

APPLICATION FOR STARTUPS

To help us determine the most appropriate financing program for your business, please complete the information requested below.

Contact Information

1. Full Name
2. Address
3. Email
4. Phone Number

Business Information

1. **Business Name & Description**
Please provide a brief overview of your business, including core products/services and any relevant contact information.
2. **Do you have a formal business plan?**
☐ Yes
☐ No
3. **Estimated Annual Revenue:**
(An estimate is acceptable. Financial documentation may be requested at a later stage.)
4. **How long has the business been operating?**
(Please specify in months or years.)
5. **Requested Financing Amount:**
(Enter the dollar amount you are seeking.)
6. **Proposed Use of Funds:**
(Please describe how the requested funds will be used if approved.)
7. **Collateral (if applicable):**
If requesting more than \$10,000, does the business have collateral available?
☐ Yes – Please describe:
☐ No