

CalCAP Use Only	CalCAP Loan #
	Date Received

CalCAP LOAN ENROLLMENT APPLICATION

Lender Information

Participating Lender _____ Lender ID# _____
 Loan Contact Name _____ Contact Phone _____
 Loan Contact Email _____

Borrower Information

Name _____ DBA _____
 Address _____ City _____ County _____ Zip _____
 Type of Business/Activities _____ What year was the business incorporated or opened? _____
 Annual Revenues Last Fiscal Year \$ _____ Average Annual Revenue Last 3 Years \$ _____
 Number of Employees _____ Number of Full Time Equivalents _____ Jobs created _____ Jobs retained _____
 Is business located in a Severely Affected Community? No Yes
 If Yes, select reason: City Unincorporated County if City Not Listed Other: _____
 Will loan monies be used at above address? Yes No If *no*, location where loan will be used:
 Address _____ City _____ County _____ Zip _____
 NAICS Code _____ Census Tract # _____
<http://www.census.gov/eos/www/naics/> <http://www.ffiec.gov/Geocode/default.aspx>
 Purpose of Loan _____
 Is business minority owned? Yes No Decline to Answer Is business woman owned? Yes No Decline to Answer
 Is business veteran owned? Yes No Decline to Answer

Loan Information

Is this loan enrolled in any other government guarantee program? Yes No If Yes, name the program: _____
 What percent of loan is enrolled in other program? _____% What percentage of loan is being enrolled in CalCAP? _____%
 Lender Loan Number _____ Type of Loan: Line of Credit Term Loan
 Total Loan Amount \$ _____ Loan Amount Enrolled in CalCAP \$ _____
 Date of First Disbursement (Date of Loan) _____ Maturity Date _____
 Interest Rate _____% Fixed Variable Is the loan secured? Yes No
 Is this loan a restructure of a prior CalCAP Loan? Yes No If Yes, provide the CalCAP Loan # _____
 Remaining balance on loan being restructured: \$ _____ Amount of increase requested: \$ _____
 Borrower Fee \$ _____ % Lender Fee \$ _____ %
 Is an Independent Contributor being used to pay the fees? Yes No If yes, Name of Contributor Program _____