



KEWAUNEE COUNTY BUSINESS DEVELOPMENT LOAN PROGRAM APPLICATION

Business Name: _____

Street Address: _____

Mailing Address: _____

City: _____

Type of Business: _____ Date Established _____

Telephone Number: _____ Tax ID: _____

Number of Employees: _____ Number if Approved: _____

Applicant's Financial Consultant: _____ Telephone Number: _____

Matching funds of at least one dollar of private funds for each dollar of County Loan funds must be obtained.

A minimum of 10% equity of the total project cost is required.

Please complete the following:

Use of Funds:	Sources of Funds*				Total
	Bank	Owner/Equity	Other	BDLP	
Building & Improvements					
Equipment					
Inventory					
Working Capital					
Total					

LOAN TERMS REQUESTED:

Term (Years) (limited to: 7 working capital, 10 equipment, 10 real estate): _____

Deferred payments requested (limited to 12 payments): _____

Interest only payments requested (limited to 12): _____

COLLATERAL:

	Present Market Value	Present Loan Balance
Land and Building	\$ _____	\$ _____
Machinery & Equipment	\$ _____	\$ _____
Accounts Receivable	\$ _____	\$ _____
Other _____	\$ _____	\$ _____
Total	\$ _____	\$ _____

INDEBTEDNESS:

To Whom Payable	Present Balance	Interest Rate	Maturity Date	Payment Amount	Security

Amounts should correspond with most recent interim financial statement.

MANAGEMENT: (Proprietor, partners, officers, directors, and all holders of outstanding stock)

Name	Title	SSN	Home Address	% Own

1. Have you or any officers of your company ever been involved in bankruptcy or insolvency proceeding?
 Yes _____ No _____ If so, please provide the details as a separate exhibit.

2. Are you or your business involved in any pending lawsuits?
 Yes _____ No _____ If so, please provide the details as a separate exhibit.

3. Do you or your spouse or any member of your household, or anyone who owns, manages, or directs your business or their spouses or members of their household work for Kewaunee County or hold an official position with Kewaunee County?
 Yes _____ No _____
 If so, please provide the name and address of the person and what department employed.

 Employee Name: _____ Department: _____
 Employee Address: _____

4. Does your business, its owners or majority stockholders own or have a controlling interest in other business?
 Yes _____ No _____
 If yes, please provide their names and relationship with your company along with a current balance sheet and operating statement for each as a separate exhibit.

 Name of Business: _____

 Relationship to Applicant: _____

5. Do you buy from, sell to, or use the services of any concern in which someone in your company has a significant financial interest?
 Yes _____ No _____ If yes, provide details in a separate exhibit.

6. Are any of the individuals listed under "Management" on parole or probation?
 Yes _____ No _____ If yes, please provide details as a separate exhibit.

7. Have any of the individuals listed under "Management" been convicted of a crime?
 Yes _____ No _____ If yes, please provide details as a separate exhibit.

All 'Loan Checklist' items must be included for your application to be considered complete.

I / WE CERTIFY that all information in this application is true and complete to the best of my / our knowledge and are submitted to Kewaunee County so that Kewaunee County can decide whether to grant the loan. I / we agree to pay for or reimburse Kewaunee County for the cost of any surveys, title or mortgage examinations, appraisals, etc. performed by non-Kewaunee County personnel provided I / we give my / our consent.

Signature

Title

Print Name

Date

Signature

Title

Print Name

Date

Please return completed application and all attachments to:

Email: kunesh.paul@kewauneeco.org

Mail: Kewaunee County Finance Department
 ATTN: Paul Kunesh
 810 Lincoln St
 Kewaunee, WI 54216

Phone: Please call (920) 388-7110 if you have any questions.

last revised: 03/19/2026