



U.S. Small Business Administration DISASTER HOME LOAN APPLICATION

--FOR SBA INTERNAL USE ONLY--

OMB Control No.: 3245-0018
Exp.: 01/31/2018

Physical Declaration Number: _____

Date Received: _____ By: _____

FEMA Registration Number: _____

Location: _____

SBA Application Number: _____

Filing Deadline Date: _____

1. INFORMATION ABOUT THE APPLICANT(S)

PRIMARY APPLICANT	JOINT APPLICANT
First Name <input style="width: 90%;" type="text"/>	First Name <input style="width: 90%;" type="text"/>
Middle Name <input style="width: 90%;" type="text"/>	Middle Name <input style="width: 90%;" type="text"/>
Last Name <input style="width: 90%;" type="text"/> <input style="width: 5%; border: 1px solid black;" type="text"/>	Last Name <input style="width: 90%;" type="text"/> <input style="width: 5%; border: 1px solid black;" type="text"/>
Social Security Number <input style="width: 80%;" type="text"/>	Social Security Number <input style="width: 80%;" type="text"/>
Birth Date <input style="width: 60%;" type="text"/>	Birth Date <input style="width: 60%;" type="text"/>
Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Single, Divorced, Widowed)	Relationship to Applicant <input type="checkbox"/> Spouse <input type="checkbox"/> Other: <input style="width: 100%;" type="text"/>
Family Size <input style="width: 20%;" type="text"/>	Family Size <input style="width: 20%;" type="text"/>
SBA Employee <input type="checkbox"/> YES <input type="checkbox"/> NO Self Employed <input type="checkbox"/> YES <input type="checkbox"/> NO	SBA Employee <input type="checkbox"/> YES <input type="checkbox"/> NO Self Employed <input type="checkbox"/> YES <input type="checkbox"/> NO

2. Applicant(s) Mailing Address

Applicant(s)	Applicant(s)
Address <input style="width: 95%;" type="text"/>	Address <input style="width: 95%;" type="text"/>
Address Line 2 <input style="width: 95%;" type="text"/>	Address Line 2 <input style="width: 95%;" type="text"/>
City <input style="width: 25%;" type="text"/> County <input style="width: 25%;" type="text"/> State <input style="width: 15%;" type="text"/> Zip Code <input style="width: 35%;" type="text"/>	City <input style="width: 25%;" type="text"/> County <input style="width: 25%;" type="text"/> State <input style="width: 15%;" type="text"/> Zip Code <input style="width: 35%;" type="text"/>

3. Applicant(s) Contact Information

Applicant(s)	Applicant(s)
Please use check box to indicate the preferred method of contact	
Home Phone <input style="width: 80%;" type="text"/> <input type="checkbox"/>	Home Phone <input style="width: 80%;" type="text"/> <input type="checkbox"/>
Work Phone <input style="width: 80%;" type="text"/> <input type="checkbox"/>	Work Phone <input style="width: 80%;" type="text"/> <input type="checkbox"/>
Cell or Alt. Phone <input style="width: 80%;" type="text"/> <input type="checkbox"/>	Cell or Alt. Phone <input style="width: 80%;" type="text"/> <input type="checkbox"/>
E-mail Address <input style="width: 80%;" type="text"/> <input type="checkbox"/>	E-mail Address <input style="width: 80%;" type="text"/> <input type="checkbox"/>

4. Applicant(s) Closest Relative Not Living With You

Applicant(s)	Applicant(s)
Name <input style="width: 95%;" type="text"/>	Name <input style="width: 95%;" type="text"/>
Phone Number <input style="width: 80%;" type="text"/>	Phone Number <input style="width: 80%;" type="text"/>

5. Applicant(s) Employment

Applicant(s)	Applicant(s)
Employer Name and Address, City, State & Zip Code <input style="width: 95%;" type="text"/>	Employer Name and Address, City, State & Zip Code <input style="width: 95%;" type="text"/>
Address <input style="width: 95%;" type="text"/>	Address <input style="width: 95%;" type="text"/>
Address Line 2 <input style="width: 95%;" type="text"/>	Address Line 2 <input style="width: 95%;" type="text"/>
City <input style="width: 25%;" type="text"/> County <input style="width: 25%;" type="text"/> State <input style="width: 15%;" type="text"/> Zip Code <input style="width: 35%;" type="text"/>	City <input style="width: 25%;" type="text"/> County <input style="width: 25%;" type="text"/> State <input style="width: 15%;" type="text"/> Zip Code <input style="width: 35%;" type="text"/>
Length of Employment Years <input style="width: 20%;" type="text"/> Months <input style="width: 20%;" type="text"/>	Length of Employment Years <input style="width: 20%;" type="text"/> Months <input style="width: 20%;" type="text"/>
Gross Income (before taxes) \$ <input style="width: 20%;" type="text"/> per <input type="checkbox"/> Week <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Month <input type="checkbox"/> Year	Gross Income (before taxes) \$ <input style="width: 20%;" type="text"/> per <input type="checkbox"/> Week <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Month <input type="checkbox"/> Year
Occupation <input style="width: 95%;" type="text"/>	Occupation <input style="width: 95%;" type="text"/>
Other Income - if the income will be used to repay this loan. Examples are regular part-time work, social security, retirement or disability income, interest income, alimony, child support. Source <input style="width: 95%;" type="text"/>	Other Income - if the income will be used to repay this loan. Examples are regular part-time work, social security, retirement or disability income, interest income, alimony, child support. Source <input style="width: 95%;" type="text"/>
\$ <input style="width: 20%;" type="text"/> per <input type="checkbox"/> Week <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Month <input type="checkbox"/> Year	\$ <input style="width: 20%;" type="text"/> per <input type="checkbox"/> Week <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Month <input type="checkbox"/> Year
Source <input style="width: 95%;" type="text"/>	Source <input style="width: 95%;" type="text"/>
\$ <input style="width: 20%;" type="text"/> per <input type="checkbox"/> Week <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Month <input type="checkbox"/> Year	\$ <input style="width: 20%;" type="text"/> per <input type="checkbox"/> Week <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Month <input type="checkbox"/> Year

I own 20% or more of a corporation, partnership, limited partnership, or LLC <input type="checkbox"/> YES <input type="checkbox"/> NO	I own 20% or more of a corporation, partnership, limited partnership, or LLC <input type="checkbox"/> YES <input type="checkbox"/> NO
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6. DAMAGED PROPERTY ADDRESS

Same as applicant mailing address

Is this your primary residence? YES NO

Address _____

 City _____ County _____ State _____ Zip Code _____
 Damage type: Real Estate Personal Property Auto

7. Insurance Information

NO INSURANCE coverage of any kind (flood or other) was in force for this loss.
 Type of insurance coverage in force for this loss: Homeowner's Automobile Renter's Flood Other: _____ (describe)

Type of Coverage	Insurance Company Name	Phone Number	Policy Number	Amount Received

8. Other disaster assistance received or expected from: FEMA \$ _____ State \$ _____
 Other Describe: _____ \$ _____

9. Assets Pre-disaster Value

Cash & bank accounts NOT including retirement accounts	_____
IRA's Keoghs and other similar retirement accounts	_____
Market value of stocks & bonds & other securities	_____
Estimated resale value of household goods (furnishings & appliances)	_____
Primary residence address: _____	_____
Other real estate owned address: _____	_____
Other real estate owned address: _____	_____
Other real estate owned address: _____	_____
Other: (vehicles, boats, RV, etc.) describe: _____	_____
Other: (vehicles, boats, RV, etc.) describe: _____	_____

10. Debts I have no debts

Mortgage holder's or Landlord's name and address	Mo. Payment or Rent	Present Balance
Name _____	_____	_____
Address _____		
Address Line 2 _____		
City _____ State _____ Zip Code _____		
Second Mortgage holder's name and address (if any)		
Name _____	_____	_____
Address _____		
City _____ State _____ Zip Code _____		

If you own your home and if payment(s) above do NOT include real estate taxes and/or insurance, OR if residence is paid for, please provide (as applicable):

Real Estate Taxes	Hazard Insurance	Condo/HOA Fees
\$ _____ <input type="checkbox"/> Month <input type="checkbox"/> Year	\$ _____ <input type="checkbox"/> Month <input type="checkbox"/> Year	\$ _____ <input type="checkbox"/> Month <input type="checkbox"/> Year

Other debt:

Name of creditor	Type of Debt	Mo. Payment	Balance	How Secured

11. Extraordinary Expenses (Required & Continuing)

Examples of Extraordinary Expenses are unusually high and long-term (10 months or longer) e.g. medical costs, child care, child support, alimony, tuition, schools required by medical disability.

Monthly Payment	Description of expense (please be specific)

12. **OTHER INFORMATION**

Note: This information also applies to Joint Applicant, if any. If more space is needed, use back page.

1 I have never had an SBA loan or an SBA guaranteed loan, except:	SBA office location, and account (loan) number
2 I have never had any other Federal loans or Federally guaranteed loans, except:	Agency name, office location, and account (loan) number
3 I am not delinquent on any Federal taxes, direct or guaranteed loans (FHA, VA, student, etc.), contracts, grants, or any child support payments, except:	Agency name, office location, and account (loan) number
4 I have never been bankrupt, except:	Provide complete details such as dates, parties involved and current status:
5 I have no judgments or lawsuits pending against me, except:	Provide complete details such as dates, parties involved and current status:
6 In the past year, I have not been convicted of a felony during and in connection with a riot or civil disorder or other declared disaster, nor am I engaged in the production or distribution of any product or service that has been determined to be obscene by a court of competent jurisdiction, except:	Provide complete details:
7 Regarding you or any joint applicant: a) are you presently 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)? <input type="checkbox"/> YES <input type="checkbox"/> NO <i>Provide dates and details for any question answered YES on back page.</i>	

8 Is the applicant/joint applicant currently suspended or debarred from contracting with the Federal government or receiving Federal grants or loans?
 YES NO *Provide dates and details for any question answered YES on back page.*

9 Is the applicant/joint applicant a U.S. citizen? YES NO *If you are not a U.S. Citizen, please provide complete details on back page.*

10 If my loan is approved, I may be eligible for additional funds to cover the cost of safeguarding my property from similar damages as caused by this disaster. It is not necessary for me to submit the description and cost estimates with the application. SBA approval of these safeguarding measures will be required before any loan increase. By checking this box, I am interested in having SBA consider this increase.

11 I have not paid a representative (attorney, accountant, etc.) to assist me with this application, except:

Name and address of representative (please print)	Fee charged or agreed upon
If anyone completed this application on my behalf, whether there is any charge or not, that person must sign in this space below:	
Signature of representative	Date signed

12 SBA has my permission to verify my past and present employment information and salary history as needed to process and service my disaster loan; I authorize my insurance company, bank, financial institution, or other creditors to release to SBA all records and information necessary to process this application.

13 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.

14 If my loan is approved, additional information may be required prior to loan closing. I will be advised in writing what documents will be needed to obtain my loan funds.

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

16 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: Submitting false information to the Government can lead to criminal penalties and/or civil and administrative remedies against you. If you are prosecuted for submitting false information, you may be imprisoned for up to 30 years and/or fined up to \$250,000 under 18 U.S.C. § 1040 and other Federal statutes. The Government may also pursue a civil fraud case against you for three times the amount of your loan, and may exclude you from participating in Federal programs and contracts for submitting false information in-- or with -- your application or if you do not use the proceeds of the loan for the purpose(s) stated in your application and SBA's loan authorization.

SIGNATURES: Be sure to SIGN and date the application in INK. If there is a JOINT APPLICANT, the joint applicant must also SIGN and date in INK in the space provided.

Signature of APPLICANT	Date Signed	Signature of JOINT APPLICANT	Date Signed
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Please check the "FILING REQUIREMENTS" instructions to see that you have included the necessary supporting documents.
 Apply online at <https://disasterloan.sba.gov/ela/> OR send completed application to:
 U.S. Small Business Administration, Processing and Disbursement Center, 14925 Kingsport Road, Fort Worth, Texas 76155

13.

ADDITIONAL INFORMATION

Please refer to Section and Title

[Empty box for additional information]

U.S. Small Business Administration DISASTER HOME LOAN APPLICATION

If you have questions about this application or problems providing the required information, please contact our Customer Service Center at 1-800-659-2955 or disastercustomerservice@sba.gov. If more space is needed for any section of this application, please attach additional sheets.

SBA will contact you by phone or Email to discuss your loan request.

FILING REQUIREMENTS

REQUIRED FOR ALL LOAN APPLICATIONS:

- Complete and sign this application form (SBA Form 5C)
- Complete and sign the Tax Information Authorization (IRS Form 8821/4506-T) enclosed with this application. This income information, obtained from the IRS, will help us determine your repayment ability

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.)

**NOTE: PLEASE READ, DETACH AND KEEP FOR YOUR RECORDS
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.

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 doing pre-notification, as required by Executive Order #12600, or information that would cause competitive harm or constitute a clearly unwarranted invasion of personal privacy.

Send a request under this Act to the SBA office maintaining the records requested and identify it as a Freedom of Information Act (FOIA) request. The request 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 as amended from time to time) for additional background and other routine uses.

Under the provisions of the Privacy Act, you are not required to provide social security numbers. (But see the information under Debt Collection Act below) We use social security numbers to distinguish between people with a similar or the same name for credit decisions and for debt collection purposes. Failure to provide this number may not affect any right, benefit or privilege to which you are entitled by law, but having the number makes it easier for us to more accurately identify to whom adverse credit information applies and to keep accurate loan records.

Note: Any person concerned with the collection, use and disclosure of information, under the Privacy Act may contact the Chief, FOI/PA Office, 409 3rd Street, SW, Suite 5900, Washington, DC 20416 or by e-mail at foia@sba.gov for information about the Agency's procedures relating to the Privacy Act and the Freedom of Information Act.

**DEBT COLLECTION ACT OF 1982; DEFICIT REDUCTION ACT OF 1984; DEBT COLLECTION IMPROVEMENT ACT OF 1996
& other titles (31 U.S.C. 3701 et seq.)**

These laws require us to aggressively collect any delinquent loan payments and to require you to give your taxpayer identification number to us when you apply for a loan. If you receive a loan and do not make payments when they become due, we may take one or more of the following actions (this list may not be exhaustive):

- *Report the delinquency to credit reporting bureaus.
- *Offset your income tax refunds or other amounts due to you from the Federal Government.
- *Refer the account to a private collection agency or other agency operating a debt collection center.
- *Suspend or debar you from doing business with the Federal Government.
- *Refer your loan to the Department of Justice.
- *Foreclose on collateral or take other actions permitted in the loan instruments.
- *Garnish wages.
- *Sell the debt.
- *Litigate or foreclose.

RIGHT TO FINANCIAL PRIVACY ACT OF 1978 (12 U.S.C. § 3401 et seq.)

This notifies you, as required by the Right to Financial Privacy Act of 1978 (Act), of our right to access financial records held by financial institutions that were or are doing business with you or your business. This includes financial institutions participating in loans or loan guarantees.

The law provides that we may access your financial records when considering or administering Government loan or loan guaranty assistance to you. We must give a financial institution a certificate of our compliance with the Act when we first request access to your financial records. No other certification is required for later access. Our access rights continue for the term of any approved loan or loan guaranty. We do not have to give you any additional notice of our access rights during the term of the loan or loan guaranty.

We may transfer to another Government authority any financial records included in a loan application or about an approved loan or loan guaranty as necessary to process, service, liquidate, or foreclose a loan or loan guaranty. We will not permit any transfer of your financial records to another Government authority except as required or permitted by law.

CONSUMER CREDIT PROTECTION ACT (15 U.S.C. 1601 et seq.)

This legislation gives an applicant who is refused credit because of adverse information about the applicant's credit, reputation, character or mode of living an opportunity to refute or challenge the accuracy of such reports. Therefore, if we decline your loan in whole or in part because of adverse information in a credit report, you will be given the name and address of the reporting agency so you can seek to have that agency correct its report, if inaccurate. If we decline your loan in whole or in part because of adverse information received from a source other than a credit reporting agency, you will be given information but not the source of the report.

Within 3 days after the consummation of the transaction, any recipient of an SBA loan which is secured in whole or in part by a lien on the recipient's residence or household contents may rescind such a loan in accordance with "Regulation Z" of the Federal Reserve Board.

PLEASE NOTE: The estimated burden for completing this form is 1.25 hours. Your responses to the requested information are required in order to obtain a benefit under our Disaster Home Loan Program. However, you are not required to respond to any collection of information unless it displays a currently valid OMB approval number. If you have questions or comments concerning any aspects of this information collection, please contact the U.S. Small Business Administration Information Branch, 409 3rd Street, SW, Washington, DC 20416 and Desk Officer for SBA, Office of Management and Budget, Office of Information and Regulatory Affairs, 725 17th Street, NW, Washington, DC 20503. (3245-0018) PLEASE DO NOT SEND FORMS TO OMB.