaster. Eligibility for this disaster Loan must consider compensated from other sources to offset the economic injury. Other sources include but are not limited to: (1) grants or other reimbursement (including loans) from government agencies or private organizations, and (2) claims for civil liability against other individuals, organizations or governmental entities.

公司是否成立超过一年?

Was the business in operation one year prior to the disaster? Yes No

前12个月的总收入

Gross Revenues for the twelve (12) month period prior to the disaster: \$

前12个月的货物成本

Cost of Goods Sold for the twelve (12) month period prior to the disaster: \$

Rental properties (residential and commercial) only.
Lost rents due to the disaster: \$

Compensation from other sources received as a result of the disaster (provide a brief description below) :

	\$
	\$
	\$

SIZE STANDARD*:

SBA's size standards define whether a business concern is small and, therefore, eligible for an Economic Injury Disaster Loan.

I certify **all above information provided** and the size of the applicant business does not exceed the size standard for the industry in which the business is primarily engaged.

签名 →

日期 ↓

Signature and Title

Date

* SBA establishes size standards by industry under the North American Industry Classification System (NAICS){<https://www.census.gov/eos/www/naics/>}. Business size standards, by NAICS code, may be found at 13 CFR §121.201 (https://ecfr.io/Title-13/se13.1.121_1201).