



Sonoma County Community Development Commission
 Sonoma County Housing Authority

Commercial Rehabilitation Loan Program Pre-Application

APPLICANT INFORMATION			
Applicant Name, Title:			
Business Name:			
Mailing Address:			
City:	State:	Zip:	
Telephone:	Cell:	Email:	
Date Business Commenced:		How long at current address?	
Sole Proprietorship	Partnership	Corporation	Other:
Federal ID. #:		Social Security Number: Date of Birth:	
PROPERTY INFORMATION			
Property Address:			
City:	State:	Zip:	
APN:	Business Assessors Number:		
Owner Name:			
Type of ownership: Individual___ Partnership___ (Attach Partnership Agreement) Corporation___ (Attach Articles of Incorporation) Trust___ (Attach copy of Trust Agreement)			
Mailing Address:			
Telephone:	Fax:	Email:	
Insurance Information: Submit Copy of Declaration Page		Building Square Footage:	
Is this a Historic National Register Building? Yes___ No___		Is this a building of known local Significance? Yes___ No___	
PROPOSED IMPROVEMENTS			
Improvements planned: <i>check all that apply</i>			
Signage Graphics Awnings Doors Lighting Paint/ Stucco Windows			
Building Rehabilitation Other: Please specify: Describe proposed façade or building rehabilitation improvement and provide a rough estimated cost for the improvements (you may attach additional information if needed):			
Check Requested Loan Amount: 3-Yr /\$5,000 5-Yr/\$15,000 20-Yr/ amortized non-waivable, up to \$50,000			

CERTIFYING STATEMENT

- I certify that:
I am the property owner of record; or
I have obtained and attached the written consent of the property owner of record to participate in program
- I have attached a print (photo) of the existing building façade or interior needing improvements.
- I have read and understand the policies and procedures detailed in the Program Design
- I have provided the Declaration page of the insurance policy for fire and liability insurance for the structure.
- I certify that I meet program qualifications and will abide by such conditions set forth in the application and all conditions which may be issued by the Commission in the implementation of this project.
- I/we declare under penalty of perjury that all the information that we submit is true and accurate to the best of my/our knowledge. I/we understand that failure to disclose all financial information or the submission of incorrect information may result in denial of financial assistance.

APPLICATION AND LOAN FEES

The services listed below may be required to determine whether to approve a loan application. Charges for these services will be included in any loan made if required by staff. There will be no charge to the applicant for these services if the application is not approved. If the applicant makes a voluntary decision not to proceed with the loan after approval, and if there is no other reason why the project cannot proceed, the applicant must reimburse the Commission for the costs incurred for these expenses incurred in evaluating the application.

- Credit report on each loan applicant;
- Structural pest control and other inspections or tests necessary to determine property condition;
- Lead and asbestos risk assessments;
- For loans intended to be secured by real estate, an appraisal of the market value of the property, preliminary title report, and title insurance.

A loan servicing fee will be collected with each monthly payment for amortized loans in excess of \$15,000. As of August 2013, the monthly loan servicing fee is \$6.00.

SIGNATURES

Applicant Signature:	Print Name:	Date:
Property Owner Signature:	Print Owner Name:	Date:

Please submit this form to:
 Sonoma County Community Development Commission
 Attn. **COMMERCIAL FAÇADE/ REHABILITATION PROGRAM**
 1440 Guerneville Road
 Santa Rosa, CA 95403-4107

For further information please contact Fred Bengs, fred.bengs@sonoma-county.org, 565-7542

For Official Use Only		
Date Received:	Lease Attached: Yes No	Photo(s) Attached: Yes No
Accepted:	Date:	
Denied:	Date:	
Printed Name, Title:		Date:
Signature:		

SIGNATURE OF BUSINESS OWNER

DATE

PRINT NAME

SIGNATURE OF BUSINESS CO-OWNER

DATE

PRINT NAME

SIGNATURE OF PROPERTY OWNER

DATE

PRINT NAME