



See below for the questions that PCAP asks on our online loan application. Please review prior to starting your online application.

If you are interested in applying and do not yet have an application link, please reach out to the PCAP lender in your area to get started!

Loan Application

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Thank you for considering Partner Community Capital (PCAP) for your financing needs. Before completing this application, please contact the PCAP Lender serving your region to evaluate program eligibility: <https://www.partnercapital.org/apply/#guidelines-lenders>

A response to a complete loan package can be made within 10 business days. All loan application materials submitted in connection with the application will become the property of PCAP and will be destroyed or retained based on PCAP's document retention policies.

You must complete this portion of the PCAP loan application in one sitting. Please reserve 10-20 minutes to complete. You cannot save your progress and return later.

To prepare, please review the application questions on our website: [Loan Application Guide - Partner Community Capital \(partnercap.org\)](#).

Primary Contact

Primary Contact First Name: *

Primary Contact Last Name: *

Primary Contact Phone *

Primary Contact Email *

Social Security No. *

Date of Birth *

Driver's license No. *

State Issued *

Additional name(s) credit could be under

Business Title or Role *

Percentage of Ownership *

Citizenship/Immigration Status *

What was the adjusted gross income (AGI) on your most recent personal tax return? (Form 1040, line 11) *

\$

Business Details

Business Name *

Please enter full legal name of business

DBA Name

"Trade Name"

Business Street *

City *

State *

Zip Code *

County *

The funds from this loan will be used at the business and address noted above *

Yes

No

Website URL

Facebook URL

[https://www.facebook.com/\[BUSINESS HANDLE\]](https://www.facebook.com/[BUSINESS HANDLE])

Other social media

[https://www.\[SITE\].com/\[BUSINESS HANDLE\]](https://www.[SITE].com/[BUSINESS HANDLE])

Legal Entity *

Federal Tax ID number (FEIN, ITIN) *

Date Established *

If exact day is unknown, enter 1st of known month and year (MM/01/YYYY)

Referral Information

Who referred you to PCAP? *

Referrer First Name

Referrer Last Name

Referring Organization

Business History & Project Description

Briefly describe your business or organization including products and services offered.

*

Project Description: Describe what you plan to do with this loan.

*

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Ownership Information

Does the business have multiple owners? *

PCAP needs information from owners of 20% or more of the business . Each owner will be asked to complete an additional form with their personal demographic and financial information.

Nonprofits can provide the information for the Executive Director, Treasurer, and/or Board Chairperson.

Please note that any person with 20% or more ownership is required to personally guaranty the loan. If no one person owns 20% or more of the company then a majority will need to guaranty.

Add an Owner

First Name: *

Last Name: *

Phone *

Email *

Business Title or Role *

Percentage of Ownership *

[Add another response](#)

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Business Details

Is 51%+ of this business owned or controlled by one or more persons living with a disability? *

- Yes
- No
- Prefer not to respond

Is 51%+ of the business owned or controlled by one or more racial and/or ethnic minorities? *

- Yes
- No
- Prefer not to respond

Is 51%+ of the business owned or controlled by one or more Veterans? *

- Yes
- No
- Prefer not to respond

Is 51%+ of the business owned or controlled by one or more women? *

- Yes
- No
- Prefer not to respond

How many employees do you have currently? (including full-time and part-time employees) *

enter "0" if not applicable.

How many jobs will this loan enable you to create (including full-time and part-time)? *

enter "0" if not applicable.

Do you provide any benefits to your employees? *

Yes

No

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Project Information

General Loan Information

Loan Request Amount *

\$

Sources of Funds

Describe additional sources of funds you anticipate in your project, besides your loan from Partner Community Capital.

Source Type

Amount

\$

[Add another response](#)

Uses of Funds

Describe how you plan on using the funds you are requesting from us.

Use Type *

Amount *

\$

[Add another response](#)

TOTALS

Total Project Uses

\$

0

Do you have collateral available? *

Yes



Collateral Available

Asset Type *

Q

Asset Value *

\$

Outstanding Debt *

\$

0

[Add another response](#)

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Credit and Environmental Questions


Have you, your business, any co-owner of the business, or any co-borrower been cited for environmental violations in the past 3 years? *

No 


Other than a minor vehicle violation, have you, any co-owner or co-borrower ever:

- Been Convicted Plead ed Guilty Plead ed Nolo Contendere
- Been Placed on Pretrial Diversion Been Placed on Any Form of Parole or Probation (Including Probation Before Judgment) None of these apply


Have you, any co-owner or co-borrower been arrested in the past 6-months for any criminal offense? *

No 

Does the Small Business Applicant operate under a Franchise, License, Distributor, Membership, Dealer, Jobber or another type of Agreement? *


No 

Have you, any co-owner or co-borrower ever led or declared bankruptcy, been involved in receiverships or insolvency proceedings? *

No 

Has your company ever been delinquent on payments of payroll, income, or sales taxes (federal, state, or local) and/or are you currently on a payment plan?

*

No 

Are you, your business, any co-owner or co-borrower presently subject to indictment, have knowledge of any civil or criminal arraignment, or involved in or a knowing subject to any lawsuits, pending litigation or threat of litigation (including Divorce)? *

No



Have you, or any co-owner or the business ever received an SBA, USDA, FHA, Student, or any other Federal loan? *

No



Business Debt Schedule

Does the business have any outstanding debt? *

Yes



Please provide debt schedule details, which should contain loans for contracts and notes payable (not accounts payable or accrued liabilities).

Debt as of Date on Interim Financial Statements

Creditor Name *

Type of Debt *

Creditor's Complete Address

Creditor Date

Original Date

Original Amount *

\$

Present Balance *

\$

Interest Rate *

Monthly Payment *

\$

Collateral Security

Current or Delinquent?

Current

[Add another response](#)

Total Balances of Business Debt Schedule

Total Original Amounts

\$

Total Present Balances

\$

Total Monthly Payment

\$

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Demographics

Gender: How do you identify? *


 

What pronouns would you like us to use?

*

Which of the following best represents how you think of yourself? *

Are you (business owner) a person living with a disability? *

- Yes
- No
- Prefer not to respond

Are you a veteran?

*

- Yes
- No
- Prefer not to respond

Race/Ethnicity: Which of the following race and ethnicities describe you? (Please select all that apply) *

- Asian or Pacific Islander
- Black or African American
- Hispanic or Latino/a
- Middle Eastern or North African
- Native American or Alaskan Native
- White or Caucasian
- Other
- Prefer not to respond

Select as many as apply

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Customer Authorization to Release Information

- I hereby authorize you to release the following information PCAP. By signing, I understand that my information will be sent via secure e-mail.

This authorization covers the documents/forms listed below and is to remain effective until such time, if any, that you receive, in writing, an update, or change to this form.

Designation of Information to Be Released:

- Individual Income Tax Returns – current, extensions, and up to three years prior
- Corporate Income Tax Returns – current, extensions, and up to three years prior
- Business Financial Statements – year-to-date quarterly, yearend, and any other period end dates requested
- Other as Specified

Preferred format and delivery method is through secure email in the following formats:

- Drake (Software Code: EEA)
- Lacerte (Software Code: BAA - left side of page)
- ProSeries (Software Code: BAA - center of page)
- ProSystem fx (Software Codes: LHA & JWA)
- UltraTax CS (Software Code: DAA)

By my signature to this form, I certify that I have the authority to execute this form and I am an authorized signer/owner/other authorized representative for the below named individual/entity and that I agree to indemnify PCAP against any liability related to improper release of any information in regards to this release:

I/We attest that all the information on this application is true and accurate and that I/We am required to modify/update and otherwise advise PCAP of any changes to the answers in my application that should occur prior to closing

I/We authorize PCAP to investigate and verify the above information. I/We also authorize PCAP to perform a credit check, which may include obtaining consumer and/or commercial credit reports and to exchange information about credit experience with other creditors from time to time, as authorized by law during the life of the loan.

The release of all information to PCAP, in any manner, is hereby authorized whether such information is of record or not. I/We also hereby release all persons, agencies, firms, company, etc. from any damages resulting from such information. I/We understand that PCAP will retain this application whether the loan is approved or denied. I/We understand materials submitted to PCAP in connection with my loan application shall become the property of PCAP, unless otherwise requested, and shall be retained or destroyed in accordance with PCAP's document retention policy. **I/We understand that PCAP will charge an origination fee for completed loans.**

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, or age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program, or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act.

In accordance with Federal law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, disability, and reprisal or retaliation for prior civil rights activity. (Not all prohibited bases apply to all programs.) Complaints of discrimination may be filed with the USDA, Director, Office of Civil Rights, 1400 Independence Ave., S.W., Washington, DC 20250-9410

Knowingly making a false statement on this form is a violation of Federal law and could result in criminal prosecution, significant penalties, and a denial of your loan or surety bond application.

By signing this form, I/We certify under penalty of criminal prosecution that
 all information on this form and any additional supporting information
submitted with this form is accurate and completed to the best of my
knowledge.

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Submit

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