

# Paycheck Protection Program Borrower Application Form

OMB Control No.: 3245-0407 Expiration Date: 09/30/2020

Check One: ☐ Sole proprietor ☐ Partnership ☐ C-Corp ☐ S-Corp ☐ LLC ☐ Independent contractor ☐ Eligible self-employed individual ☐ 501(c)(3) nonprofit ☐ 501(c)(19) veterans organization ☐ Tribal business (sec. 31(b)(2)(C) of Small Business Act) ☐ Other					DBA or Tradename if Applicable						
	D-II		Legal Na					-			
	Pall Spera Company Realtors, LLC						Designate TYNI (TEINI COND. D Die Die.				
Business Address Business TIN (EIN, SSN)   1800 Mountain Rd, PO Box 539   03-0229189   8							Business Phone				
	1000 10	iountain	Ra, F	O Box 53	59		03-022	29189	802 25	302 253-9771	
	St	towa '	\/T	5672			Primary	-		Email Address	
Stowe, VT 05672  Pall Spera						ps@pa	ps@pallspera.c				
Avera	ge Monthly Payroll:	<sup>s</sup> 39,2	216	x 2.5 + EIDL, Advance (if Ap Equals Loan Re	plicable)	\$ <b>9</b>	8,000	Number o	of Employees	9	
Purpo	se of the loan	<u>'</u>		Lquuis Louis IX	<u> </u>		·			.l	
_	t more than one):	Payrol	l Filess	e / Mortgage Inte	rect Illitilities		Other (evaluin)	Rent			
<u> </u>			Leas	o / iviorigage inte	rest Liounnes	<u>'</u>	omei (expiain)	- 20112			
Applicant Ownership  List all owners of 20% or more of the equity of the Applicant. Attach a separate sheet if necessary.											
<b>D</b> 11.6	Owner Name			Title	Ownership %		N (EIN, SSN)		Address	<u> </u>	
Pall	Spera		Manag	ger	100	08	4360079		mons Ln.	, Stow	/e,VI
								05672			
1	f questions (1) or (2) be	elow are ansv	vered "Ye	s." the loan will i	not be approved.						
				Question						Ye	s No
1. Is the Applicant or any owner of the Applicant presently suspended, debarred, proposed for debarment, declared ineligible,											
2. Has the Applicant, any owner of the Applicant, or any business owned or controlled by any of them, ever obtained a direct or guaranteed loan from SBA or any other Federal agency that is currently delinquent or has defaulted in the last 7 years and caused a loss to the government?											
3. Is the Applicant or any owner of the Applicant an owner of any other business, or have common management with, any other business? If yes, list all such businesses and describe the relationship on a separate sheet identified as addendum A.											
4. Has the Applicant received an SBA Economic Injury Disaster Loan between January 31, 2020 and April 3, 2020? If yes, provide details on a separate sheet identified as addendum B.											
<u>I</u> f	questions (5) or (6) ar	e answered "	Yes," the	loan will not be a	ipproved.						
		***************************************		Question	POSTERO DE LA COMPANSION DE LA COMPANSIO				Ye	s T	No
5.						]					
	Initial here to confirm	n your respon	se to que	stion $5 \rightarrow $	PS						
6.	Within the last 5 year been convicted; 2) pl placed on any form of	eaded guilty; of parole or pr	3) pleade robation (i	d nolo contender including probation	e; 4) been placed	on p			· [	]	
	Initial here to confirm	n your respor	se to que	stion $6 \rightarrow $	<u> P</u> 5						
7.	Is the United States t Applicant's payroll c			sidence for all en	nployees of the A	Applic	cant included in	ı the		1	
8.	Is the Applicant a fra	nchise that is	listed in t	the SBA's Franch	nise Directory?						



### Paycheck Protection Program Borrower Application Form

## By Signing Below, You Make the Following Representations, Authorizations, and Certifications

#### **CERTIFICATIONS AND AUTHORIZATIONS**

I certify that:

- I have read the statements included in this form, including the Statements Required by Law and Executive Orders, and I understand them.
- The Applicant is eligible to receive a loan under the rules in effect at the time this application is submitted that have been issued by the Small Business Administration (SBA) implementing the Paycheck Protection Program under Division A, Title I of the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) (the Paycheck Protection Program Rule).
- The Applicant (1) is an independent contractor, eligible self-employed individual, or sole proprietor or (2) employs no more than the greater of 500 or employees or, if applicable, the size standard in number of employees established by the SBA in 13 C.F.R. 121.201 for the Applicant's industry.
- I will comply, whenever applicable, with the civil rights and other limitations in this form.
- All SBA loan proceeds will be used only for business-related purposes as specified in the loan application and consistent with the Paycheck Protection Program Rule.
- To the extent feasible, I will purchase only American-made equipment and products.
- The Applicant is not engaged in any activity that is illegal under federal, state or local law.
- Any loan received by the Applicant under Section 7(b)(2) of the Small Business Act between January 31, 2020 and April 3, 2020 was for a purpose other than paying payroll costs and other allowable uses loans under the Paycheck Protection Program Rule.

For Applicants who are individuals: I authorize the SBA to request criminal record information about me from criminal justice agencies for the purpose of determining my eligibility for programs authorized by the Small Business Act, as amended.

### **CERTIFICATIONS**

The autho	rized representative of the Applicant must certify in good faith to all of the below by initialing next to each one:
125	The Applicant was in operation on February 15, 2020 and had employees for whom it paid salaries and payroll taxes or paid independent

	contractors, as reported on Form(s) 1099-MISC.	dependen
PS	Current economic uncertainty makes this loan request necessary to support the ongoing operations of the Applicant.	

The funds will be used to retain workers and maintain payroll or make mortgage interest payments, lease payments, and utility payments, as specified under the Paycheck Protection Program Rule; I understand that if the funds are knowingly used for unauthorized purposes, the federal government may hold me legally liable, such as for charges of fraud.

The Applicant will provide to the Lender documentation verifying the number of full-time equivalent employees on the Applicant's payroll as well as the dollar amounts of payroll costs, covered mortgage interest payments, covered rent payments, and covered utilities for the eight-week period following this loan.

I understand that loan forgiveness will be provided for the sum of documented payroll costs, covered mortgage interest payments, covered rent payments, and covered utilities, and not more than 25% of the forgiven amount may be for non-payroll costs.

During the period beginning on February 15, 2020 and ending on December 31, 2020, the Applicant has not and will not receive another loan under the Paycheck Protection Program.

I further certify that the information provided in this application and the information provided in all supporting documents and forms is true and accurate in all material respects. I understand that knowingly making a false statement to obtain a guaranteed loan from SBA is punishable under the law, including under 18 USC 1001 and 3571 by imprisonment of not more than five years and/or a fine of up to \$250,000; under 15 USC 645 by imprisonment of not more than two years and/or a fine of not more than \$5,000; and, if submitted to a federally insured institution, under 18 USC 1014 by imprisonment of not more than thirty years and/or a fine of not more than \$1,000,000.

I acknowledge that the lender will confirm the eligible loan amount using required documents submitted. I understand, acknowledge and agree that the Lender can share any tax information that I have provided with SBA's authorized representatives, including authorized representatives of the SBA Office of Inspector General, for the purpose of compliance with SBA Loan Program Requirements and all SBA reviews.

Fall Signature of Authorized Representative of Applicant	April 9, 2020
Signature of Authorized Representative of Applicant	Date
Pall Spera	Manager
Print Name	Title