

#### \*\*\* THE FOLLOWING PAGES MUST BE COMPLETED BY HAND \*\*\*

## 26. STATEMENT OF UNDERSTANDING (Please read and initial each paragraph if you agree)

# Information Verification

For determination of eligibility, the applicant should submit information requested in the Application Checklist. In the event that additional information not included with the initial application checklist is required to obtain an approval for the application, the undersigned agrees to provide that information in a timely manner to the loan officer processing the request.

The Office of Community Development Disaster Recovery Unit ("OCD-DRU") will review all applicants for "Duplication of Benefit." The undersigned understands that the Restore Louisiana Small Business Program ("RLSB") and its subrecipients have the authority to confirm application and award status with the SBA. If it is found that you received an SBA loan, flood insurance, private insurance, philanthropy or other state or federal benefits or financial assistance for your business for the purpose of working capital expenses (i.e., wages and benefits, inventory, etc.) or equipment due to the March or August floods and that you are now applying to receive an award for the same purpose, your award amount will be based on the unmet need remaining.

The undersigned also authorizes RLSB and its subrecipients to obtain **federal and state tax returns**, **personal credit reports and business credit reports**, and also acknowledges that all information relative to the loan request, including the application and related documentation, becomes the property of RLSB and will not be returned to the applicant.

# Louisiana Department of Revenue.

The undersigned understands that the Restore Louisiana Small Business Program ("RLSB") and its subrecipients have the authority to confirm with the Louisiana Department of Revenue that the award recipient is in good standing with Louisiana Department of Revenue. Award recipient must be in good standing in order to receive award funds. If the Louisiana Department of Revenue cannot verify that the award recipient is in good standing, they will notify OCD and/or its subrecipient, and a letter will be issued to the award recipient informing them that they should contact the Department of Revenue to discuss their account.

# Income Tax Reporting.

The undersigned understands that an IRS 1099G will be issued to award recipients. Award recipient understands that all or a portion of the grant funds may be treated as taxable income for U.S. or state income tax purposes.

#### Federal Debarment.

The undersigned understands that his or her business cannot be on the federal debarment list. (www.sam.gov)

## Public Announcements.

If the award recipient wishes to issue a public announcement concerning this award, the text of the proposed announcement must be submitted to the RLSB for review and approval prior to the release date. The Office of Community Development Disaster Recovery Unit ("OCD-DRU") must be mentioned in any public announcements. Approval shall not be unreasonably withheld.

# No Right of Assignment or Delegation.

The award recipient may not assign or otherwise transfer its rights or delegate any of its obligations under this letter unless expressly approved by OCD-DRU.



#### Revocation.

RLSB reserves the right to revoke this award if the funds are not used for the stated purpose. The award recipient understands and agrees that revocation of this award will require the return of all funds disbursed. The business will be obligated to repay some or all funds received under this program in the event that (a) its application including any information provided therewith or thereafter contains any material misrepresentations; or (b) the award was made in error and the applicant is not entitled to some or all assistance under the Program Guideline

#### **Monitoring and Records**

- a) This award may be used only for the purposes stated herein. Documents providing evidence of the use of the funds from this award shall be retained by award recipient for five years from the date of disbursement of the initial installment of the award.
- b) OCD-DRU and its subrecipients reserve the right to monitor usage of award funds. Such monitoring will include review that the entire amount of the award was used only for the expenses as specified above in accordance with your proposal.
- c) OCD-DRU and/or its subrecipients may, during regular business hours and on reasonable notice to award recipient inspect, audit, or copy records pertaining to this award. It is further agreed that the Office of Community Development Disaster Recovery Unit, Legislative Auditor of the State of Louisiana, Division of Administration, and/or the U.S. Department of Housing and Urban Development auditors or auditors contracted by them shall have the option of auditing all records and accounts of award recipient that relate to this grant at any time during normal business hours, as often as deemed reasonably necessary, to audit, examine, and make excerpts or transcripts of all relevant data.
- d) Awardees failure to cooperate in such review will result in forfeiture of the award Amount and awardee will be responsible for repaying the full amount of funds disbursed.

# **Information Access and Sharing:**

The undersigned gives permission to RLSB to confidentially discuss any application information with all subrecipients involved with this Program, as well as the Louisiana Small Business Development Centers that will provide technical assistance services for this program if requested by the subrecipient. The applicant also gives permission to RLSB and its subrecipients to use its name in its Annual Report and in its marketing materials. No financial details will be released, except possibly the award amount, as this is considered public information.

#### Affirmation of Information Provided in Application.

By the applicant's signature below, the applicant represents and warrants that he/she has read this application and Statement of Understanding and attests that all information and documentation furnished in connection with the application is true, accurate and complete to the best of his/her knowledge and that any regulations relative to the RLSB program will be followed. Individuals and/or businesses found to be willfully providing fraudulent information may be prosecuted.



# **27. SIGNATURES**

All owners with at least 20% ownership must sign the application, or the applicant must provide a Board of Resolution Authority to sign for the applicant company. Please attach additional pages if necessary.

Owner Name:	Owner Name:
Signature:	Signature:
Title:	
Date:	Date:
Owner Name:	Owner Name:
Signature:	Signature:
Title:	
Date:	Date:
Owner Name:	Owner Name:
Signature:	Signature:
Title:	Title:
Date:	Date:
Owner Name:	Owner Name:
Signature:	Signature:
Title:	Title:
Date:	Date:
Owner Name:	Owner Name:
Signature:	Signature:
Title:	Title:
Date:	Date:
Owner Name:	Owner Name:
Signature:	Signature:
Title:	Title:
Date:	Date:



# 28. Information Required by the Federal Department of Housing and Urban Development (HUD)

(will not affect award eligibility or amount)

This page should be completed if you employ six or more persons and/or you have more than one owner. If you are self-employed (no employees), complete the previous page and leave this page blank. See Parish income limits.

# **Business LMI Form - 2017**

Effective Date: April 4th, 2017

Subrecipient									
Lender:									
Echaci.									
Name of									
<b>Business:</b>									
(Client Served or									
Borrower)									
51 · 1									
Physical									
Address:									
(of Business)									
Federal Tax									
ID:			Reporting						
(of Business)			Period:						
(o) business)		_	i ciioai	Begin		End	ı		
				- 9					
Parish		1						-	
(Income				One Person					
Area):				Income:					
Alcaj.	(Parish of Business'	<u></u>		income.		(HUD		•	
	Physical Address)					Limit			
						2017)			
Instructions:									
	jobs on one row <b>ONLY</b>								
	ensation, enter either a byee works less than 35	-					ation i	actoad o	ς <b>f</b>
Annual Salary.	Dyee Works less than 55	1113/ WK, US	e calculated <b>Hou</b> l	iy hate to indicate	vvages	o, compens	ationii	isteau t	וע
· ·	<mark>ust be selected</mark> in orde	er for <b>One</b>	Person Income a	nd <b>FTE's</b> to calculat	e prop	erly.			
									1
Employment Positi	ions:	# of New		Wages/Com	nonca	tion			
		Jobs		(enter as Hou			FI	ΓE's	
		Create	Create Hours Annual Salary)					FTE's	
		d	per Week		1	1			
	Expected							Non	
				Hourly Rate	or	Annual	LM	-	
		Actual				Salary	l	LMI	
Job/Position 1	itle								



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						1	-	
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						,	-	
							-	
Total Employment	0	0				-	-	
This information is required by HUD and used for aggregate								
	repor	rting <u>only</u>						
Signad:			Date					



# Lookup Table Parish Income Limits for 2017

							Total	# of Perso	ns in Hous	ehold						
				LMI-	·Low				LMI-Mod							
Parish	1	2	3	4	5	6	7	8	1	2	3	4	5	6	7	8
Acadia	16,550	18,900	21,250	23,600	25,500	27,400	29,300	31,200	26,550	30,350	34,150	37,900	40,950	44,000	47,000	50,050
Allen	17,800	20,350	22,900	25,400	27,450	29,500	31,500	33,550	27,800	31,800	35,750	39,700	42,900	46,100	49,250	52,450
Ascension	23,800	27,200	30,600	33,950	36,700	39,400	42,100	44,850	36,350	41,550	46,750	51,900	56,100	60,250	64,400	68,550
Assumption	19,850	22,650	25,500	28,300	30,600	32,850	35,100	37,400	32,000	36,600	41,150	45,700	49,400	53,050	56,700	60,350
Avoyelles	16,550	18,900	21,250	23,600	25,500	27,400	29,300	31,200	26,250	30,000	33,750	37,500	40,500	43,500	46,500	49,500
Beauregard	21,850	25,000	28,100	31,200	33,700	36,200	38,700	41,200	34,100	39,000	43,850	48,700	52,600	56,500	60,400	64,300
Bienville	16,550	18,900	21,250	23,600	25,500	27,400	29,300	31,200	26,250	30,000	33,750	37,500	40,500	43,500	46,500	49,500
Bossier	19,850	22,650	25,500	28,300	30,600	32,850	35,100	37,400	33,350	38,100	42,850	47,600	51,450	55,250	59,050	62,850
Caddo	19,850	22,650	25,500	28,300	30,600	32,850	35,100	37,400	33,350	38,100	42,850	47,600	51,450	55,250	59,050	62,850
Calcasieu	20,500	23,400	26,350	29,250	31,600	33,950	36,300	38,650	31,550	36,050	40,550	45,050	48,700	52,300	55,900	59,500
Caldwell	16,950	19,350	21,750	24,150	26,100	28,050	29,950	31,900	27,250	31,150	35,050	38,900	42,050	45,150	48,250	51,350
Cameron	20,500	23,400	26,350	29,250	31,600	33,950	36,300	38,650	31,550	36,050	40,550	45,050	48,700	52,300	55,900	59,500
Catahoula	17,200	19,650	22,100	24,550	26,550	28,500	30,450	32,450	26,250	30,000	33,750	37,500	40,500	43,500	46,500	49,500
Claiborne	16,550	18,900	21,250	23,600	25,500	27,400	29,300	31,200	26,250	30,000	33,750	37,500	40,500	43,500	46,500	49,500
Concordia	16,550	18,900	21,250	23,600	25,500	27,400	29,300	31,200	26,250	30,000	33,750	37,500	40,500	43,500	46,500	49,500
De Soto	19,850	22,650	25,500	28,300	30,600	32,850	35,100	37,400	33,350	38,100	42,850	47,600	51,450	55,250	59,050	62,850
East Baton Rouge	23,800	27,200	30,600	33,950	36,700	39,400	42,100	44,850	36,350	41,550	46,750	51,900	56,100	60,250	64,400	68,550
East Carroll	16,550	18,900	21,250	23,600	25,500	27,400	29,300	31,200	26,250	30,000	33,750	37,500	40,500	43,500	46,500	49,500
East Feliciana	23,800	27,200	30,600	33,950	36,700	39,400	42,100	44,850	36,350	41,550	46,750	51,900	56,100	60,250	64,400	68,550
Evangeline	16,550	18,900	21,250	23,600	25,500	27,400	29,300	31,200	26,250	30,000	33,750	37,500	40,500	43,500	46,500	49,500
Franklin	16,550	18,900	21,250	23,600	25,500	27,400	29,300	31,200	26,250	30,000	33,750	37,500	40,500	43,500	46,500	49,500
Grant	19,050	21,750	24,450	27,150	29,350	31,500	33,700	35,850	29,350	33,550	37,750	41,900	45,300	48,650	52,000	55,350
Iberia	18,500	21,150	23,800	26,400	28,550	30,650	32,750	34,850	27,650	31,600	35,550	39,500	42,700	45,850	49,000	52,150
Iberville	19,500	22,250	25,050	27,800	30,050	32,250	34,500	36,700	31,150	35,600	40,050	44,500	48,100	51,650	55,200	58,750
Jackson	16,650	19,000	21,400	23,750	25,650	27,550	29,450	31,350	26,400	30,200	33,950	37,700	40,750	43,750	46,750	49,800
Jefferson	22,200	25,350	28,500	31,650	34,200	36,750	39,250	41,800	33,600	38,400	43,200	48,000	51,850	55,700	59,550	63,400
Jefferson Davis	18,350	21,000	23,600	26,200	28,300	30,400	32,500	34,600	29,950	34,200	38,500	42,750	46,200	49,600	53,050	56,450
La Salle	19,950	22,800	25,650	28,450	30,750	33,050	35,300	37,600	32,000	36,600	41,150	45,700	49,400	53,050	56,700	60,350
Lafayette	22,950	26,200	29,500	32,750	35,400	38,000	40,650	43,250	37,200	42,500	47,800	53,100	57,350	61,600	65,850	70,100
Lafourche	20,550	23,450	26,400	29,300	31,650	34,000	36,350	38,700	34,500	39,400	44,350	49,250	53,200	57,150	61,100	65,050
Lincoln	18,950	21,650	24,350	27,050	29,250	31,400	33,550	35,750	29,500	33,700	37,900	42,100	45,500	48,850	52,250	55,600
Livingston	23,800	27,200	30,600	33,950	36,700	39,400	42,100	44,850	36,350	41,550	46,750	51,900	56,100	60,250	64,400	68,550
Madison	16,550	18,900	21,250	23,600	25,500	27,400	29,300	31,200	26,250	30,000	33,750	37,500	40,500	43,500	46,500	49,500
Morehouse	16,550	18,900	21,250	23,600	25,500	27,400	29,300	31,200	26,250	30,000	33,750	37,500	40,500	43,500	46,500	49,500
Natchitoches	16,550	18,900	21,250	23,600	25,500	27,400	29,300	31,200	27,550	31,500	35,450	39,350	42,500	45,650	48,800	51,950
Orleans	22,200	25,350	28,500	31,650	34,200	36,750	39,250	41,800	33,600	38,400	43,200	48,000	51,850	55,700	59,550	63,400
Ouachita	18,450	21,050	23,700	26,300	28,450	30,550	32,650	34,750	29,150	33,300	37,450	41,600	44,950	48,300	51,600	54,950
Plaquemines	22,200	25,350	28,500	31,650	34,200	36,750	39,250	41,800	33,600	38,400	43,200	48,000	51,850	55,700	59,550	63,400



Pointe Coupee	23,800	27,200	30,600	33,950	36,700	39,400	42,100	44,850	36,350	41,550	46,750	51,900	56,100	60,250	64,400	68,550
Rapides	19,050	21,750	24,450	27,150	29,350	31,500	33,700	35,850	29,350	33,550	37,750	41,900	45,300	48,650	52,000	55,350
Red River	17,200	19,650	22,100	24,550	26,550	28,500	30,450	32,450	26,450	30,200	34,000	37,750	40,800	43,800	46,850	49,850
Richland	16,550	18,900	21,250	23,600	25,500	27,400	29,300	31,200	26,250	30,000	33,750	37,500	40,500	43,500	46,500	49,500
Sabine	17,500	20,000	22,500	24,950	26,950	28,950	30,950	32,950	26,950	30,800	34,650	38,500	41,600	44,700	47,750	50,850
St. Bernard	22,200	25,350	28,500	31,650	34,200	36,750	39,250	41,800	33,600	38,400	43,200	48,000	51,850	55,700	59,550	63,400
St. Charles	22,200	25,350	28,500	31,650	34,200	36,750	39,250	41,800	33,600	38,400	43,200	48,000	51,850	55,700	59,550	63,400
St. Helena	23,800	27,200	30,600	33,950	36,700	39,400	42,100	44,850	36,350	41,550	46,750	51,900	56,100	60,250	64,400	68,550
St. James	22,450	25,650	28,850	32,050	34,650	37,200	39,750	42,350	36,600	41,800	47,050	52,250	56,450	60,650	64,800	69,000
St. John the Baptist	22,200	25,350	28,500	31,650	34,200	36,750	39,250	41,800	33,600	38,400	43,200	48,000	51,850	55,700	59,550	63,400
St. Landry	16,550	18,900	21,250	23,600	25,500	27,400	29,300	31,200	26,250	30,000	33,750	37,500	40,500	43,500	46,500	49,500
St. Martin	22,950	26,200	29,500	32,750	35,400	38,000	40,650	43,250	37,200	42,500	47,800	53,100	57,350	61,600	65,850	70,100
St. Mary	18,000	20,550	23,100	25,650	27,750	29,800	31,850	33,900	28,000	32,000	36,000	40,000	43,200	46,400	49,600	52,800
St. Tammany	22,200	25,350	28,500	31,650	34,200	36,750	39,250	41,800	33,600	38,400	43,200	48,000	51,850	55,700	59,550	63,400
Tangipahoa	19,250	22,000	24,750	27,500	29,700	31,900	34,100	36,300	28,800	32,900	37,000	41,100	44,400	47,700	51,000	54,300
Tensas	16,550	18,900	21,250	23,600	25,500	27,400	29,300	31,200	26,250	30,000	33,750	37,500	40,500	43,500	46,500	49,500
Terrebonne	20,550	23,450	26,400	29,300	31,650	34,000	36,350	38,700	34,500	39,400	44,350	49,250	53,200	57,150	61,100	65,050
Union	18,450	21,050	23,700	26,300	28,450	30,550	32,650	34,750	29,150	33,300	37,450	41,600	44,950	48,300	51,600	54,950
Vermilion	20,700	23,650	26,600	29,550	31,950	34,300	36,650	39,050	31,450	35,950	40,450	44,900	48,500	52,100	55,700	59,300
Vernon	18,800	21,500	24,200	26,850	29,000	31,150	33,300	35,450	29,750	34,000	38,250	42,500	45,900	49,300	52,700	56,100
Washington	16,550	18,900	21,250	23,600	25,500	27,400	29,300	31,200	26,250	30,000	33,750	37,500	40,500	43,500	46,500	49,500
Webster	16,550	18,900	21,250	23,600	25,500	27,400	29,300	31,200	26,250	30,000	33,750	37,500	40,500	43,500	46,500	49,500
West Baton Rouge	23,800	27,200	30,600	33,950	36,700	39,400	42,100	44,850	36,350	41,550	46,750	51,900	56,100	60,250	64,400	68,550
West Carroll	16,550	18,900	21,250	23,600	25,500	27,400	29,300	31,200	26,250	30,000	33,750	37,500	40,500	43,500	46,500	49,500
West Feliciana	23,800	27,200	30,600	33,950	36,700	39,400	42,100	44,850	36,350	41,550	46,750	51,900	56,100	60,250	64,400	68,550
Winn	16,550	18,900	21,250	23,600	25,500	27,400	29,300	31,200	26,250	30,000	33,750	37,500	40,500	43,500	46,500	49,500



# 29. Authorization to Release Insurance Information

Business Name:		
Federal Tax ID #		
I	hereby authorize _	to release
any insurance data in my file(s) th	nat provides details	on insurance coverage or claim for the 2016
March or August floods in Louisia	na to the Office of (	Community Development Disaster Recovery
Unit. This data will be used to as:	sist in eligibility veri	ification for the Restore Louisiana Small
Business Program.		
Signature		Date
Signature		 Date



# 30. Required Documentation Checklist

Businesses wishing to participate in the Restore Louisiana Small Business Program must provide the following documentation in order to be considered for the program:

## ☐ Completed application

A completed application including but not limited to:

- Company background and history
- Ownership information
- Personal and/or business competences and capabilities necessary to achieve project success and completion
- Description of the types of eligible expenses the award will be used on
- Detailed description of direct jobs that will be created or retained during the first year of the loan agreement

# ☐ Business Development Plan

Businesses may be required at the Subrecipient's discretion to provide a business development plan and pro-forma. All businesses which have not reopened at the time of application and who wish to use Program funds to assist with reopening the business must provide a business development plan and pro-forma.

## ☐ Business Tax Returns

Signed federal business tax returns for the business including all schedules for the most three (3) recent years. If the business is a sole proprietorship, a single member limited liability entity, a partnership, or a limited liability company taxed as a partnership, the business owners must submit the three most recent years of signed personal tax returns.

#### ☐ Business Owner Tax Returns

Signed federal personal tax returns for all principal owners (greater than 20% ownership) for most recent three (3) years.

# ☐ Financial Statements

Interim financial statements for the most recent two (2) quarterly periods and the interim financial statements for the same two quarterly periods from the year prior to the flood event, if requested.

## ☐ Business Structure

Businesses must demonstrate how they are structured and/or owned. Acceptable documentation should state the structure (LLC, partnership, corporation, etc.) and list the owners, if applicable.

## $\square$ Proof of Ownership (all owners with > 20% share)

Businesses must demonstrate ownership for all individuals with 20% or greater ownership share in the business. This can be demonstrated with business tax return (with appropriate schedules), Personal Tax return (with appropriate schedules), or stock certificates with proof of total number of shares, as appropriate based on the business ownership structure.

#### ☐ Owner Identification

All business owners with an ownership share at or over 20% are required to provide a copy of their valid US or state government-issued photo identification such as a passport, driver's license, non-driver ID card, or military ID.

# ☐ Business Operating Address

Proof must be provided of where the business was located at the time of the 2016 flooding. If the business has reopened and relocated, proof of the new operating location must be provided as well. Acceptable proof of operating address includes utility bills, lease agreements, business tax returns, or business licenses.

#### ☐ Proof Business Began Operations Prior to 2016 Flooding

The business must demonstrate that it was operational prior to and at the time of the applicable flood event. Acceptable documentation includes the "date of incorporation" on corporate tax returns, any federal business tax return prior to 2016, or a business/occupational license issued prior to the disaster. Articles of Organization or Incorporation and the Louisiana Secretary of State website is not sufficient proof of operations prior to the flood but may be provided as supporting documentation.

# ☐ Gross Revenue Prior to 2016 Flooding

Businesses must provide proof of gross revenue from 2015 or 2016. Gross revenue from businesses that opened during 2015 or pre-storm/flood in 2016 will be annualized to determine their prorated gross revenue. Acceptable proof of gross revenue includes: Federal tax form 1120 (corporations); Federal tax form 1040 Schedule C (sole proprietorships); Schedule F (farmers); Federal tax form 1065 (partnerships); Federal tax form 990 (tax-exempt organizations).

# ☐ Number of Employees

Businesses must demonstrate the number of individuals they employ. Acceptable documentation includes Federal Form 941 (Employer's Quarterly Federal Tax Return), Louisiana unemployment tax form, payroll forms (e.g., paychecks), and signed internal payroll registers. In addition, businesses must complete LMI Certification forms as required by the program.

#### ☐ Business Insurance & Other Assistance

If the business had hazard insurance covering business property and/or operations, documentation of the policy and claims must be provided. Documentation must include the insurance provider's contact information, policy coverage information and ID, and claims information including amounts received and approved. In addition to insurance, the business must provide information on any other potential duplicative assistance received.

## ☐ Proof of Qualifying Loss

Businesses must have incurred either financial or physical damage in order to qualify for assistance. Financial loss must be demonstrated with complete, signed 2015 and 2016 tax returns. Physical damage must be demonstrated with insurance loss reports/claims, SBA Verified Loss reports, receipts for replacement equipment/materials/merchandise, or casualty loss reported on 2016 tax returns. Photographs of damage may be used only as supporting evidence.

## ☐ Proof of Operational Status at Time of Application

Businesses must provide documentation that they are currently open. Acceptable documentation includes any business tax return from 2016 reflecting revenue earned, post-flood sales receipts, or post-flood sales tax returns. This requirement can also be satisfied by a site visit by the subrecipient.

If the business is closed at the time of application and plans to reopen with assistance from the Program, additional documentation is required. The business must provide a business plan and a



pro-forma. Any funds identified in the pro-forma required to reopen the business must be substantiated with proof of availability (e.g., loan approval letter, bank funds verification). The business will be leasing space to reopen, a copy of the lease must be provided.

# ☐ <u>Loan Request Documentation</u>

The business must provide supporting documentation for the items requested in the loan application. The documentation requirements for working capital requests are as follows:

- Rent/Mortgage: executed Lease/Mortgage or proof of payment
- Employee Wages: certified payroll registers or employee reporting forms
- Electricity, Water and Gas Utilities: utility Service Provider Bills
- Monthly inventory Bills

If the business is requesting assistance for purchasing movable goods, the business must provide documentation, invoices and/or receipts with adequate description to determine the nature of the equipment and the installation requirements associated with making the equipment usable. If the requested equipment is replacement for equipment damaged or destroyed by the floods, then the applicant business must provide verification of loss or damage (which may include pictures). If the requested equipment is necessary for the business to reopen and/or remain viable in the post-storm economy, the applicant business must provide justification for the new piece of equipment.

# ☐ LMI Forms

Businesses must submit the applicable LMI forms as part of their application. The business LMI form is included in the application document, but the household LMI is not. The lending agency will provide the household LMI form (specific to the applicant's parish of domicile) and assist in its completion.



# \*\*\* For Office Use Only \*\*\* Certification of Receipt

Application Submitted by:
Business/Company Name:
Application Received by:
Organization:
Signature:
Date:
Application Complete?
□ Yes
□ No
If no, what items or edits are missing from the application?
Date and time applicant was made aware of this information: