



**Economic Development Revolving Loan Fund – Express Loan Forgiveness Application**

This application form is intended to request forgiveness of any loan issued under the Express Loan process authorized by the Evansville Common Council on April 14<sup>th</sup>, 2020. Please answer all questions and attach any requested documentation. Applications for forgiveness are due no later than September 1, 2020. The EDRLF Review Board, Economic Development Committee and Common Council will have final authority to approve loan forgiveness. (At a minimum, forgiveness applications must demonstrate that the business was deemed non-essential and affected by the Governor’s declarations and orders relating to COVID-19; Must have applied for Federal, State, County or other assistance programs related to COVID-19, must have a physical location that was open to the public on a commercially zoned lot within Evansville’s City Limits, and be submitted no later than September 1, 2020.)

\*\*\* Please note at this time, the following are not eligible for forgiveness: non-profit or community organizations, restaurants, manufacturers, home-based businesses, and any business with greater than 10 employees.\*\*\*

- 1.) Loan Number: RLF-2020-\_\_\_\_\_
- 2.) Approved Loan Amount: \$ \_\_\_\_\_
- 3.) Business Name: \_\_\_\_\_
- 4.) Applicant Name: \_\_\_\_\_
  - a. Email Address: \_\_\_\_\_ and Phone Number: \_\_\_\_\_
  - b. Mailing Address: \_\_\_\_\_
- 5.) Is your business a retail or retail services business? (EG, retail store, hair salon, etc.)?  
\_\_\_\_\_
- 6.) Was your business deemed non-essential and required to close completely during the Governor’s “Safer at Home” Order? \_\_\_\_\_
- 7.) What other Federal, State, or County assistance have you applied for?  
\_\_\_\_\_
  - a. What was the result of these applications? \_\_\_\_\_

8.) Does your business have a physical location? Y/N.

a. If so, address: \_\_\_\_\_

b. Business Hours: \_\_\_\_\_

9.) How were the funds used (attach invoices or receipts)?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By Signing Below you certify all statements made are factual and all funds were not used in a manner that violates state, federal or local laws and have been used in accordance to descriptions made in your original application.

\_\_\_\_\_  
Printed Name and Signature of Applicant(s)

\_\_\_\_\_  
Printed Name and Signature of Applicant(s)

\*\*\*\*\*Portions Below Completed by Staff\*\*\*\*\*

Date Received: \_\_\_\_\_ Staff Review Date: \_\_\_\_\_

Staff Recommended Forgiveness Amount: \_\_\_\_\_, Notes: \_\_\_\_\_

EDRLF Recommendation: \_\_\_\_\_

EDC Recommendation: \_\_\_\_\_

Council Action: \_\_\_\_\_

Loan forgiveness in the amount of \$ \_\_\_\_\_ approved by Common Council on: \_\_\_\_\_

If forgiven, check issue date: \_\_\_\_\_ and check number: \_\_\_\_\_

\_\_\_\_\_  
Signature of Mayor, William C. Hurtley