

Business Revitalization Zero-Interest Loan Program Application

Please read the attached **Program Criteria** carefully before completing the application. Remember to include photographs of your building(s) and/or property as they relate to the types of improvements indicated on the application.

1.	Is the applicant the (check one):
	□ Business Owner□ Property Owner
	Property Address
	Business Information
	Business Name
	Business Owner/s Name
	Mailing Address
	Phone Number
	Fax Number
	E-mail Address
	Brief History of the existing or proposed business
	Attach three years of financial history (refer to page 10 of manual)
	Property Owner Information
	Property Owner/s Name
	Mailing Address
	Phone Number
	Fax Number
	H mail Address

Project Description

2.	Please provide an accurate and thorough summary of your project. Please identify the specific improvements you are proposing for the building/s and/or property. The photographs taken of your building/s and property will assist in a visual manner to further support your written project description.
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rojec	et Costs
3.	Based on the proposed improvements identified, please provide a realistic estimate of the entire project cost:
	\$ Materials + \$ Labor = \$ Total
4.	If the project cost comes in at, or exceeds your estimate, do you have private funds readily available to cover your financial portion of the project? Yes (attach Lender Commitment Letters) No
	If No, by what means could you secure funding and still complete the project within the 120 day deadline? (Please provide documentation evidencing your ability)

Project Timeline and Completion

5.	If your project is approved, does meeting the 120 day deadline p ☐ Yes ☐ No	pose any concerns for you?
	If yes, please list those concerns.	
6.	Based on the description of your project and your motivation fo	
	please place a check mark next to those Project Preference item ☐ Will positively contribute to the City's revitalization efforts ☐ Will eliminate a blighting influence ☐ Will result in a viable improvement that would not be made	
The inf	cant and Owner Authorization and Acknowledgement Formation on this application is accurate. I have read, understand for the Business Revitalization Zero-Interest Loan Program.	, and agree to comply with the program
	Property Owner Signature	Date
	Applicant Signature	Date
	Please return completed application/s and p	hotographs to:
City o	f Brillion, Business Revitalization Zero-Interest Loan Program	, 201 N. Main Street, Brillion, WI 54110
		For Office Use Only ☐ City Administrator ☐ Public Works Director ☐ Building Inspector ☐ BRZIL Committee ☐ City Council