

Office Location:  
 801 Capitol Mall, 2<sup>nd</sup> Floor  
 Sacramento, CA 95814

<b>CalCAP Use Only</b>	CalCAP Loan #
	Date Received

### CALCAP SEISMIC SAFETY FINANCING PROGRAM LOAN ENROLLMENT APPLICATION

**Lender Information**

Participating Lender \_\_\_\_\_ Lender ID# \_\_\_\_\_  
 Loan Contact Name \_\_\_\_\_ Contact Phone \_\_\_\_\_  
 Loan Contact Email \_\_\_\_\_

**Borrower Information**

Small Business       Residential Property Owner       Commercial Property Owner

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ Zip \_\_\_\_\_

Is the building certified by the local building code enforcement authority as a Qualified Building?  No  Yes

Is building located in a Severely Affected Community?  No  Yes

If Yes, select reason:  City  Unincorporated  County if City Not Listed  Other: \_\_\_\_\_

Address of building to be retrofitted: \_\_\_\_\_

Type of Qualified Building:  Commercial  Residential  Registered Mobilehome  Multi-Unit-Dwelling: (If yes, Number of Units \_\_\_\_\_)

Description of Eligible Costs \_\_\_\_\_

Are any proceeds to be used for purposes other than seismic safety?  Yes  No If yes, amount \$ \_\_\_\_\_

**If Borrower is a Small Business, the following information is also required:**

Business DBA: \_\_\_\_\_ Name of Responsible Person: \_\_\_\_\_ Title: \_\_\_\_\_

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 Full Time Equivalents/Employees \_\_\_\_\_

NAICS Code \_\_\_\_\_ Census Tract # \_\_\_\_\_  
<http://www.census.gov/eos/www/naics/>      <http://www.ffiec.gov/Geocode/default.aspx>

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: \_\_\_\_\_

Is the Eligible Project receiving any grant funding by a public entity?  Yes  No If yes, Name of Public Entity: \_\_\_\_\_

Lender Loan Number \_\_\_\_\_ Type of Loan: \_\_\_\_\_

Total Loan Amount \$ \_\_\_\_\_ Loan Amount Enrolled in CalCAP/Seismic \$ \_\_\_\_\_

Purpose of Loan \_\_\_\_\_ Loan Amount Enrolled in CalCAP for Small Business/ State Fund (if any) \$ \_\_\_\_\_

Date of First Disbursement (Date of Loan) \_\_\_\_\_ Maturity Date \_\_\_\_\_ End of Coverage  5 year  10 year

Interest Rate \_\_\_\_\_%  Fixed  Variable Is the loan secured?  Yes  No

Borrower Fee \$ \_\_\_\_\_ % Lender Fee \$ \_\_\_\_\_ %