Covid 19 Rapid Intake Web Application Form



For COVID Economic Injury Disaster Loan (EIDL) and EIDL Advance



Loan Facts & Requirements

Small businesses and non-profit organizations of any size affected by COVID-19 may apply for an Economic Injury Disaster Loan (EIDL)

- ⇒ Any business with 500 or fewer employees that was in operation before February 1, 2020, is eligible
- ⇒ Businesses with > than 500 employees that are considered small under SBA's size standards and in operation before February 1, 2020 are also eligible
- ⇒ Faith Based entities that provide secular social services to the general public are eligible

Application deadline runs from 01/31/20 to 12/31/20

- ⇒ Loan amounts of up to \$2 million
- ⇒ Terms up to 30 years
- ⇒ Interest rate for for-profit companies: 3.75%; non-profits: 2.75%
- ⇒ Proceeds may be used for working capital, including:
 - Payroll costs, salaries and sick leave
 - Rent or mortgage payments
 - Material costs
 - Preexisting debt

Document Requirements

- Minimal documents
- Lower credit



Loan FAQs

Q: Is my business eligible to apply?

A: Any business that is affected by COVID-19, has 500 or fewer employees and was in operation before February 1, 2020, is eligible to apply. Businesses with more than 500 employees that are considered small under SBA's size standards and in operation before February 1, 2020 are also eligible.

Sole proprietors and independent contractors are also eligible.

Nonprofits of any size are eligible, including faith-based organizations that provide secular social services to the general public (e.g., childcare services, housing and shelter services, and prepared and unprepared food distribution services).

Q: What is the most amount of money my business or organization may receive?

A: You may receive a loan for up \$2 million. The amount of the loan will depend on a variety of factors. (i.e., loss in revenue, payroll costs, rent payments, etc.). Most loans of up to \$500,000 will be processed using a mostly automated application and funds should be delivered within a week or two of submission.

Q: What is the interest rate?

A: For-profit companies: 3.75% Non-profit companies: 2.75%

Q: What is the term of the loan?

A: The loan terms are up to 30 years.

Q: What can I use the loan proceeds for?

A: You may use the loan proceeds to meet ordinary and necessary financial obligations that cannot be met as a direct result of the disaster, including payroll costs, salaries, sick leave, rent or mortgage payments, material costs, and pre-existing debt.

Q: Is there a personal guarantee?

A: There are no personal guarantees for loans \$200,000 or less.

Personal guarantees are required for loans >\$200,000

Q: Is collateral required?

A: No collateral is required for loans of \$25,000 or less.

Collateral is required for loans over \$25,000; however, there is no real estate collateral required. A blanket UCC-1 will be filed against all of the business collateral.

Q: What information is the SBA using to underwrite the loan?

A: SBA will approve loans based on the information in the application and a credit score.

Q: When does repayment start?

A: Repayment starts 12 months from the date of the note.

Q: Is there a fee to apply?

A: For loans of \$25,000 or less, there are no application or processing fees. For all loans greater than \$25,000, there will be a \$100 UCC lien filing and processing fee added to the amount of the loan. There are no other fees.





Advance Facts & Requirements

- Applicants are eligible for an advance of up to \$10,000 that may be requested immediately
- No requirement to repay advance, even if denied for a disaster loan
- If someone has already submitted an EIDL application, they must reapply using the new streamlined application and check the box for the advance as well because the advance was not previously available.

Document Requirements

• No documents required



Advance FAQs

Q: What is the EIDL Advance?

A: Applicants may request an advance of up to \$10,000 that may be requested immediately. There is no requirement to repay the advance even if your SBA Disaster Loan application is declined. You must request the advance of the funds by submitting the new streamlined application, even if you have already submitted a Disaster Loan application.

Q: Who is eligible for the emergency advance?

A: Any entity that is eligible to apply for a COVID-19 Economic Injury Disaster Loan.

Q: What can I use the emergency advance for?

A: Working capital to meet ordinary and necessary financial obligations that cannot be met as a direct result of the disaster, including payroll costs, salaries, sick leave, rent or mortgage payments, material costs, and pre-existing debt.

Q: How long do I have to apply for the advance?

A: The program ends on December 31, 2020.



Step 1– Disclosures

1. In your browser, go to: covid19relief.sba.gov

Home Page



OMB Control #3247-0406 Expiration Date: 09/30/2020

Disaster Loan Assistance

Federal Disaster Loans for Businesses, Private Non-profits, Homeowners and Renters

COVID-19 ECONOMIC INJURY DISASTER LOAN APPLICATION



STREAMLINED PROCESS REQUIREMENTS

SBA is collecting the requested information in order to make a loan under SBA's Economic Injury Disaster Loan Program to the qualified entities listed in this application that are impacted by the Coronavirus (COVID-19). The information will be used in determining whether the applicant is eligible for an economic injury loan. If you do not submit all the information requested, your loan cannot be fully processed.

The Applicant understands that the SBA is relying upon the self-certifications contained in this application to verify that the Applicant is an eligible entity to receive the advance, and that the Applicant is providing this self-certification under penalty of perjury pursuant to 28 U.S.C. 1746 for verification purposes.

The estimated time for completing this entire application is two hours and ten minutes, although you may not need to complete all parts. You are not required to respond to this collection of information unless it displays a currently valid OMB approval number.

2. Click box for most accurate applicant description

ELIGIBLE ENTITY VERIFICATION

Choose One: Applicant is a business with not more than 500 employees. Applicant is an individual who operates under a sole proprietorship, with or without employees, or as an independent contractor. Applicant is a cooperative with not more than 500 employees. Applicant is an Employee Stock Ownership Plan (ESOP), as defined in 15 U.S.C. 632, with not more than 500 employees. Applicant is a tribal small business concern, as described in 15 U.S.C. 657a(b)(2)(C), with not more than 500 employees. Applicant is a business, including an agricultural cooperative, aquaculture enterprise, nursery, or producer cooperative, that is small under SBA Size Standards found at https://www.sba.gov/document/support--table-size-standards/. Applicant is a business with more than 500 employees that is small under SBA Size Standards found at https://www.sba.gov/document/support--table-size-standards/. Applicant is a private non-profit organization that is a non-governmental agency or entity that currently has an effective ruling letter from the IRS granting tax exemption under sections 501(c),(d), or (e) of the Internal Revenue Code of 1954, or satisfactory evidence from the State that the non-revenue producing organization or entity is a non-profit one organized or doing business under State law, or a faith-based organization.



Step 1- Disclosures

3. Review and check ALL boxes to verify eligibility and Click Continue. All sidebars must be green to continue.

Review and Check All of the Following:

Applicant must review and check all the following (If Applicant is unable to check all of the following, Applicant is not an Eligible Entity):

- Applicant is not engaged in any illegal activity (as defined by Federal guidelines).
- 🗸 No principal of the Applicant with a 50 percent or greater ownership interest is more than sixty (60) days delinquent on child support obligations.
- 🗹 Applicant is not an agricultural enterprise (e.g., farm), other than an aquaculture enterprise, agricultural cooperative, or nursery.
- Applicant does not present live performances of a prurient sexual nature or derive directly or indirectly more than de minimis gross revenue through the sale of products or services, or the presentation of any depictions or displays, of a prurient sexual nature.
- Applicant does not derive more than one-third of gross annual revenue from legal gambling activities.
- Applicant is not in the business of lobbying.
- Applicant cannot be a state, local, or municipal government entity and cannot be a member of Congress.

If you have questions about this application or problems providing the required information, please contact our Customer Service Center at 1-800-659-2955 or (TTY: 1-800-877-8339) DisasterCustomerService@sba.gov.

Continue >



Step 2– Business Information

4. Complete Business Information Section and click Continue. All sidebars must be green to continue.

DISCLOSURES	BUSINESS INFORMATION	BUSINESS OWNERS INFORMATION	ADDITIONAL INFORMATION	SUMMARY
Step 1 of 3 Business Informatio	on			
Business Legal Name *				
Trade Name *				
FIN/COM for Colo Promission while *				
EIN/SSN for Sole Proprietorship *				
Organization Type*				•
Is the Applicant a Non-Profit Orga	nization?*			
Yes No Is the Applicant a Franchise? *				
Yes No				





Step 2– Business Information

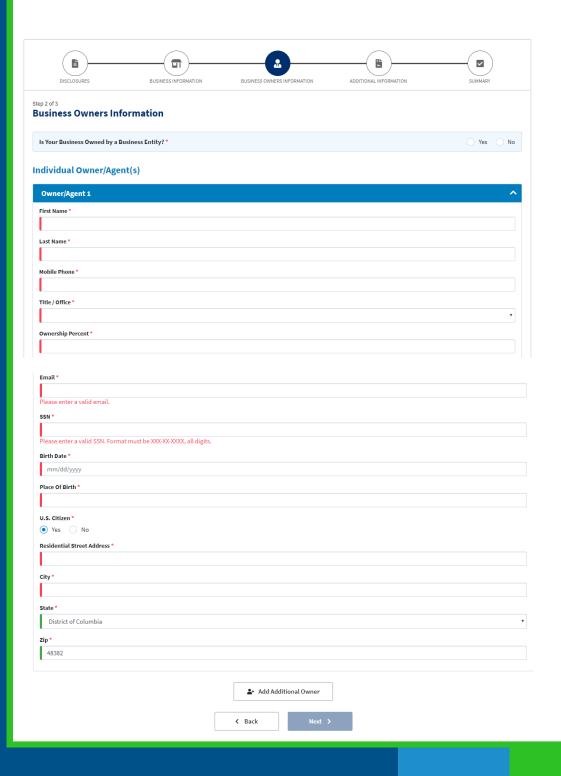
Is the Applicant a Non-Profit Organization? *
○ Yes ○ No
Is the Applicant a Franchise? *
○ Yes ○ No
Gross Revenues for the Twelve(12) Month Prior to the Date of the Disaster (January 31, 2020) *
Cost of Goods Sold for the Twelve(12) Month Prior to the Date of the Disaster (January 31, 2020) *
Routed Brown and to (Bright and all and Brown and all Brown to the Brown to the Brown to
Rental Properties (Residential and Commercial) Only - Lost Rents Due to the Disaster
Non-Profit Cost of Operation for the Twelve(12) Month Prior to the Date of the Disaster (January 31, 2020)
Combined Annual Operating Expenses for the Twelve(12) Months Prior to the Date of the Disaster (January 31, 2020) for All Secular Social Services Provided by the Faith Based Entity
List the Secular Social Services Provided by the Faith Based Entity
Compensation From Other Sources Received as a Result of the Disaster
Provide Brief Description of Other Compensation Sources
Primary Business Address (Cannot be P.O. Box)
City*
State *
oute.
County
zip *
Business Phone *
Alternative Business Phone
ARCHINET COUNTY TO THE COUNTY
Business Fax
Business Email *
Date Business Established *
mm/dd/yyyy
Current Ownership Since *
mm/dd/yyyy
Business Activity*
· ·
Detailed Business Activity*
Number of Employees (As of January 31, 2020) *
. , , ,,,,
Next >



Step 3- Business Owner Information

- 5. Complete Business Owner Information and click Continue. All sidebars must be green to continue.
- 5b. If there is more than 1 owner click Add Additional Owner and complete.







Step –4 Additional Information

6. Complete Additional Information section and click Next.

	DISCLOSURES	BUSINESS INFORMATION	BUSINESS OWNERS INFORMATION	ADDITIONAL INFORMATION	SUMMARY)
Step 3	of 3 itional Information					
oth				n connection with a riot or civil disorder or is been determined to be obscene by a court of	○ Yes	O No
Is th	e applicant or any listed owner cur	rently suspended or debarred f	from contracting with the Federal governr	nent or receiving Federal grants or loans?	Yes	O No
	a. Are you presently subject to an indictment, criminal information, arraignment, or other means by which formal criminal charges are brought in any jurisdiction?			Yes	O No	
Ь. Н	ave you been arrested in the past si	ix months for any criminal offer	nse?			
	or any criminal offense - other than rsion, or been placed on any form o			ead nolo contendere, been placed on pretrial		

7. If anyone assisted you in completing this application, whether you pay a fee for this service or not, that person must enter their information below.

If anyone assisted you in completing this application, whether you pay a fee for this service or not, that person must enter their information below.		
Individual Name		
Name of Company		
Phone Number		
Street Address, City, State, Zip		
ee Charged or Agreed Upon		
I give permission for SBA to discuss any portion of this application with the representative listed above.	○ Yes ○ No	



Step -4 Additional Information

Step -4 Additional information			
8. Make sure every person clicks the box below to apply for the 7b Advance			
I would like to be considered for an advance of up to \$10,000.			
9. Provide Bank information so funds may be dispersed.			
Where to Send Funds			
Bank Name *			
Account Number *			
Routing Number *			
10. Certify true and correct information is being submitted by checking the box and click Next. On behalf of the individual owners identified in this application and for the business applying for the loan:			
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 and for the SBA to obtain credit information about the individuals completing 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.			
✓ I hereby certify UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE UNITED STATES that the above is true and correct.			
Click for additional statements required by laws and executive orders			



Step –5 View Summary and Submit

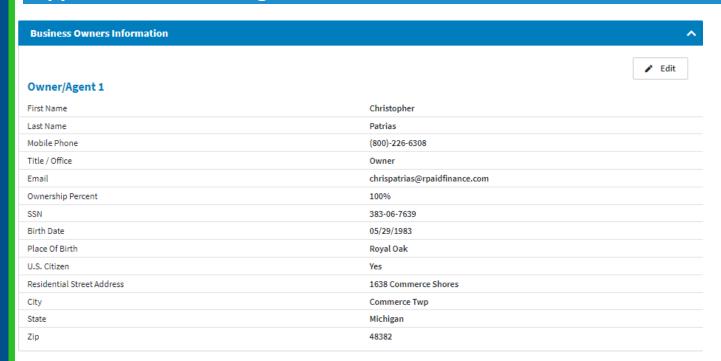
11. Review Summary for accuracy.

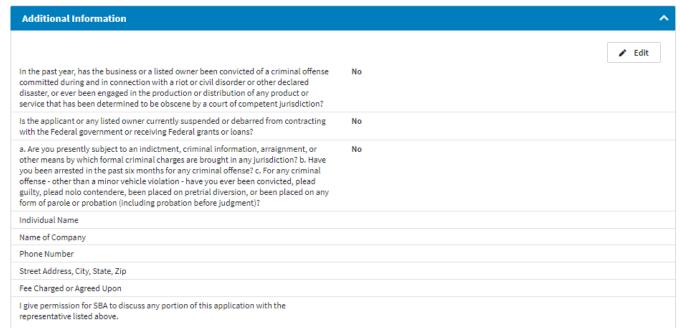


Business Information	^
Business Legal Name	Test
Trade Name	Tester.inc
EIN/SSN for Sole Proprietorship	79-4433666
Organization Type	Limited Liability Company
Is the Applicant a Non-Profit Organization?n	
Is the Applicant a Franchise?	No
Gross Revenues for the Twelve(12) Month Prior to the Date of the Disaster (January 31, 2020)	\$600,000.00
Cost of Goods Sold for the Twelve(12) Month Prior to the Date of the Disaster (January 31, 2020)	\$800,000.00
Rental Properties (Residential and Commercial) Only - Lost Rents Due to the Disaster	\$0.00
Non-Profit Cost of Operation for the Twelve(12) Month Prior to the Date of the Disaster (January 31, 2020)	\$0.00
Combined Annual Operating Expenses for the Twelve(12) Months Prior to the Date of the Disaster (January 31, 2020) for All Secular Social Services Provided by the Faith Based Entity	\$0.00
List the Secular Social Services Provided by the Faith Based Entity	n/a
Compensation From Other Sources Received as a Result of the Disaster	0
Provide Brief Description of Other Compensation Sources	n/a
Primary Business Address (Cannot Be P.O. Box)	123 Main
City	Detroit
State	Michigan
County	Wayne
ZIP	48226
Business Phone	(800)-226-6308
Alternative Business Phone	
Business Fax	
Business Email	chrispatrias@rapidfinance.com
Date Business Established	05/01/2005
Current Ownership Since	05/01/2005
Business Activity	Eating & Drinking Places
Business Sub Activity	Bar
Number of Employees (As of January 31, 2020)	40



Application Walkthrough





12. Click to verify you are not a robot and click Submit





Application Walkthrough

13. Receive confirmation of submitted application and reference number.



OMB Control #3247-0406 Expiration Date: 09/30/2020

Disaster Loan Assistance

Federal Disaster Loans for Businesses, Private Non-profits, Homeowners and Renters

COVID-19 ECONOMIC INJURY DISASTER LOAN APPLICATION

Application Submitted

Your reference number is

330000007

You will be notified through the email address you submitted **chrispatrias@rpaidfinance.com** for any additional information needed once your application has been processed.