



# ATNI-EDC Covid-19 Emergency Loan Application

## Overview

The Department of Commerce Economic Development Administration's Revolving Loan Fund Program provided \$500,000 of capital to respond to the COVID-19 pandemic. ATNI-EDC is using this capital by providing a low-interest loan to businesses that have been adversely affected by the COVID-19 pandemic. Other funds will be added to the ATNI-EDC COVID-19 Response Emergency Loan Fund as they become available. Funds that revolve (i.e. loan capital that is repaid) will be recapitalized into this Fund.

## Eligibility

The ATNI-EDC Covid-19 Response Emergency Loan is available to Native-owned businesses operating on or near tribal areas in the ATNI region (broadly Oregon, Washington, and Idaho). Applicants may be asked to provide proof of tribal membership or tribal decedency. Businesses must demonstrate that the loan funds will be used to mitigate hardships associated with the COVID-19 pandemic. Businesses that have received other financial relief will not be disqualified from this loan program and are welcome to apply. However, businesses seeking ATNI loans for financial needs unrelated to COVID-19 hardships are not eligible for this loan program.

## Loan Amounts, Terms, and Rates

- Loan amounts may be requested between \$5,000 and \$25,000
- No loan payments are required for the first six months
- Loans must be repaid within three years
- Interest rates are:
  - o 2.5% year 1
  - o 5% year 2
  - o If loan is not repaid in full within 2 years, the interest rate will increase to 8% thereafter
- Closing fees are waived
- Loans up to \$10,000 may be secured with only a personal guarantee. Loans between \$10,001 and \$25,000 must be appropriately collateralized above and beyond a personal guarantee

## Application Process

To apply, complete the short application form. Applications will be accepted on a rolling basis until funds are expended.

*If you have any questions, please email us at [loans@atniedc.com](mailto:loans@atniedc.com).*



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APPLICANT'S NAME (LAST)		(FIRST)	(MIDDLE)	SSN	DOB
CO-APPLICANT'S NAME (LAST)		(FIRST)	(MIDDLE)	SSN	DOB
CURRENT ADDRESS				PHONE NUMBER	
MAILING ADDRESS				EMAIL ADDRESS	
ENTERPRISE NAME					EIN (if applicable)
OWNER'S TRIBAL AFFILIATION			BUSINESS STRUCTURE (i.e. Sole proprietorship, LLC, S/C-Corp, 1099 Contractor, etc.)		
YEAR ESTABLISHED	NUMBER OF EMPLOYEES	INDUSTRY SECTOR (Briefly describe businesses' products and/ or services)		AMOUNT REQUESTED	

ANNUAL BUSINESS INCOME FOR 2019		CURRENT MONTHLY EXPENDITURES	
GROSS MONTHLY BUSINESS INCOME	\$	BUSINESS RENT/ MORTGAGE	\$
NET BUSINESS INCOME	\$	BUSINESS UTILITIES	\$
PERSONAL INCOME FOR 2019		EMPLOYEE SALARIES (including self)	\$
SALARY	\$	OTHER	\$
OTHER INCOME OUTSIDE OF BUSINESS (PLEASE SPECIFY FROM WHERE)	\$	TOTAL PERSONAL EXPENSES	\$

HAS THE BUSINESS EXPERIENCED FINANCIAL HARDSHIP DUE TO THE COVID-19 CRISIS? ( Y / N )	
PLEASE EXPLAIN HOW YOU WILL USE THESE FUNDS TO MIDIGATE/ REMEDIATE HARDSHIPS ASSOCIATED WITH THE COVID-19 PANDEMIC:	
HAS THE BUSINESS RECEIVED FEDERAL RELIEF IN THE FORM OF THE SBA PPP OR SBA EIDL? ( Y / N ) (This will not affect your eligibility for the loan)	

If you are requesting \$10,000 or less, please proceed to and complete the **Certification Section**.

**Note: Only complete this section if you are requesting more than \$10,000**

ASSETS		LIABILITIES (MONTHLY)	
CASH	\$	NOTES PAYABLE	\$
STOCKS AND BONDS	\$	CREDIT CARDS	\$
NOTES & ACCTS. RECEIVABLE	\$	ACCTS. AND BILLS PAYABLE	\$
REAL ESTATE OWNED (est value)	\$	REAL ESTATE LOANS PAYABLE	\$
AUTOMOBILES (est value)	\$	AUTO LOANS PAYABLE	\$
BOAT (est value)	\$	INCOME TAX PAYABLE	\$
CASH SURRENDER VALUE OF LIFE INSURANCE	\$	OWING AGAINST LIFE INSURANCE	\$
PERSONAL PROPERTY (est value)	\$	OTHER LIABILITIES	\$
OTHER ASSETS	\$		\$
	\$	TOTAL LIABILITIES	\$
TOTAL ASSETS	\$	NET WORTH (Total Assets minus Total Liabilities)	\$

COLLATERAL
ESTIMATED VALUE OF COLLATERAL

**Certification**

*I certify that I have answered the questions on the front and back of this financial statement fully and truthfully. I further certify that I am authorized to financially obligate the business named on this application. 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 credit. I authorize Affiliated Tribes of Northwest Indians Economic Development Corporation to give credit reporting agencies and other creditors information relating to any credit it may grant me. All information given is as of the date listed below, unless otherwise stated.*

Signature: \_\_\_\_\_  
Applicant

Date: \_\_\_\_\_

Signature: \_\_\_\_\_  
Co-applicant

Date: \_\_\_\_\_

Send completed applications to:

**By email:**     [info@atniedc.com](mailto:info@atniedc.com)

**By mail:**       ATNI-EDC  
                  Revolving Loan Fund  
                  PO Box 66592  
                  Portland, Oregon 97290-6592

*If you have any questions, please email us at [loans@atniedc.com](mailto:loans@atniedc.com) or call us at (503) 477-8568.*

*Affiliated Tribes of Northwest Indians Economic Development Corporation is an Equal Opportunity Program.  
Discrimination is prohibited by Federal Law.*