



Chippewa County's COVID 19 Business Assistance Disaster Relief Loan Program was established as a resource for Chippewa County service sector businesses experiencing unanticipated financial pressures due to the COVID 19 pandemic. This fund is designed to work in concert with other federal, state, and regional financial assistance programs where possible. The fund is intended to sustain what otherwise were healthy businesses through this unprecedented period of economic disruption.

PROGRAM TERMS

Individual loan amounts: \$5,000-\$10,000

- 1.5% interest rate
- 3-5 year term; determined on a case-by-case basis
- No interest and no payments for at least one year
- No prepayment penalties
- Owner Guarantees

ELIGIBLE CRITERIA

- Business has a physical location in Chippewa County
- Business has been adversely impacted by COVID-19
- Property owner must be current on property taxes & special assessments
- Business must have no more than 10 employees

ELIGIBLE USE of FUNDS

Working Capital including but not limited to;

- Rent/Mortgage
- Commercial Utilities
- Pre-existing purchase orders (placed prior to 4/15)
- Payroll expenses
- Modifications and/or upgrades related to adjusting business practices due to COVID-19

Additional information contact

Charlie Walker- Chippewa County Economic Development Corporation at (715) 723-7150 ccedc@chippewa-wi.com
or Tobi LeMahieu-RBF,inc tlemahieu@wcwrpc.org



COVID 19 Disaster Loan Application

Applicant's Name and Contact Information

Date of Submission: _____

Company Name: _____ Date Established: _____

Type of Company/Organization: ☐ LLC ☐ LLP ☐ Partnership ☐ S Corporation ☐ C Corporation
☐ Sole Proprietorship ☐ Non-Profit Organization

Company Mailing Address: _____

Project Address (If Different): _____

Contact Person: _____ Title: _____

Contact's Address: _____

Telephone Number: _____ Tax ID #: _____

Email Address _____ Website: _____

County District #: _____

Management Information (owner(s), officer(s), director(s), & shareholder(s) who own 20% or more shares of the company)*

Name	Title	% Ownership	Minority Owner	Woman Owner	Veteran Owner
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

***Personal financial statements** and **tax returns** are required for those with 20% or greater ownership interest. The Regional Business Fund, Inc. and/or its agents reserve the right to obtain **credit bureaus** on any business or individual in connection with this application.

Bank Information

Name of Lead Bank and Contact Person: _____

Phone Number: _____ E-mail Address: _____



Loan Amount and Terms Requested

Amount of Loan: _____

Use of Funds: _____

Repayment Terms: _____

Conflict of interest: Do you, your spouse, any member of your household, or anyone who owns, manages, or directs your business, or their spouses, or members of their households work for Chippewa County or hold an official position with the County? Yes No

Demonstrate why Chippewa County COVID 19 Business Assistance Loan is needed: (please attach additional page if more space is needed)

EMPLOYEE INFORMATION and JOB RETENTION

Number of Existing Employees			
Full Time	Part Time	Women	Minorities

Projected Job Creation				
Year One		Year Two		Total Created
Full Time	Part Time	Full Time	Part Time	

Please Answer the Following Questions (Check box that applies)

	YES	NO
Has the company, any officer, subsidiary or affiliate of your company been involved in any bankruptcy or insolvency proceedings in the last 36 months? <i>If yes, please provide the details as a separate exhibit.</i>	<input type="checkbox"/>	<input type="checkbox"/>
Has the company, any officer, subsidiary or affiliate of your company been involved in any lawsuits in the last 36 months? <i>If yes, please provide the details as a separate exhibit.</i>	<input type="checkbox"/>	<input type="checkbox"/>
Does the company, any officer, subsidiary or affiliate have any outstanding tax liens?	<input type="checkbox"/>	<input type="checkbox"/>
Does the company, owner(s), or member of Management Team have a controlling interest in other businesses? <i>If yes, please provide their names and relationship with your company along with a current balance sheet and income statement for each as a separate exhibit.</i>	<input type="checkbox"/>	<input type="checkbox"/>
Does your company buy from, sell to, or use the services of any concern in which owner(s), shareholder(s) or member(s) of the management team have a significant financial interest? <i>If yes, please provide the details as a separate exhibit.</i>	<input type="checkbox"/>	<input type="checkbox"/>
Are any of the individuals listed under "Management" on parole or probation? <i>If yes, please provide the details as a separate exhibit.</i>	<input type="checkbox"/>	<input type="checkbox"/>



1. Certifies that to the best of the applicant's knowledge and belief, the information being submitted to RBF, Inc and CCEDC as part of the Chippewa County COVID 19 Business Assistance Loan Program application is true and correct.
2. Certifies that the request for a loan from the Chippewa County COVID 19 Business Assistance loan fund is purely due to events resulting from the COVID-19 pandemic. It is not due to events unrelated to the pandemic.
3. Certifies that the applicant is in compliance with all laws, regulations, ordinances, and orders of public authorities applicable to it.
4. Certifies that the applicant is not in default under the terms and conditions of any grant or loan agreements, leases, or financing arrangements with its other creditors.
5. Certifies that Chippewa County COVID 19 Business Assistance Loan Committee, CCEDC, and RBF, Inc is authorized to obtain background checks, including a credit check on the applicant, the business, and/or the individual(s).
6. Certifies that the applicant has disclosed and will continue to disclose any occurrence or event that could have an adverse material impact on the project. Adverse material impact includes but is not limited to lawsuits, criminal or civil actions, bankruptcy proceedings, regulatory intervention, or inadequate capital to complete the project.
7. Understands submitting false or misleading information in connection with an application may result in the applicant being found ineligible for financial assistance under the funding program, and the applicant or its representative may be subject to civil and/or criminal prosecution.
8. Understands that unless it qualifies as a trade secret, all information submitted to Chippewa County or RBF, Inc. is subject to Wisconsin's Open Records Law.

Printed Name: _____ Title: _____

Printed Name: _____ Title: _____

Printed Name: _____ Title: _____



THE FOLLOWING EXHIBITS MUST BE COMPLETED WHERE APPLICABLE AND INCLUDED AS PART OF YOUR APPLICATION. *The RBF, Inc., CCEDC, and Chippewa County reserves the right to request additional information above and beyond this list.*

- ☐ Business Plan. At a minimum this should include
 - ☐ a brief business description and company history.
 - ☐ a project summary.
 - ☐ a discussion of the business industry, sales, markets and competition; and
 - ☐ any owner with 20% or more ownership in the business submit a copy of their driver's license.
 - ☐ the business submit their business organizational articles (i.e. Articles of Incorporation/Organization, Membership Agreement (if one exists), Bylaws)
- ☐ Business Tax return and balance sheet/profit and loss statement for the last year (2019) and for an interim period less than ninety days from date of application with schedule of business debt.
- ☐ Balance sheet/profit and loss statement projections for two years from date of application.
- ☐ Personal financial statement of principal owners and first two pages of most recent income tax return (all owners with 20% or more ownership).