**“5 for 5” Small Business Loan Program**

Economic Development Authority – Town of Bedford

**Application Checklist**

\_\_\_\_7-page Application completed and signed with Application fee of **$100**

\_\_\_\_ Business Plan:   
Include basic info on the company: history, main customers and suppliers, future plans, project description, proposed use of funds, type and number of jobs, and marketing strategy. (<https://www.sba.gov/business-guide/plan-your-business/write-your-business-plan>)

\_\_\_\_ Copy of current Balance Sheet and 2 years of year-to-date Profit & Loss Statements   
(existing businesses only). For start-ups, a basic pro-forma of expected revenue and expenses is needed. Free online assistance is available at score.org, and through Small Business Development Center – Lynchburg Region.

\_\_\_\_ 2 years Federal Tax Forms completed (business and personal)

\_\_\_\_ Form FC-A – Citizenship and Rural Eligibility – Proof that:

1) at least 51% of the outstanding ownership of the business is comprised of those who are either citizens of the United States of America or reside in the United States after being legally admitted for permanent residence, and 2) the business is an eligible small, emerging, privately-owned business or entrepreneur located in the Town of Bedford, an area meeting the USDA criteria for the designation of eligible Rural Area.

\_\_\_\_ List of all owners with percent of ownership (page 1). Note if each owner is a U.S. citizen and if   
 not, the country of citizenship.

\_\_\_\_ Proof of collateral:   
Provide Real estate deed or description; provide VIN and/or Serial Numbers of all vehicles and equipment; attach to completed application. Real estate appraisal will be needed if multiple lenders. Phase 1 Environmental may be needed if property used for other business previously.

\_\_\_\_ DUNS # (Available free at <https://fedgov.dnb.com/webform>)

\_\_\_\_ SAM # (Available free at [http://www.sam.gov/SAM](https://gcc02.safelinks.protection.outlook.com/?url=http%3A%2F%2Fwww.sam.gov%2FSAM&data=02%7C01%7C%7Cac1ced8b3c5a4cebe1f808d7ccf974e2%7Ced5b36e701ee4ebc867ee03cfa0d4697%7C0%7C0%7C637203244084604528&sdata=RXcbmdVQrXg4W2xCaIq%2Bqg98pqktYtgRYZwJ2zBbbQk%3D&reserved=0))

Submit one original copy of this application with all attachments to: Mary Zirkle, Economic Development Coordinator, Town of Bedford – 215 E. Main Street, Bedford VA 24523. If electronic submittal is available, contact staff for an appropriate option. For questions concerning this application, forms or financing program, call 540-587-6006 or email [mzirkle@bedfordva.gov](mailto:mzirkle@bedfordva.gov).

**This institution is an equal opportunity provider.**

**Staff – Upon Loan Approval, the following are required before loan disbursement:**

\_\_\_\_ RD 1940-20 Request for Environmental Info

\_\_\_\_ Form AD-1048 Debarment Form

\_\_\_\_ Form RD-400-4 Assurance Agreement

**“5 for 5” Small Business Loan Program**

Economic Development Authority – Town of Bedford

# Application for Loan

**Section 1: General Information**

Names of All Business Owners:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

US Citizen?  Yes  No If no, country of citizenship? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Owner:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

US Citizen?  Yes  No If no, country of citizenship? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Owner:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

US Citizen?  Yes  No If no, country of citizenship? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business DUNS #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Business SAM #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Entity Type:  LLC  S-Corp  C-Corp  B-Corp  Partnership Sole Proprietorship

**Section 2: Applicant Information** (if more than 2, attach separate sheet)

|  |  |
| --- | --- |
| **Primary Applicant Information** | **Co-Applicant Information (If Applicable)** |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Primary Applicant Name (first, middle, last)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Social Security # Date of Birth  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Physical/Street Address  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City State Zip  Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Home Cell  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email Address | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Co-Applicant Name (first, middle, last)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Social Security # Date of Birth  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Physical/Street Address  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City State Zip  Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Home Cell  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email Address |

**Section 3: Loan Information**

Number of Full Time\* Employee (FTE) Positions Created or Retained: \_\_\_\_\_\_\_\_

\*Full-time Jobs are 30 hours or more per week; Part-time Jobs are 15 hours or more per week. 2 Part-time=1 FTE

Loan Amount Requested: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Up to $5,000 per job created or retained; to a max of $20,000 total)

Would you also want to finance the closing costs?  Yes  No

Purpose (provide a description of what the loan will be used for; loan generally cannot be used to repay current debt) **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Description of Collateral (include VIN or serial numbers for each): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Who owns the collateral? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section 4: Schedule of Real Estate, Other Notes and Liabilities**

**In addition to the information required in Section 5 – Financial Summary, the following is required:**

\_\_\_\_ Schedule of Real Estate owned with creditor’s name, debt balances, and payments

\_\_\_\_ Schedule of Other Notes and Liabilities with creditor’s name, balances, and payments

**\*** Regular occurring bill should not be included in liabilities but disclosed in the real estate, notes and liabilities schedule.

**Section 5:**

1. **Financial Summary of Business (or attach Balance Sheet)**

**Assets**  **Liabilities**

Cash on Hand and in Banks $\_\_\_\_\_\_\_\_\_\_\_ Outstanding Bills $\_\_\_\_\_\_\_\_\_\_\_\_

Savings Accounts $\_\_\_\_\_\_\_\_\_\_\_ Notes Payable to Banks and Others $\_\_\_\_\_\_\_\_\_\_\_\_

Stocks and Bonds $\_\_\_\_\_\_\_\_\_\_\_ Regular Monthly Payments

(Rent, Auto, Insurance) $\_\_\_\_\_\_\_\_\_\_\_\_

Real Estate $\_\_\_\_\_\_\_\_\_\_\_

Other Liabilities and Debts $\_\_\_\_\_\_\_\_\_\_\_\_

Automobile – Present Value $\_\_\_\_\_\_\_\_\_\_\_

**Total Liabilities** $\_\_\_\_\_\_\_\_\_\_\_\_

Personal Property $\_\_\_\_\_\_\_\_\_\_\_

Other Assets $\_\_\_\_\_\_\_\_\_\_\_

**Total Assets $\_\_\_\_\_\_\_\_\_\_\_**

**Income Net Worth (Total Assets – Total Liabilities)**

Yearly Salary $\_\_\_\_\_\_\_\_\_\_\_ Net Worth $\_\_\_\_\_\_\_\_\_\_\_\_

Other Income $\_\_\_\_\_\_\_\_\_\_\_

**Total Income** $\_\_\_\_\_\_\_\_\_\_\_

1. **Financial Summary (Personal) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Assets**  **Liabilities**

Cash on Hand and in Banks $\_\_\_\_\_\_\_\_\_\_\_ Outstanding Bills $\_\_\_\_\_\_\_\_\_\_\_\_

Savings Accounts $\_\_\_\_\_\_\_\_\_\_\_ Notes Payable to Banks and Others $\_\_\_\_\_\_\_\_\_\_\_\_

Stocks and Bonds $\_\_\_\_\_\_\_\_\_\_\_ Regular Monthly Payments

(Rent, Auto, Insurance) $\_\_\_\_\_\_\_\_\_\_\_\_

Real Estate $\_\_\_\_\_\_\_\_\_\_\_

Other Liabilities and Debts

Automobile – Present Value $\_\_\_\_\_\_\_\_\_\_\_ including loans for other businesses $\_\_\_\_\_\_\_\_\_\_\_\_

Personal Property $\_\_\_\_\_\_\_\_\_\_\_ **Total Liabilities** $\_\_\_\_\_\_\_\_\_\_\_\_

Other Assets $\_\_\_\_\_\_\_\_\_\_\_

**Total Assets $\_\_\_\_\_\_\_\_\_\_\_**

**Income Net Worth (Total Assets – Total Liabilities)**

Yearly Salary $\_\_\_\_\_\_\_\_\_\_\_ Net Worth $\_\_\_\_\_\_\_\_\_\_\_\_

Other Income $\_\_\_\_\_\_\_\_\_\_\_

**Total Income** $\_\_\_\_\_\_\_\_\_\_\_

**C. Financial Summary (Personal, if second person) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Assets**  **Liabilities**

Cash on Hand and in Banks $\_\_\_\_\_\_\_\_\_\_ Outstanding Bills $\_\_\_\_\_\_\_\_\_\_

Savings Accounts $\_\_\_\_\_\_\_\_\_\_ Notes Payable to Banks and Others $\_\_\_\_\_\_\_\_\_\_

Stocks and Bonds $\_\_\_\_\_\_\_\_\_\_ Regular Monthly Payments

(Rent, Auto, Insurance) $\_\_\_\_\_\_\_\_\_\_

Real Estate $\_\_\_\_\_\_\_\_\_\_

Other Liabilities and Debts

Automobile – Present Value $\_\_\_\_\_\_\_\_\_\_ including loans for other businesses$\_\_\_\_\_\_\_\_\_\_

Personal Property $\_\_\_\_\_\_\_\_\_\_ **Total Liabilities** $\_\_\_\_\_\_\_\_\_\_

Other Assets $\_\_\_\_\_\_\_\_\_\_

**Total Assets $\_\_\_\_\_\_\_\_\_\_**

**Income Net Worth (Total Assets – Total Liabilities)**

Yearly Salary $\_\_\_\_\_\_\_\_\_\_ Net Worth $\_\_\_\_\_\_\_\_\_\_

Other Income $\_\_\_\_\_\_\_\_\_\_

**D. Financial Summary (Personal, if third person) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Assets**  **Liabilities**

Cash on Hand and in Banks $\_\_\_\_\_\_\_\_\_\_\_ Outstanding Bills $\_\_\_\_\_\_\_\_\_\_\_\_

Savings Accounts $\_\_\_\_\_\_\_\_\_\_\_ Notes Payable to Banks and Others $\_\_\_\_\_\_\_\_\_\_\_\_

Stocks and Bonds $\_\_\_\_\_\_\_\_\_\_\_ Regular Monthly Payments

(Rent, Auto, Insurance) $\_\_\_\_\_\_\_\_\_\_\_\_

Real Estate $\_\_\_\_\_\_\_\_\_\_\_

Other Liabilities and Debts

Automobile – Present Value $\_\_\_\_\_\_\_\_\_\_\_ including loans for other businesses $\_\_\_\_\_\_\_\_\_\_\_\_

Personal Property $\_\_\_\_\_\_\_\_\_\_\_ **Total Liabilities** $\_\_\_\_\_\_\_\_\_\_\_\_

Other Assets $\_\_\_\_\_\_\_\_\_\_\_

**Total Assets $\_\_\_\_\_\_\_\_\_\_\_**

**Income Net Worth (Total Assets – Total Liabilities)**

Yearly Salary $\_\_\_\_\_\_\_\_\_\_\_ Net Worth $\_\_\_\_\_\_\_\_\_\_\_\_

Other Income $\_\_\_\_\_\_\_\_\_\_\_

**Section 6: Credit Report Authorization**

Applicant authorizes the EDA to perform a background check and / or credit check for financial assurances.

**Section 7: Civil Rights and Equal Opportunity**

The following information is requested by the Federal Government in order to monitor the Recipient’s compliance with Section 504 of the Rehabilitation Act of 1973, The Americans with Disabilities Act of

1990, Title VI of the Civil Rights Act of 1964, and the Age Discrimination Act of 1975.

The law requires that the Recipient may neither discriminate on the basis of this information, nor on whether you choose to furnish it. However, if you choose not to furnish it, under Federal regulations the Recipient is required to note race and sex on the basis of visual observation or surname.

You are not required to furnish this information, but are encouraged to do so. If you do not wish to furnish the following information, please check the box below.

**Applicant**

Ethnicity:

White

Asian

Black or African American

Native Hawaiian or Other Pacific Islander

Hispanic or Latino

Not Hispanic or Latino

I do not wish to furnish this information

Sex

Male  Female

**Co – Applicant**

Ethnicity:

White

Asian

Black or African American

Native Hawaiian or Other Pacific Islander

Hispanic or Latino

Not Hispanic or Latino

I do not wish to furnish this information

Sex

Male  Female

***Credit or assistance from this program is provided without regard to sex, marital status, race, color, religion, national origin, age, physical or mental disability, receipt of income from public assistance or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act.***

**Section 8: Disclosure Statements** (Required by USDA)

If the answer to any of the following questions is “Yes”, please furnish details on an attached sheet.

1. Have any owners, officers, directors, guarantors, general partners, or stockholders or limited partners owning 20% or more of the Applicant, ever been charged with, or convicted of, any criminal offense, other than minor motor vehicle violations?  Yes  No

2. Has the Applicant or management of the Applicant been informed of any current or on-going investigation of the Applicant with respect to possible violation of state or federal securities law?   
 Yes  No

3. Has the Applicant or any owners, officers, directors, guarantors, general partners, stockholders, or limited partners owning 20% or more of the Applicant ever been in receivership, filed for bankruptcy or adjudicated as bankrupt?  Yes  No

4. Has the Applicant or any owners, officers, directors, guarantors, general partners, stockholders, or limited partners owning 20% or more of the Applicant, involved in any pending lawsuits?   
 Yes No

5. Does the Applicant or any guarantors owe past due federal, state, or local taxes of any nature?   
 Yes  No

6. Does any EDA Board member of employee, or any board member or employee of any state or local government, board, council, agency, authority, or commission, have any “personal interest” (as defined in the Virginia State and Local Government Conflict of Interest Act) with respect to any aspect of the project or this funding request?  Yes  No

The Applicant(s) hereby understand and agree to the following:

1. Eligibility for financial assistance from the EDA is determined by the information presented in this application and in the required attachments. Any changes in the proposed project from the facts presented herein could disqualify the project. Therefore, the EDA immediately must be advised in writing of any material changes in the information contained in this application.

2. The Applicant understands that neither the submission of this application, nor any other communications (oral or written), creates any legally binding obligations upon the EDA. There is no guarantee of approval.

3. The EDA may require supplemental information from time to time. Any such submitted supplemental information shall become a part of this application.

4. This application shall form a part of any financing or loan agreement between the parties, whether or not expressly adopted by any such financing or loan agreement.

5. In order to keep submitted financial information confidential and not part of public records (unless such information is required by law to be open to the public), each page must be marked “CONFIDENTIAL”.

6. On all loans to or for the benefit of a private enterprise or other non-governmental entity, loan closing costs (attorney fees, recordation costs, etc.) must be paid or deducted from the loan proceeds at closing.

7. Applicant authorizes EDA to contact any and all credit references, obtain credit reports, and otherwise perform whatever background investigations or obtain whatever information EDA deems necessary or desirable in processing this application.

8. Only complete applications will be considered.

**Section 9. Business References (3 needed)**

Business/Entity:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_

Business/Entity:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_

Business/Entity:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_

**Section 10. Attestation**

The undersigned hereby certifies that all information contained above and all information contained in attachments which make up this loan application are true and correct to the best of his/her knowledge and belief, and are submitted for the purpose of obtaining financial assistance from the Economic Development Authority of the Town of Bedford. Applicant hereby agrees to maintain records that identify the source and application of Recovery Funds and post the supplied “And Justice for All” and “Equal Employment is the Law” posters if loan funds are approved. Further, the applicant hereby commits to comply with all federal and state employment tax requirements.

**Applicant Name (printed):**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Title**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Co-Applicant Name (printed):**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Title**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Submit one original copy of this application with all attachments to: Mary Zirkle, Economic Development Coordinator, Town of Bedford – 215 E. Main Street, Bedford VA 24523.   
For questions concerning this application, forms or financing program, call 540-587-6006 or email [mzirkle@bedfordva.gov](mailto:mzirkle@bedfordva.gov).

*This institution is an equal opportunity provider.*