

Cambridge Downtown Interest Rate Subsidy Program Application

APPLICANT INFORMATION

Name			
Title			
Business Name			
Telephone Number		Email Address	
Mailing Address			

Building Ownership Status, if the loan is for building renovations	<input type="checkbox"/> Owned <input type="checkbox"/> Leased <input type="checkbox"/> Other: _____		
If leased, does the owner support this project?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Owner Name		Owner Telephone Number	

What is the intended use(s) for the loan? Attach another document if needed.

LOAN INFORMATION

Financial Institution	
Financial Institution Address	
Financial Institution Phone Number	

Loan Details

Total Loan Amount:	Interest Rate:
Loan Term Length:	Type of Loan: <input type="checkbox"/> Traditional <input type="checkbox"/> SBA

By signing this form, I am assuring the City of Cambridge that I have the legal right to bind my company to a legal agreement. I certify that all statements on this application are true and correct to the best of my knowledge. I understand that any intentional misstatements will be grounds for disqualification. I agree to the terms laid out in the program guidelines.

Applicant Signature

Date

Required with this application:

- Proposed Loan Term Sheet from participating financial institution
- Authority to Release Information Form
- Data Privacy Statement
- Written permission from building owner if different from applicant if work is to be done to the building

The city reserves the right to request additional information and supporting documents.

MAIL OR DELIVER COMPLETED APPLICATION PACKETS TO:

Alex Smith
Deputy City Administrator
Cambridge City Hall
300 3rd Ave NE
Cambridge, MN 55008
asmith@ci.cambridge.mn.us
763-552-3254