**The Crawford Partnership**  
**Crawford County Small Business Emergency Loan Fund**

What is the Crawford County Small Business Emergency Loan Fund:

For-profit, small business emergency loan  
Maximum amount $10,000  
0% interest  
Short-term loans: 1 to 3 years  
Deferred payments available  
Proceeds intended to be used for operating expenses such as inventory, utilities, etc.

What Businesses are Eligible:

Businesses with 3 to 25 employees  
Business must be located in Crawford County  
Business MUST have applied to the SBA for a COVID-19/pandemic related relief program  
Business must demonstrate need due to COVID-19/pandemic

Complete the Application and Submit To:

Application included below  
Application fee is 3% of loan balance, application fee of 3% of loan balance due upon approval  
Made Payable to: Crawford Partnership  
Application submitted to: Gary Frankhouse, Executive & Economic Development Director  
garyf@crawfordpartnership.org

Inquiries and Questions:

The Crawford Partnership  
Physical & Mailing Address: 117 East Mansfield Street, Bucyrus, OH 44820  
Phone: 419. 563. 1809  
Email: partnership@crawfordpartnership.org

This program is made available as a result of a joint initiative with:

05.2020
The Crawford Partnership
Crawford County Small Business Emergency Loan Fund
Application

Business Information:
Legal Business Name: ________________________________________________________________
D/B/A: _____________________________________________________________________________
Social Security Number: _________________________  Tax ID Number: ______________________________
My business is located in Crawford County:     Yes ________  No ________
Business Address: ___________________________________________________________________________
Business Phone: ___________________________________________________________________________
Type of Business: _________________________________________________________________________
Business Established Date: ________________________________________________________________

Owner Information:
Owner Name(s): _________________________________________________________________________
Personal Address(es): ______________________________________________________________________
____________________________________________________________________________________
Owner’s Email: ___________________________________________________________________________
Owner’s Cell Phone: _______________________________________________________________________

Finances:
Most Recent Interim Sales: __________________________________________________________________
Most Recent Interim Net Profit/(Loss): __________________________________________________________
Last Fiscal Year Net Profit/(Loss): _____________________________________________________________
Last Fiscal Year Sales: _______________________________________________________________________
Are you currently in receivership or bankruptcy?   Yes ___________         No _____________
If yes, which: ___________________________________________________________________________

Employees:
Employment level as of 12/31/2019: Full Time _____________________ Part Time ___________________
Loan Request:

Requested Loan Amount: ____________________________________________

Loan Term Requested: 1 Year _________ 2 Years _________ 3 Years _________

Loan Term Deferral Requested (months):

__________________________________________________________

SBA Relief Programs & Economic Impact:

Has your business applied for any of the SBA’s COVID-19 related relief programs? Yes ____ No ____

If yes, which programs and how much: __________________________________________________________

How has the current economic condition affected your business? (Feel free to use more space.)

________________________________________________________________________________________________

________________________________________________________________________________________________

________________________________________________________________________________________________

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________________________________________________________________________________________________

Required Documentation:

1.) Most recent Profit and Loss Statement for the business

2.) Most recent Balance Sheet for the business

3.) Most recent tax return for the business

The undersigned affirms that he/she is an authorized agent for said business and attests that the information provided is true and accurate to the best of his or her knowledge.

Signature: _______________________________ Date: ______________________________

Printed Name: _________________________________________________________________________

Signature: _______________________________ Date: ______________________________

Printed Name: _________________________________________________________________________