



CITY OF ROSEMEAD

Application Checklist

8838 E. Valley Boulevard, Rosemead, CA 91770

Applicant Name: _____

Date Completed Application Received by City: _____

Note: Applicants name must be consistent throughout the loan package. Name must be exactly as filed on the Fictitious Trade Style or as filed on the Articles of Incorporation.

Application package includes the following checked items:

- _____ City of Rosemead Business Loan Application Form
- _____ Internal Revenue Service Tax Return Verification Form
- _____ Resume for each business owner/manager (see outline provided)
- _____ Business data and history

Please also provide the following:

- _____ Complete Business Plan
- _____ Fictitious Business Name (filing and proof of publication)
- _____ Articles of Incorporation OR Partnership Agreement, Limited Liability Company Article of Organization
- _____ Fiscal year end business financial statements for prior three years (if available)
- _____ Business federal tax returns for the prior three years to include all supporting schedules and statements (if available)
- _____ Copy of current/proposed lease on business premises including assessor's parcel number

Please contact the Planning Division at (626) 569-2140 for further information.



CITY OF ROSEMEAD
JOB CREATION AND BUSINESS INCENTIVE PROGRAM
Application Form

BUSINESS DESCRIPTION		
Business Name:		
Business Address:	City:	State: Zip:
Nature of Business:		
Business License Number (if applicable):		
Does your business have any code violations pending with the City?		
<input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please list violations:		
<hr/> <hr/>		
APPLICANT INFORMATION		
Applicant Type (check all that apply):		
<input type="checkbox"/> Business Owner <input type="checkbox"/> Property Owner		
Name:		
Address:	City:	State: Zip:
Business Phone Number:	Cell:	
Email:		
COMPANY OWNERSHIP (LIST BELOW ALL OWNERS, PRINCIPALS AND OFFICERS)		
Name:	Title:	% Ownership:
Name:	Title:	% Ownership:
Name:	Title:	% Ownership:
PROPERTY OWNER INFORMATION (name as it appears on Deed/Title Documents)		
Name:		
Address:	City:	State: Zip:
Phone Number:	Email:	
LEASE INFORMATION		
Do you have a lease for the property your business now occupies? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Monthly Rental: \$	Years Remaining on Lease:	Renewal Option <input type="checkbox"/> Yes <input type="checkbox"/> No

PROPOSED FACADE IMPROVEMENTS

Please check all that apply:

- Storefront restoration or renovation
- Professional cleaning or repairing of exterior surfaces
- Stucco re-facing
- Permanent signage
- Signage repair or replacement
- Exterior door and window repair or replacement
- Exterior painting of buildings visible from public right-of-way
- Exterior façade treatments (stucco, brick, paint removal, etc.)
- Exterior lighting to enhance the building appearance and/or safety
- Mechanical equipment screening visible from public right-of-way

Other: _____

The City may consider additional improvements not listed as "eligible improvements" that contribute to the overall character of the commercial corridor on a case-by-case basis.

My signature (on this application) certifies the above statements are true and complete. I authorize the City of Rosemead to verify or check any of the information given, including credit references and employment and to obtain credit reports (including my spouse's, if I live in a community property state). I authorize the City of Rosemead to provide credit information about me and my account to others.

I also agree to reimburse the city for its expenses incurred in connection with any credit commitment. These expenses include without limitation the City of Rosemead's appraisal, environmental services, and legal costs and are payable even though the extension of credit may not be consummated.

Applicant Signature

Applicant Signature

Print Name, Title

Print Name, Title

Social Security or Tax Id No. Date

Social Security or Tax Id No. Date

Property Owner Signature

Property Owner Signature

Print Name

Print Name

Fair Credit Notice

The Federal Equal Opportunity Act prohibits creditors from discriminating against applications on the basis of race, color, religion, national origin, sex, marital, 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.



CITY OF ROSEMEAD
JOB CREATION AND BUSINESS INCENTIVE PROGRAM
Personal Resume

PERSONAL DATA

Name: _____ Birth Date: _____
Marital Status: _____ Number of Children: _____
Address: _____ City: _____
State: _____ Zip: _____ Telephone: (____) _____

EDUCATION

High School: _____ From: _____ To: _____
Major: _____
College: _____ From: _____ To: _____
Major: _____
College: _____ From: _____ To: _____
Major: _____

MILITARY SERVICE Applicable Not Applicable

From: _____ To: _____ Branch: _____ Rank: _____

EMPLOYMENT HISTORY (List Current or Last Employment First)

From: _____ To: _____ Name of Company: _____
Address: _____
Position & Description of Duties: _____

From: _____ To: _____ Name of Company: _____
Address: _____
Position & Description of Duties: _____

OTHER PERTINENT INFORMATION



CITY OF ROSEMEAD
JOB CREATION AND BUSINESS INCENTIVE PROGRAM
History of Business

Business Name _____

Nature of Business _____

Types of Products/Services

Customer Profile

Competitive Advertisements

Major Supplies

Geographical Sales Area

Future Plans on Growth/Expansion

How will this loan benefit your company?

Will the funding of the loan create new employment opportunities?

If so, state how _____

