



Affiliated Tribes of Northwest Indians Economic Development Corporation
COVID-19 Response Emergency Forgivable Loan Application

APPLICANT'S NAME (LAST)	(FIRST)	(MIDDLE IN)	SSN (write, do not type)	DOB
CO-APPLICANT'S NAME (LAST)	(FIRST)	(MIDDLE IN)	SSN (write, do not type)	DOB
CURRENT ADDRESS			PHONE NUMBER	
ENTERPRISE NAME				EIN (if applicable)
OWNER'S TRIBAL AFFILIATION		BUSINESSS STRUCTURE (i.e. Sole proprietorship, LLC, S/C-Corp, 1099 Contractor, etc.)		
YEAR ESTABLISHED	INDUSTRY SECTOR (Briefly describe businesses' products and/ or services)			

ANNUAL INCOME FOR 2019		CURRENT MONTHLY EXPENDITURES	
GROSS NET BUSINESS INCOME	\$	BUSINESS RENT/ MORTGAGE	\$
NET BUSINESS INCOME	\$	BUSINESS UTILITIES	\$
PERSONAL INCOME FOR 2019		EMPLOYEE SALARIES (including self)	\$
SALARY	\$	OTHER	\$
OTHER INCOME	\$	TOTAL EXPENDITURES	\$
TOTAL PERSONAL INCOME	\$		

NUMBER OF EMPLOYEES PRE-COVID (including self)		NUMBER OF EMPLOYEES TODAY (including self)	
HAS THE BUSINESS INCURRED ADDITIONAL COSTS DUE TO THE COVID-19 CRISIS? (Y / N). If yes, how much?			\$
HAVE YOU APPLIED FOR EMERGENCY RELIEF FUNDING DUE TO THE COVID-19 CRISIS? Please Explain.			



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HOW HAS COVID-19 IMPACTED YOUR BUSINESS? (200 words or less)
EXPLAIN IN DETAIL HOW YOU INTEND TO USE THESE FUNDS: (200 words or less)
HAS THE COMPANY TAKEN ANY MEASURES TO RETAIN EMPLOYEES? PLEASE EXPLAIN. (200 words or less)
IS THERE ANYTHING ELSE THAT WE SHOULD KNOW? (100 words or less)

I certify that I have answered the questions on the front and back of this financial statement fully and truthfully. I authorize Affiliated Tribes of Northwest Indians Economic Development Corporation to check my credit record and verify any statements I have made. I give all my creditors permission to give Affiliated Tribes of Northwest Indians Economic Development Corporation any information it may need to determine whether it will grant me funds. I authorize Affiliated Tribes of Northwest Indians Economic Development Corporation to give credit reporting agencies and other creditors information relating to any funds it may grant me. All information given is as of the date listed below, unless otherwise stated.

Applicant Name (printed)

Signature

Title

Date

Co-Applicant Name (printed)

Signature

Title

Date

ATNI-EDC is an Equal Opportunity Program. Discrimination is prohibited by Federal Law. Complaints of discrimination may be filed with the USDA, Director, Office of Civil Rights, Washington, DC 20250



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Covid-19 Response Emergency Loan Application Information

With support from the Oregon Small Business Stabilization Fund, the Affiliated Tribes of Northwest Indians Economic Development Corporation has established an Emergency Forgivable Loan to assist Native-owned small businesses with COVID-19 relief efforts. Emergency Forgivable Loans will range from \$1,000 up to \$5,000. Funds are limited, and most loans will likely be \$1,000 to \$2,000. Actual loan amount will be determined by the loan review committee. For more information on the Oregon Small Business Stabilization Fund, visit <https://oregoncf.org/grants-and-scholarships/grants/oregon-small-business-stabilization-fund/>

Eligibility

These funds are available for Native-owned small businesses (5 employees or fewer) operating in the State of Oregon. Applicants should demonstrate tribal affiliation. Tribal affiliation does not need to be a Tribe in the ATNI Region. ATNI-EDC is an equal opportunity lender. All qualified applicants will receive considerations without regard to race, color, religion, sex or national origin. In deference to its status of a tribally affiliated entity and its goal of building capacity in tribal communities, ATNI-EDC reserves the right to apply preference to Native American preference in its application review.

Allowable Use-of-Funds

Small business owners know best how to run their business. These funds are intended to ensure that businesses can survive the Covid-19 crisis. Funds may be used to be used to offset expenses incurred from the Covid-19 crisis, or to pay for operating expenses incurred while revenue is compromised. The funds can not be used to cover expenses claimed under Federal or other relief grants or loans. If you have applied for other relief programs and you later learn that you received assistance, you may contact ATNI-EDC to update your use of funds. Loan funds shall not overlap with any other relief funding. If funds need to be repurposed, you will need to contact ATNI-EDC within 60 days of receipt of the funds to ensure the repurpose of funds are agreed upon and documented. The Applicant provide proof of use of funds within 90 days of receipt.

Forgivable Loan Criteria

Once all requirements are met and proper documentation has been received and accepted by ATNI-EDC, the loan will be forgiven, and applicant will have no further obligations regarding the funds. If any of the terms are not met, including but not limited to not providing sufficient proof of use of funds, the loan will come due within 12 months of receipt of funds. 0% interest will be assessed for the first 12 months, after which an interest rate of 8% will be applied to the loan. There are no closing costs or loan origination fees associated with this loan.

Application Procedure

Complete this application and email it to info@atniedc.com. Applications may also be mailed to:

ATNI-EDC
PO Box 66592
Portland, Oregon 97290-6592

Application window will remain open until June 1, 2020, unless otherwise specified. Applications will be reviewed on an ongoing basis. Applicants will be notified once approved. See <https://atniedc.com> for updates. For questions, you may contact Crystal Sandoval at crystal@atniedc.com, or (503) 206-6162.