

Disaster Loan Assistance

Federal Disaster Loans for Businesses, Private Nonprofits, Homeowners, and Renters



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Business Losses

***Please select the type of organization that best describes your business.**

- Sole-Proprietor *(including individuals with income properties)*
- Corporation
- Partnership
- Private Non-Profit Organization *(e.g. religious, charitable, community organizations)*
- Limited Partnership
- Trust
- Limited Liability Entity *(LLC, LLP, etc.)*

**** IMPORTANT INFORMATION ****

If applying for Coronavirus (COVID-19) disaster assistance, select ONLY "**Economic Injury (EIDL)**" below.
Do not check any other boxes.

***Are you applying for: (check all that apply)**

- Real Property *(including Leasehold Improvements)*
- Business Contents *(Machinery & Equipment, Furniture & Fixtures, and Other Business Assets, i.e. Inventory)*
- Economic Injury *(EIDL)*
- Military Reservist Economic Injury *(MREIDL)*

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Declaration Selection

Please enter the State and County of the property damaged by the disaster.

*State

Minnesota

*County

Brown

* Select the Disaster that affected you.

Select	Disaster Name	Disaster Description	State	Disaster Date	Filing Deadline
<input type="radio"/>	EXCESSIVE RAIN	Excessive Rain	MN	3/12/2019	10/19/2020

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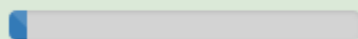
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Certification as to Truthful Information

By certifying 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 Certify

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STATEMENTS REQUIRED BY LAWS AND EXECUTIVE ORDERS

To comply with legislation passed by the Congress and Executive Orders issued by the President, Federal executive agencies, including the Small Business Administration (SBA), must notify you of certain information. You can find the regulations and policies implementing these laws and Executive Orders in Title 13, Code of Federal Regulations (CFR), Chapter 1, or our Standard Operating Procedures (SOPs). In order to provide the required notices, the following is a brief summary of the various laws and Executive Orders that affect SBA's Disaster Loan Programs. A glossary of terms can be found at Disasterloan.SBA.GOV

FREEDOM OF INFORMATION ACT (5 U.S.C. 552)

This law provides, with some exceptions, that we must make records or portions of records contained in our files available to persons requesting them. This generally includes aggregate statistical information on our disaster loan programs and other information such as names of borrowers (and their officers, directors, stockholders or partners), loan amounts at maturity, the collateral pledged, and the general purpose of loans. We do not routinely make available to third parties your proprietary data without first notifying you, as required by Executive Order #12600, or information that would cause competitive harm or constitute a clearly unwarranted invasion of personal privacy.

Freedom of Information Act (FOIA) requests must describe the specific records you want. For information about the FOIA, contact the Chief, FOI/PA Office, 409 3rd Street, SW, Suite 5900, Washington, DC 20416, or by e-mail at foia@sba.gov.

PRIVACY ACT (5 U.S.C. § 552a)

Anyone can request to see or get copies of any personal information that we have in your file. Any personal information in your file that is retrieved by individual identifiers, such as name or social security number is protected by the Privacy Act, which means requests for information about you may be denied unless we have your written permission to release the information to the requestor or unless the information is subject to disclosure under the Freedom of Information Act. The Agreements and Certifications section of this form contains written permission for us to disclose the information resulting from this collection to state, local or private disaster relief services.

The Privacy Act authorizes SBA to make certain "routine uses" of information protected by that Act. One such routine use for SBA's loan system of records is that when this information indicates a violation or potential violation of law, whether civil, criminal, or administrative in nature, SBA may refer it to the appropriate agency, whether Federal, State, local or foreign, charged with responsibility for or otherwise involved in investigation, prosecution, enforcement or prevention of such violations. Another routine use of personal information is to assist in obtaining credit bureau reports, on the Disaster Loan Applicants and guarantors for purposes of originating, servicing, and liquidating Disaster loans. See, 69 F.R. 58598, 58617 (and

* I have read the Statements Required by Laws and Executive Orders.

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Filing Requirements

The following sections are required for all loan applications. A green check mark indicates that a section has been completed. Alternate [document delivery options](#) are available if needed.

Complete the **Disaster Home / Sole Proprietor Loan Application** (SBA Form 5C).

Disaster Home / Sole Proprietor Loan Application

[Start](#)

Complete and sign each **Request for Transcript of Tax Return** (IRS Form 4506-T) shown below. This income information, obtained from the IRS, will help us determine your repayment ability.

Request for Transcript of Tax Return

Complete preceding section(s) first.

Read and accept the Truthful Information Certification.

Truthful Information Certification

Complete preceding section(s) first.

Submit Application and Supporting Documents.

Submit Application

Complete preceding section(s) first.

WHILE NOT NECESSARY TO ACCEPT YOUR APPLICATION, YOU MAY BE REQUIRED TO SUPPLY THE FOLLOWING INFORMATION TO PROCESS THE APPLICATION. IF REQUESTED, PLEASE PROVIDE WITHIN 7 DAYS OF THE INFORMATION REQUEST:

If any applicant has changed employment within the past two years, provide a copy of a current (within 1 month of the application date) pay stub for all applicants

If we need additional income information, you may be asked to provide copies of your Federal income tax returns, including all schedules

IF SBA APPROVES YOUR LOAN, WE MAY REQUIRE THE FOLLOWING ITEMS BEFORE LOAN CLOSING. WE WILL ADVISE YOU IN WRITING, OF THE DOCUMENTS WE NEED.

If you own your residence, a COMPLETE legible copy of the deed, including the legal description of the property

If the damaged property is your primary residence, proof of residency at the damaged address

If you had damage to a manufactured home, a copy of the title. If you own the lot where the home is located, a COMPLETE legible copy of the deed, including the legal description of the property

If you have damage to an automobile or other vehicle, proof of ownership (a copy of the registration, title, bill of sale, etc.)

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Primary Applicant Information

INFORMATION ABOUT THE APPLICANT

[Copy User Registration Information](#)

*First Name

Middle Name

*Last Name

Suffix *Date of Birth

*Social Security Number

*Marital Status Married Not Married

*Are you a U.S. Citizen? Yes No

*Are you an SBA Employee? Yes No

*Household Size

*Do you own more than 50% or are you a Managing Member or General Partner of a corporation, partnership, limited partnership, or LLC? Yes No

CONTACT INFORMATION

*Check your preferred method of contact:

E-mail Address

Cell Phone

Home Phone

Work Phone

Closest Relative Not Living with You:

Name

Phone Number

MAILING ADDRESS

*Address

*Zip *City *State County

INCOME INFORMATION

Employed Unemployed Self Employed Retired

*Employer Name

*Total Annual Income (before deductions) *Employer Phone Number

Note: Include all recurring income from all sources such as employment, self-employment, part-time work, social security, retirement income, disability income, interest income, child support, alimony, etc.

Do not include one-time or non-recurring income.

[Add Joint Applicant](#)


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Primary Applicant Information

INFORMATION ABOUT THE APPLICANT

Copy User Registration Information

*First Name

Middle Name

*Last Name

Suffix *Date of Birth

*Social Security Number

*Marital Status Married Not Married

*Are you a U.S. Citizen? Yes No

*Are you an SBA Employee? Yes No

*Household Size

*Do you own more than 50% or are you a Managing Member or General Partner of a corporation, partnership, limited partnership, or LLC? Yes No

CONTACT INFORMATION

*Check your preferred method of contact:

E-mail Address

Cell Phone

Home Phone

Work Phone

Closest Relative Not Living with You:

Name

Phone Number

MAILING ADDRESS

*Address

*Zip *City *State County

INCOME INFORMATION

Employed Unemployed Self Employed Retired

*Employer Name

*Total Annual Income (before deductions) *Employer Phone Number

Note: Include all reoccurring income from all sources such as employment, self-employment, part-time work, social security, retirement income, disability income, interest income, child support, alimony, etc.
Do not include one-time or non-reoccurring income.

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Damaged Property Information

DAMAGED PROPERTY ADDRESS

[Same as primary applicant mailing address](#)

*Address
*Zip *City *State *County

DAMAGED PROPERTY INFORMATION

*Do you own or rent this property? Own Rent

*Is this property your Primary Residence? Yes No

*If No, please select from the list below:

Vacation/secondary home I own the property but a family member/friend lives in the property Rental/Business Property

INSURANCE INFORMATION

Please check all insurance in force for the damaged property:

Homeowner's Flood Automobile Renter's No Insurance Other:

*Policy Type *Insurance Company Name Policy Number Phone Number Amount Received
[Add Insurance](#)

[Add Damaged Property](#)

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OMB Control No. 3245-0018
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Debts and Assets Information

DEBTS I have no debts

Mortgage Holder or Landlord's Name (Primary Residence)

Name	Monthly Payment/Rent	Current Balance
<input type="text" value="Name"/>	<input type="text" value="Monthly Payment/Rent"/>	<input type="text" value="Current Balance"/>

2nd Mortgage Holder Name (if applicable)

Name	Monthly Payment/Rent	Current Balance
<input type="text" value="Name"/>	<input type="text" value="Monthly Payment/Rent"/>	<input type="text" value="Current Balance"/>

Note: Please complete the section below if the amounts are NOT included in your mortgage payment:

Real Estate Taxes (per year)	Homeowner's Insurance (per year)	Condo/Townhome/HOA/Co-Op Fees (per year)
<input type="text" value="Real Estate Taxes (per year)"/>	<input type="text" value="Homeowner's Insurance (per year)"/>	<input type="text" value="Condo/Townhome/HOA/Co-Op Fees (per year)"/>

Other Debt including auto payments, credit cards, installment loans, student loans, etc. **Note: Only include debts that will last longer than 10 months.**

*Name of Creditor	*Monthly Payment	Current Balance
Add Debt		

ASSETS

Pre-disaster values:

*Cash, Bank Accounts and Marketable Securities (e.g. Stock & Bonds, CDs, etc.) (Not including retirement accounts)	<input type="text" value="Cash, Bank Accounts a"/>
*Retirement Accounts (e.g. IRAs, Keogh, TSP or other similar accounts)	<input type="text" value="Retirement Accounts"/>
*Personal Property (furniture, appliances, vehicles, RVs, etc.)	<input type="text" value="Personal Property"/>
*Primary Residence	<input type="text" value="Primary Residence"/>
All Other Real Estate (describe) <input type="text" value="Other Real Estate Description"/>	<input type="text" value="Other Real Estate Amo"/>

OTHER DISASTER ASSISTANCE

FEMA Registration Number

*Other than FEMA, have you received any grant award (i.e. city grants, county grants, state grants, etc.): Yes No

State Amount Other Amount Describe

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Disclosure Statements

DISCLOSURES

The responses below apply to the Applicant and Joint Applicant, if any. Please explain any "Yes" responses.

- *1. Are you delinquent on any Federal taxes, Federal loans, Federal grants, or 60 days past due on any child support obligation? Yes No
- *2. Are you currently a defendant in any lawsuits or have pending judgements against you? Yes No
- *3. Are you currently suspended or debarred from contracting with Federal government or receiving Federal grants or loans? Yes No
- *4. Do you have federal loans, federally guaranteed loans, or previous SBA loans? Yes No
- *5. Are you engaged in the production or distribution of any product that has been determined to be obscene by a court of competent jurisdiction? Yes No
- *6. In the past year, have you been convicted of a felony committed in connection with a riot or civil disorder? Yes No
- *7. Are you presently, a) subject to an indictment, criminal information, arraignment, or other means by which formal criminal charges are brought in any jurisdiction; b) have you been arrested in the past six months for any criminal offense; c) for any criminal offense - other than a minor vehicle violation -- have you ever: 1) been convicted, 2) plead guilty, 3) plead nolo contendere, 4) been placed on pretrial diversion, or 5) been placed on any form of parole or probation (including probation before judgment)? Yes No

BUSINESS ACTIVITY

Business Activity	*Date Business Established	Number of Employees (pre-disaster)
<input type="text" value="CHAMBERING"/>	<input type="text" value="01/01/2006"/>	<input type="text" value="4"/>

REPRESENTATIVE INFORMATION

If you have paid a representative (packager, attorney, accountant, etc.) to assist you in completing the application, please complete the section below.

Representative Name	Street Address	City	State	Zip	Fee charged or agreed upon
<input type="text" value="Representative Name"/>	<input type="text" value="Street Address"/>	<input type="text" value="City"/>	<input type="text" value=""/>	<input type="text" value="Zip"/>	<input type="text" value="Fee charged or agreed"/>

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Consent

CONSENT

I authorize my insurance company, bank, financial institution, or other creditors to release to SBA all records and financial information necessary to process this application.

SBA has my permission, 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 SBA application, evaluating my eligibility for additional disaster assistance, or notifying me of the availability of such assistance.

If my loan is approved, I may be eligible for additional funds to safeguard my property from damages similar to those caused by this disaster. Although it is not necessary for me to provide with my application, a description and cost estimate will be required prior to SBA approval of the mitigation measure.

I have received and read a copy of the "STATEMENTS REQUIRED BY LAWS AND EXECUTIVE ORDERS" which was attached to this application.

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.

* **All the information on this application and any documents provided is true to the best of my knowledge and you may rely on it to provide disaster loan assistance. All damages claimed are a direct result of the declared disaster. I understand that I could lose my benefits and could be prosecuted by the U.S. Attorney for making false statements. Reference 18 U.S.C. 1001 and / or 15 U.S.C. 645.**

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Affiliated Businesses

Please complete the affiliate information below for each applicant and/or owner that owns more than 50% of, or are a Managing Member or General Partner of a corporation, partnership, limited partnership, or LLC.

After you've entered the affiliated business information, click "Save" to add it to your list.

Affiliated Businesses

***Applicant or Owner Name for Affiliate Details**

***Business Name**

***EIN**

***Organization Type**

***% Owned**

Title

***Address Line 1**

Address Line 2

***Zip Code**

City

***State**

County

Cancel

Save

The names listed below are the applicants or owners that answered YES to "Do you own more than 50% or are you a Managing Member or General Partner of a corporation, partnership, limited partnership, or LLC?" If the answer was entered incorrectly for any applicant or owner, click the "Remove" button to change the answer to NO and remove them from this list.

Remove

MICHAEL J LOOFT

Affiliate Name

EIN

Type

% Owned


Please enter affiliated business information for MICHAEL J LOOFT.

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 **Disaster Home / Sole Proprietor Loan Application**

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MICHAEL J LOOFT

[Start](#)

NEW ULM AREA CHAMBER OF COMMERCE

[Start](#)

Read and accept the Truthful Information Certification.

Truthful Information Certification

Complete preceding section(s) first.

Submit Application and Supporting Documents.

Submit Application

Complete preceding section(s) first.

WHILE NOT NECESSARY TO ACCEPT YOUR APPLICATION, YOU MAY BE REQUIRED TO SUPPLY THE FOLLOWING INFORMATION TO PROCESS THE APPLICATION. IF REQUESTED, PLEASE PROVIDE WITHIN 7 DAYS OF THE INFORMATION REQUEST:

If any applicant has changed employment within the past two years, provide a copy of a current (within 1 month of the application date) pay stub for all applicants

If we need additional income information, you may be asked to provide copies of your Federal income tax returns, including all schedules

IF SBA APPROVES YOUR LOAN, WE MAY REQUIRE THE FOLLOWING ITEMS BEFORE LOAN CLOSING. WE WILL ADVISE YOU IN WRITING, OF THE DOCUMENTS WE NEED.

If you own your residence, a COMPLETE legible copy of the deed, including the legal description of the property

If the damaged property is your primary residence, proof of residency at the damaged address

If you had damage to a manufactured home, a copy of the title. If you own the lot where the home is located, a COMPLETE legible copy of the deed, including the legal description of the property

If you have damage to an automobile or other vehicle, proof of ownership (a copy of the registration, title, bill of sale, etc.)

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