ELA Re-Design OMB / PRA Submission

Home Application Page Review and New Enhancements

Last Update: 11/10/2011

Revision History

Release No.	Date	Revision Description
1.0	10/27/11	Initial creation
1.1	11/10/11	 Change label "Table of Contents" to "Summary provided to facilitate OMB review." Deleted "Page Tree" from document Section 1.20 Welcome – False Statements SC 241; revised text in to insert IG requested language. Section 1.21 Form View – Home Requirements SC 261; corrected typo "This page gives the user information "as" to". Section 1.25 Form View – Home Application Page 2 (Mortgage) SC 272 corrected typo error "ask" to "asks". Section 1.26 Form View – Home Application Page 2 (Landlord) SC 272 corrected typo error "ask" to "asks". Section 1.27 Form View – Home Application Page 3 SC 273 corrected typo error "ask" to "asks". Section 1.30 Form View – Affiliates SC 281; revised information text to clarify when page will be viewed. Section 1.32.1 Form View – Submit SC242; inserted new page for user to certify application is true and correct and review false statements language for a second time. Section 1.33.1 Log Out (Not Submitted); revised information text to add "or "Log Out".

This OMB / PRA review and approval of the ELA includes a re-design of ELA to discontinue the current "Wizard" approach and the introduction of form fill applications for the SBA Form 5C as it has been re-designed.

We have strived to incorporate the revised paper application into ELA using the same language and format. The only language change is in the "Other Information" section where Headquarters has approved the approach of asking questions in such a manner as the applicant will be required to reply either "Yes" or "No". This is the same approach as exists today in the wizard ELA.

We recognize that many applicants of Home applications may have more than one employment or other income or joint applicants. Each of these sections on the form fill SBA Form 5C have links what will allow the user to add as many records as are required.

While creating the electronic form fill documents, we have kept industry best practices for basic web functionality. These are:

- Web navigation, e.g. Next, Previous, Help, and Log Out buttons and links.
- Use of radio buttons instead of check boxes to prevent multiple selections when only one is desired.

Paper Form 5C

Marital Status	Married	Separated
	Unmarried	(Single, Divorced, Widowed)
EL A Form EC		
ELA Form 5C		

* Marital Status	O Married	O Unmarried
	O Separated (S	Single, Divorced, Widowed)

The use of List of Values (LOV) to standardize data selection to match existing DCMS data fields.

Paper Form 5C

Other Inco Source	me - if the income will be used to help repay this loan.
	per Week Bi-Weekly Month Year
Source	
	per Week Bi-Weekly Month Year

ELA Form 5C

Other Inco	ne		
Source	Select One		•
Amount	\$0 P	er O Week	O Bi-Weekly
		O Month	O Year

- Field validation to prevent unsafe import of data into DCMS.
- Field formatting to assist the user when entering dates and other number values.
- Zip Code validation to speed the user experience by populating City, State, and County address fields based on the zip code entered. If the zip code covers more than one county, the applicant will be able to select the correct one. This is the same functionality that exists today in DCMS.

Paper Form 5C			
2.			Applicant(s)
Address			
Address line 2			
City	County	State	Zip Code
ELA Form 5C			
* Address			
Address Line 2			
* Zip Code	City		
County	State		

- Use of business rules to drive some functionality (such as the zip code validation) is necessary but will be limited.
- When user adds a new second mortgage, a panel will display below the current second mortgage record.

Second Mortgage holder's name and address (if any)	Monthly Payment	Present Mortgage Balance
Name		
Address		I
Address Line 2		
Zip Code City State		
Second Mortgage holder's name and address (if any) DELETE	Monthly Payment	Present Mortgage Balance
Name		
Address		I
Address Line 2		
Zip Code City State		
Zip Code City State		

• When the user enters a creditor in "Other Debts", a delete link will appear to the left of the row. When the user clicks "Add another debt" a single row will display at the bottom of the section.

Other Debts				
Name of Creditor	Type of Debt	Monthly Payment	Balance	How Secured
DELETE Bank of America	Credit Cards 🗾 💌	\$125.00	\$3,875.00	

• On the paper application, the 912 question has a space for the user to enter a name. ELA will insert a LOV with the names of the applicant and all joint applicants.

Paper Form 5C

7 Is the applicant or joint applicant currently, or have they <u>ever</u> been: (a) under indictment, on parole or probation (b) charged with or arrested for any criminal offense other than a minor motor vehicle violation, including offenses which have been dismissed, discharged, or not prosecuted; or (c) convicted, placed on pretrial diversion, or placed on any form of probation, including adjudication withheld pending probation, for any criminal offense other than a minor motor vehicle violation? IN Provide dates and details for any question answered YES on back page.

ELA Form 5C

g. Is the applicant or any joint applicant currently, or have they <u>ever</u> been: (a) under indictment, on parole or probation (b) charged with or arrested for any criminal offiense other than a minor motor vehicle violation, including offenses which have been dismissed, discharged, or not prosecuted; or (c) convicted, placed on pretrial diversion, or placed on any form of probation, including adjudication withheld pending probation, for any criminal offense other than a minor motor vehicle vialation?

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After the user has completed the SBA Form 5C, they return here to download the required 8821s based on the	;
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After the applicant has finished, they may submit their application to the SBA	
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This new electronic version of the paper SBA Form 5C contains the exact same fields as the paper form. Som	
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This page contains fields that are dynamically changed to help the user understand what they are answering.	Item
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20% or more of another business	39
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has submitted their application	
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1. Welcome - Terms of Use SC 30;

First page viewed by user when accessing the Electronic Loan Application.

1.1.1. User View



1.2. Welcome - Login – Register SC 31;

New users will click the "Register" button while returning users can simply "Login"

1.2.1. User View

System Requirements The recommended browser for this site is Internet Explorer 8.0 or	r later.
On't remember your User Name? On't remember your User Name?	
Don't remember your Password? • You should allow pop-up messages.	
<u>Check Status of a submitted loan application</u>	

1.3. Welcome – Status SC 33;

This page will be developed in the future. It will be designed so the user will not have to "Login" to ELA. No PII information will be displayed as a result of this page.

1.3.1.	User	View
--------	------	------

U.S. Small Business	Administration		<u>.</u>	Disaster Loan Applicatio			Q.
Your Small Busin	ess Resource		- WUZANI D	Application			
Disaster	Applicatio	n Status				Help?	<u>Exit</u>
To view the sta can be found c		plication, please e	enter the correspo	onding application nur	nber. The 10)-digit applicati	on number
each of these		u enter your applic		h during processing. e step in the process			
Enter you	10 digit appli	cation number					
	10	00099554					
SEARCH							
\bigcirc	\bigcirc	\bigcirc	$\supset \subset$		\bigcirc	\bigcirc	\bigcirc
Acceptance	Initial Review	Request for L documents Ver	<u>oss</u> <u>Unassig</u> ification	ned Loan Officer Assigned	Decision I	Post Decision Activity	Documents Available!
PREVI	ous						
	No. 3245-0017 No. 3245-0018 12						
	SBA	FEMA FAQ	Contact Us	Fact Sheet	Military Re	eservist Loans	

1.4. Welcome - Registration Process SC 34;

This page gives a little information about the registration process and includes a statement that is required by the contractor SBA uses to validate the identity of the users of ELA.

1.4.1. User View



1.5. Welcome - Registration Page 1 SC 60;

The first page of the registration collects the user personal information that we will use to authenticate who they are.

r Small Business Resource		Applic		
er Registration (Part 1 of 2)			<u>Help?</u> Exit
irst Name	MI * Last Na	me	Suffix Select a Suffix	-
ocial Security Number (###	## ####) Why we need this	? * Date of Birth	(MMVDD/YYYY)	
ling Address (<i>pre-disaster</i>)	Why we need this?			
ddress Line 1				
ress Line 2				
p Code City	Sta	ate County		
lail Address <u>Why we need</u>	this? Re-e	nter E-Mail Address		
an additional security mea: o the disaster loan applicat ne to receive your pass co	ion once you complete the	separate "pass code" to registration process.) your phone which you You must have ready a	will need to log ccess to your
rimary Phone (###-###-####		nata Dhana <i>(*** ***</i> **		
			mm)	
1				
				NEXT

1.5.1. User View

1.6. Welcome - Registration Page 2 SC 62;

User establishes their user ID and password and selects the security questions and gives answers that will be used should the user forget their password or ID.

U.S. Small Business Administration SBBA			Disaster Loan Applicatio		<u>A</u>
User Registration (I				H	elp? Exit
*Create Your User Name <i>(Mus</i>	t be at least 6 charac	cters)			
Create Your Password	— items: one upp	ercase letter, or	and must contain at lea ne lower case letter, one % ^ & * () _ + - = [] {	e number, one specia	
*Confirm Password					
* Security Question 1 Select a Security Question 1			•	* Securitγ Answer	1
			_	1	
* Security Question 2 Select a Security Question 2.	198		•	* Security Answer:	2
* Security Question 3				* Security Answer	2
Select a Security Question 3.	175		•		,
Please type the text appea Note: If you cannot view the i code. Then enter the code in	mage for any reas n the box below.	son, please click	c on the speaker icon to) hear the	
PREVIOUS					NEXT

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1.7. Welcome - Pass Code Delivery SC 61;

User selects how they wish to receive their authentication pin.

1.7.1. User View



1.8. Welcome - Authentication Challenge; after receiving their authentication pin, the user is prompted to enter the pin code on this page.

1.8.1. User View

Authentication Challenge You have attempted to access a secure site from an unregistered computer. To complete the login process, please enter the security information below. All fields are required. Fields are not case sensitive. Help A one-time pass code has been sent to your mobile phone (XXX-XXX-8100) using an SMS text message. Please retrieve the pass code and enter it below. Pass Code: Having trouble receiving the Pass code? Submit Submit	Anakam Challenge			
You have attempted to access a secure site from an unregistered computer. To complete the login process, please enter the security information below. All fields are required. Fields are not case sensitive. Help A one-time pass code has been sent to your mobile phone (XXX-XXX-8100) using an SMS text message. Please retrieve the pass code and enter it below. Pass Code: Having trouble receiving the Pass code?				
Please enter the security information below. All fields are required. Fields are not case sensitive. Help A one-time pass code has been sent to your mobile phone (XXX-XXX-8100) using an SMS text message. Please retrieve the pass code and enter it below. Pass Code: Having trouble receiving the Pass code?	Authentication Challenge			
A one-time pass code has been sent to your mobile phone (XXX-XXX-8100) using an SMS text message. Please retrieve the pass code and enter it below. Pass Code: Having trouble receiving the Pass code?	-	-	omputer. To complete the login p	rocess,
Please retrieve the pass code and enter it below. Pass Code: Having trouble receiving the Pass code?	All fields are required. Fields are not cas	e sensitive.		<u>Help</u>
Pass code:			XX-8100) using an SMS text me	ssage.
Submit	Pass Code:			Pass
	Submi	E		

1.9. Welcome – Navigation SC 32;

The user is given information as to the proper use of navigation in the application.

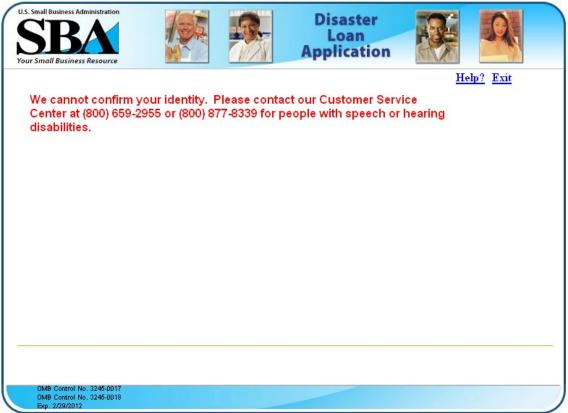
1.9.1. User View

U.S. Small Business Administration	Disaster Loan Application
Navigating the I	Disaster Application <u>Help?</u> Log Out
Vhile using this online a	pplication, it is very important to NOT use your browser's "Back" and "Forward" buttons.
o navigate between pag	es, use the custom navigation tools provided on each page.
NEXT	The "Next" button will save any data you have entered on the page and progress you to the next step in the application process.
PREVIOUS	The "Previous" button should be used to take you back to a page you have already visited, but WILL NOT save any data you have entered on the page you are navigating away from.
Log Out	DO NOT use the "X" in the upper right of your browser window to exit, as your information will not be saved in it's entirety. Use the "Log Out" link at the top corner of the page.
Help?	If you need additional help or direction while using the online application, use the "Help?" link to open a detailed window with clear directions and definitions.
4	The orange exclamation mark indicates that an action has not been started.
	The blue arrow indicates the next action that to be taken.
v	The green check mark indicates that an action has been completed.
PREVIOUS	NEXT
OMB Control No. 3245-001 OMB Control No. 3245-001 Exp. 2/29/2012	

1.10. Welcome - Auth Failure SC 100;

Should we be unable to authenticate the users' identification, they are instructed to contact our customer service center.

```
1.10.1. User View
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1.11. Welcome - Change Password – Temporary SC 130;

When the user has forgotten their password, we send them a temporary password. The user must create a new password on this page.

U.S. Small Business Administration SBBA Your Small Business Resource		Disaster Loan Application	
Change Password			Help? Exit
The temporary password must be o you password.	changed for all future logins.	Please enter a new password	d and click on next to change
* New Password	one uppercase letter, o		east three of the following item ber, one special character from <>/?)
* Confirm New Password			• 10 (Brown, 195 •)
	Your passwords must r	naten	
1			NEXT
PREVIOUS			

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1.12. Welcome - Expired Password SC 131;

User passwords are only good for 90 days. When the password has expired, they are directed to this page to create a new one.

J.S. Small Business Administration		Disaster Loan Application		
our Small Business Resource		Application	ANA KAN	101
Expired Password			<u>Help?</u> Exit	
he expired password must be c assword.	hanged for all future logins.	Please enter a new password	and click Next to change yo	our
* Old Password	-			
* New Password	one uppercase lette	characters and must contain at r, one lower case letter, one nu % ^ & * () _ + - = [] { } \ ; : '	mber, one special character	
* Confirm New Password	_	ν « () <u>-</u> · · · · · · · · · · · · · · · · · · ·	1	
	Your passwords mu	ist match		
PREVIOUS			NEXT	>
OMB Control No. 3245-0017				

1.12.1. User View

1.13. Welcome - Don't Remember Password SC 132;

When the user clicks the "Don't remember password" link on the login page, they are directed here where they must correctly answer to a system generated question the user has previously given us. Then we send them a temporary password.

```
U.S. Small Business Administration
                                                                 Disaster
                                                                    Loan
                                                              Application
 Your Small Business Resource
                                                                                               Help? Exit
Don't Remember Password - Continued
 * User Name
 jdLand&35
Please answer the following question:
 Security Question
 What is your father's middle name?
 * Security Answer
                                                      NEXT
Your password will be e-mailed to you once you click the Next button.
If you did not provide us with an e-mail address, please call our Customer Service Center at (800) 659-2955
or (800) 877-8339 for people with speech or hearing disabilities.
        PREVIOUS
     OMB Control No. 3245-0017
OMB Control No. 3245-0018
Exp. 2/29/2012
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1.13.1. User View

1.14. Welcome - Returning Users SC 141;

Users returning to complete their applications will see a list of the open application in the ELA. They may also start a new application should the need arise.

	ss Resource		Loan Applicat	
elcome		nith n you would like to coi	mplete	Help? Log Ou
eference #	Loan Type	Applicant / Business	Date Last Updated	
<u>00001069</u>	Home	Doe, John J	5/9/2011 12:45:23 PM	
<u>00001068</u>	Business	Green Leaf, LLC	5/8/2011 01:45:063 PM	
<u>00001067</u>	Home	Doe, Todd	5/9/2011 12:45:23 PM	
<u>00001066</u>	Business	Green Leaf, LLC	5/9/2011 12:45:23 PM	
egin a nev	/ applica	OR tion		_
HOMEO	WNERS AN	ID RENTERS	BUSINESS / NON-P	ROFIT / RENTAL PROPERTIES
epair or repla	cement of c	nd Renters for the disaster damaged real operty <i>(including</i>	business property ar	placement of disaster damaged nd/or contents and/or economic ers of rental properties).
<i>.</i>		APPLY		APPLY

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1.15. Welcome - New Users SC 141;

New users must choose what type of application they wish to start on this page.

Disaster Loan Application
<u>Help?</u> Log Ou
1
BUSINESS / NON-PROFIT / RENTAL PROPERTIES
Loans for repair or replacement of disaster damaged business property and/or contents and/or economic injury (including owners of rental properties).
APPLY
User Name: idland100
User Name: Jolano IUU

1.15.1. User View

1.16. Welcome – Home SC 150;

Home application users will identify the type of damage and ownership of the damaged property here.

1.16.1. User View

U.S. Small Business Administration		.	Disaster Loan Application	R.	9,
Home/Personal Pi	operty Loss	es		1	Help? Log Out
* What type of damage di Real Estate					
🗖 Automobile					
* Do you own or rent the a C Own C Rent	address where you	ır damages occ	urred?		
	N.				
C Neither (other location					
* Was the address your p	imary residence a	t the time of the	e disaster?		
C Yes C No					
5. NO					
O It is a secondary home					
Vacation homes or seconda loans. However, if you rent under the business disaster O It is a rental property Rental properties are eligible rented prior to the disaster of business application.	them, they may be loan program. e for assistance as a	eligible as a rent a Business applic	al property (as defined by IR cation if the property was		
C Extended family member	s or other individual(s) are living there	e rent free		
If a family member lived at t apply for a loan.	he residence rent fre	e prior to the dis	aster you, may be eligible t	0	
PREVIOUS					NEXT
OMB Control No. 3245-0017 Exp. 2/29/2012				User Name: jdla	and 100
SBA		Contact Us		tary Reservist Lo	ans

1.17. Welcome – Selection SC 210;

The user enters the zip code of the damaged property and the system will populate the "State" and "County" fields. When they click "Search" button, based on the state and county and information gathered on the "Home" or "Business" pages, the system will generate a list of open declarations.

Help? Log Out * Please enter the Zip Code OR State and County of the property damaged by the disaster. * Zip Code OR State County 75248 OR TX Dallas SEARCH Vervious Next Next Next OMB Control No. 3246:0017 OMB Control No. 3246:0018 Ep. 2789/2012 User Name: jdland 100	U.S. Small Business Administrat				A	Disaster Loan pplication	R.	
Zip Code 75248 OR TX Dallas SEARCH PREVIOUS OMB Control No. 3246-0017 DMB Control No. 3246-0018 User Name: jdiand100	Declaration Se	electio	n					Help? Log Out
75248 OR TX Dallas SEARCH PREVIOUS DMB Control No. 3246-0017 DMB Control No. 3246-0018 User Name: jdiand 100	^k Please enter the Zi	p Code	OR State and Co	ounty of the pr	operty	damaged by the	disaster.	
OMB Control No. 3246-0017 User Name: jdland 100 OMB Control No. 3246-0018 User Name: jdland 100		OR			•	SEARCH		
OMB Control No. 3245-0017 User Name: jdland 100 OMB Control No. 3245-0018 User Name: jdland 100								
	OMB Control No. 3245-0 OMB Control No. 3245-0						User Name:	

1.17.1. User View

1.18. Welcome - Selection 2 SC 210;

This is a representation of the list open disaster declarations the user must select from.

eclara	ation Selection				Help? Log O
Please e	enter the Zip Code <i>OR</i>	State and County of the p	roperty da	maged by the disas	ster.
) Code 5248		State County TX I Dallas	•	SEARCH	
5 15 IS	the disaster that Disaster Name	Disaster Description	State	Disaster Date	Application Filing Deadline
			State TX	Disaster Date 07/14/2011	Application Filing Deadline
Select	Disaster Name	Disaster Description			Filing Deadline

1.18.1. User View

1.19. Welcome - Statements and Exec (Home) SC 240;

User must acknowledge that they have read the statements before they can move on.

1.19.1. User View

U.S. Small Business Administration		<u>.</u>	Disaster Loan		
Your Small Business Resource	M2 1/2	(MZY)	Application	ST.M.	125
				He	elp? Log Out
STATEME	NTS REQUI	RED BY L	AW AND EXECUTI	VE ORDERS	S
To comply with legislation executive agencies, includ information. You can find t Title 13, Code of Federal R order to provide the require Orders that affect SBA's Dis	ing the Small B he regulations a egulations (CFR ed notices, the f saster Loan Prog	usiness Admi and policies in), Chapter 1, ollowing is a b grams.	nistration (SBA), must no pplementing these laws a or our Standard Operatin	otify you of certa and Executive O ng Procedures (S	in rders in SOPs). In
FREEDOM OF INFORMATIC This law provides, with son our files available to persor on our disaster loan progra directors, stockholders or p purpose of loans. We do not doing pre-notification, as r competitive harm or consti Send a request under this. Freedom of Information Act information about the FOIA Washington, DC 20416, or	ne exceptions, t is requesting th ms and other in artners), loan a routinely make equired by Exec tute a clearly us Act to the SBA o (FOIA) request A, contact the C	hat we must r em. This gen iformation su mounts at ma e available to utive Order # nwarranted in ffice maintain . The request hief, FOI/PA (erally includes aggregate ch as names of borrowers turity, the collateral ple- third parties your propri 12600, or information th vasion of personal privac ning the records requeste must describe the specifi	e statistical infor s (and their offic dged, and the ge etary data witho at would cause sy. ed and identify if fic records you w	rmation cers, neral out first t as a
PRIVACY ACT (5 U.S.C. § 55 You can request to see or g is retrieved by individual ic about another party may be information to the request Information Act. This form this collection with state, h	et copies of any lentifiers, such denied unless er or unless the contains writte	as name or S we have the v information i en permission	ocial Security Numbers. written permission of the s subject to disclosure us for us to disclose the inf	Requests for info individual to re nder the Freedor	ormation lease the m of
□ I have read the Statements F	Required by Law a	nd Executive O	ders.		
PREVIOUS				(NEXT
OMB Control No. 3245-0017 OMB Control No. 3245-0018 Exp. 2/29/2012				User Name: jdland	1100
SBA I	FEMA FAQ	Contact U	s Fact Sheet Milit	tary Reservist Loar	ns

1.20. Welcome - False Statements SC 241;

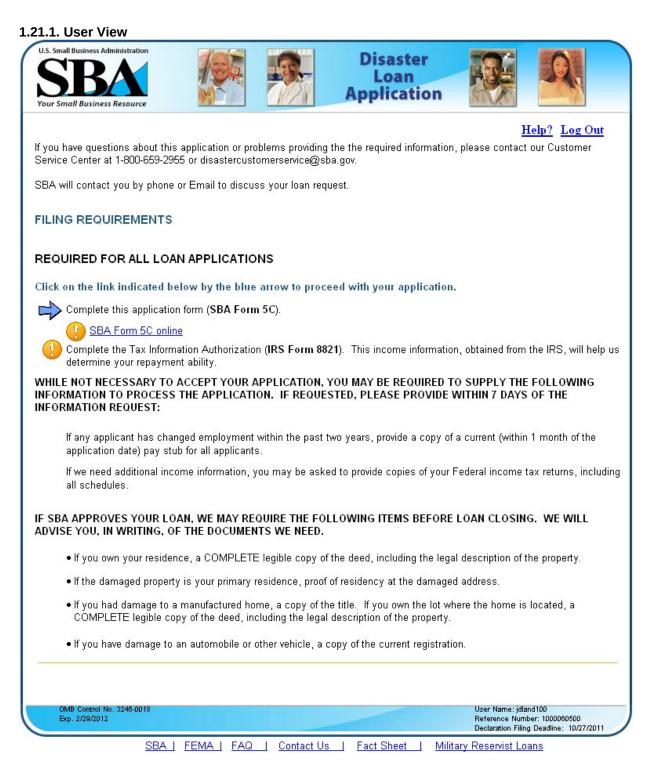
All applicants must acknowledge the False Statements notice before they can move on.

U.S. Small Business Administration Disaster Loan Application our Small Business Resource Help? Log Out CERTIFICATION AS TO TRUTHFUL INFORMATION: By certifying this application, you certify that all information in your application and submitted with your application is true and correct to the best of your knowledge, and that you will submit truthful information in the future. WARNING: Submitting false information to the Government can lead to criminal penalties and/or civil and administrative remedies against you. If you are prosecuted for submitting false information, you may be imprisoned for up to 30 years and/or fined up to \$250,000 under 18 U.S.C. § 1040 and other Federal statutes. The Government may also pursue a civil fraud case against you for three times the amount of your loan, and may exclude you from participating in Federal programs and contracts for submitting false information in -- or with -- your application or if you do not use the proceeds of the loan for the purpose(s) stated in your application and SBA's loan authorization. Certify PREVIOUS NEXT OMB Control No. 3245-0017 OMB Control No. 3245-0018 Exp. 2/29/2012 User Name: jdland100 Reference Number: 1000060500 Declaration Filing Deadline: 10/27/2011 SBA | FEMA | FAQ | Contact Us | Fact Sheet | Military Reservist Loans

1.20.1. User View

1.21. Form View - Home Requirements SC 261;

This page gives the user information as to the required documents for home loans. The requirements pages for both home and business drive the flow for the user.



1.22. Form View - Home Requirements 2 SC 261;

After the user has completed the SBA Form 5C, they return here to download the required 8821s based on the applicant and all joint applicants entered on the 5C.

		<u>.</u>	Disaster Loan	
Your Small Business Resource		CV XV	Application	
				<u>Help?</u> Log O
FILING REQUIREMENTS	5			
REQUIRED FOR ALL LO	AN APPLICATIO	SNC		
🎻 Complete this applicati	on form (SBA For	m 5C).		
Edit SBA Form	<u>5C</u>			
determine your repaym	ent ability.	IRS Form 882	1 to provide later when all	n, obtained from the IRS, will he document are signed. Jout offline submission.
	C (Download IRS			
Robert Smith	(Download IRS			
				O SUPPLY THE FOLLOWING WITHIN 7 DAYS OF THE
INFORMATION TO PROCES INFORMATION REQUEST: If any applicant has ch	S THE APPLICAT	TON. IF REQU	ESTED, PLEASE PROVIDE	
INFORMATION TO PROCES INFORMATION REQUEST: If any applicant has ch application date) pay s	S THE APPLICAT anged employmen tub for all applican	TON. IF REQU t within the past ts.	ESTED, PLEASE PROVIDE 1	WITHIN 7 DAYS OF THE
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INFORMATION TO PROCES INFORMATION REQUEST: If any applicant has ch application date) pay s If we need additional in all schedules. IF SBA APPROVES YOUR L ADVISE YOU, IN WRITING, 4 • If you own your reside • If the damaged prope • If you had damage to	S THE APPLICAT anged employmen tub for all applican come information, OAN, WE MAY RI OF THE DOCUME ence, a COMPLET rty is your primary a manufactured h	TON. IF REQU t within the past ts. you may be asl EQUIRE THE F(NTS WE NEED TE legible copy of residence, proc ome, a copy of	ESTED, PLEASE PROVIDE t two years, provide a copy of ked to provide copies of your DLLOWING ITEMS BEFORE of the deed, including the lega	WITHIN 7 DAYS OF THE a current (within 1 month of the Federal income tax returns, inc LOAN CLOSING. WE WILL al description of the property. d address.
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1.23. Form View - Home Requirements 3 SC 261;

After the applicant has finished, they may submit their application to the SBA.

SBA Jour Small Business Resource			Disaster Loan Application	R.	A,
					Help? Log Out
ILING REQUIREMENTS					
EQUIRED FOR ALL LOAI	N APPLICATIC	ONS			
🗸 Complete this application	form (SBA Form	1 5C).			
Edit SBA Form 5C					
determine your repayment Click the links below to	t ability. download the l	IRS Form 8821	21). This income informat to provide later when a Information		e signed.
John J Smith	(Download IRS		momulor		
oreen Leaf, LLC					
🖌 Robert Smith	(Download IRS	<u>Form 8821)</u>			
VHILE NOT NECESSARY TO A IFORMATION TO PROCESS IFORMATION REQUEST:					
NFORMATION TO PROCESS	THE APPLICAT	ION. IF REQU		E WITHIN 7 DAY	YS OF THE
IFORMATION TO PROCESS IFORMATION REQUEST: If any applicant has chan application date) pay stul	THE APPLICATI	ION. IF REQUI within the past	ESTED, PLEASE PROVID	E WITHIN 7 DA	YS OF THE
IFORMATION TO PROCESS IFORMATION REQUEST: If any applicant has chan application date) pay stul If we need additional inco	THE APPLICATI ged employment b for all applicant ome information, ; AN, WE MAY RE	ION. IF REQUI within the past s. you may be ask QUIRE THE FC	ESTED, PLEASE PROVID two years, provide a copy ced to provide copies of yo PLLOWING ITEMS BEFO	E WITHIN 7 DA	YS OF THE nin 1 month of the e tax returns, includ
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IFORMATION TO PROCESS IFORMATION REQUEST: If any applicant has chan application date) pay stul If we need additional inco all schedules. SBA APPROVES YOUR LOJ DVISE YOU, IN WRITING, OF • If you own your residen • If you own your residen • If the damaged property • If you had damage to a COMPLETE legible cop	THE APPLICATI ged employment b for all applicant ome information, ; AN, WE MAY RE THE DOCUMEN ce, a COMPLETI r is your primary manufactured ho oy of the deed, in	ION. IF REQUI within the past s. you may be ask OUIRE THE FO NTS WE NEED. E legible copy of residence, proo prme, a copy of t cluding the lega	ESTED, PLEASE PROVID two years, provide a copy ed to provide copies of yo PLLOWING ITEMS BEFO of the deed, including the lo f of residency at the dama he title. If you own the lot al description of the proper	E WITHIN 7 DAY of a current (with ur Federal incom RE LOAN CLOS egal description of ged address. where the home ty. ration.	YS OF THE nin 1 month of the e tax returns, includ ING. WE WILL of the property.

1.24. Form View - Home Application Page 1 SC 271;

This new electronic version of the paper SBA Form 5C contains the exact same fields as the paper form. Some web best practices are used to assist the applicant and to prevent them from making errors where possible such as using radio buttons instead of check boxes.

1.24.1. User View

U.S. Small Business Administration SBBAC Sour Small Business Resource	Disaster Loan Application
DISASTER HOME LOAN APPLICATION - F	age 1 of 4 Help? Log Out
FEMA Registration Number:	
1 Information about the Primary Applicant * First Name * Middle Name Suffix * Social Security Number Suffix Birth Date * * Marital Status C Married C Separated (Single, Divorced, Widowed) * Family Size * SBA Employee C Yes C No * Self Employed C Yes C No * 2 Primary Applicant Mailing Address * Address *	Information about the Joint Applicant First Name Middle Name Last Name Suffix Social Security Number Birth Date * Relationship to Applicant C Spouse C Other Family Size SBA Employee C Yes C No Self Employed Sel C Yes C No Self Employed Address Address
Address Line 2 * Zip Code City County State	Address Line 2 Zip Code City County State
3 Primary Applicant Contact Information Please use radio button to indicate the preferred method of contact. C C Home Phone	Joint Applicant Contact Information Please user acid button to indicate the preferred method of contact. C Home Phone C Work Phone C Cell or Alt. Phone C E-mail Address
+ rinnary Applicant closest tenaave not Living what roa	Sound Applicant closest Nelauve Not Living With Fou
Name Phone Number 5 Primary Applicant Employment	Name Phone Number Joint Applicant Employment
Name Phone Number 5 Primary Applicant Employment Employer Name Address Address Line 2 Zip Code City State Length of Employment Years Months Gross Income before taxee) \$0 Per C Week C Month C Year Occupation	Name Phone Number Joint Applicant Employment Employer Name Address Jip Code City State Length of Employment Years Months Gross Income (before taxes) S0 Per C Month C Month C Month C Year
Name Phone Number 5 Primary Applicant Employment Employer Name Address Address Line 2 Zip Code City State Length of Employment Years Months Gross Income QD Per C Week C Month C Month C Month	Name Phone Number Joint Applicant Employment Employer Name Address Address Line 2 Zip Code City State Length of Employment Years Gross Income (before taxes) \$0 Per C Week C Bi-Weekly C Month C Year
Name Phone Number 5 Primary Applicant Employment Employer Name Address Address Line 2 Zip Code City State Length of Employment Years Months Gross Income (before taxes) \$Q Per C Week C Month Occupation Add another employer Other Income - if the income, solid security, refirement or disability income, interest income, almony, child support.	Name Phone Number Joint Applicant Employment Employer Name Address Address Address Line 2 Zip Code City State Length of Employment Years Gross Income (before taxes) S0 Per C Weak Chorth C Year Occupation Add another employet Other Income - if the income will be used to repay this loan. Examples are regular part-time work, social security, referenent or disability income, interest income, elimony, child support.
Name Phone Number 5 Primary Applicant Employment Employer Name Address Address Address Address Address Address City State Length of Employment Years Months Gross Income (before taxes) S0 Per C Week Chorth C Year Occupation Add another employer Other Income - If the income will be used to repey this loen. Examples are regular part-time work, social security, refirement or disability income, interest income, simony, child support. Source Select One Amount \$0 Per C Week C Month C Year	Name Phone Number Joint Applicant Employment Employer Name Address Address Zip Code City State Length of Employment Years Months Gross Income (before taxes) S0 Per C Week Chonth C Year Occupation Add another employer Other Income - if the income will be used to repay this loan. Examples are regular partime work, social security, reterement or disability income, interest income, alignment, social security, reterement or disability income, and support. Source Select One Amount S0 Per C Week C Bi-Weekly C Month C Year
Name Phone Number 5 Primary Applicant Employment Employer Name Address Address Line 2 Zip Code City State Length of Employment Years Months Gross Income (before taxes) S0 Per C Week C Month Cycupation Add.another employer Other Income - if the income will be used to repay this lown. Examples are regular part-time work, social security, refirement or disability income, interest income, alimony, child support. Source Select One Amount §0 Per C Week C Month C Year Add another income source I own 20% or more of a coporation, partnership, limited	Name Phone Number Joint Applicant Employment Employer Name Address Address Address Line 2 Zip Code City State Length of Employment Years Months Gross Income S0 Per C Week Chorth C Year Occupation Add. another employer Other Income - if the income will be used to repay this loan. Examples are regular partime work, social security, reterement or disability income, interest income, alignoy, child support. Source Select One Amount \$0 Per C Week C Bi-Weekly C Month C Year Add another income source I own 20% or more of a coporation, partnership, limited partnership, or LLC C Yes C No

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1.25. Form View - Home Application Page 2 (Mortgage) SC 272;

This page contains fields that are dynamically changed to help the user understand what they are answering. Item # 10 "Debts" on the paper form asks for "Mortgage holder's or Landlord's name and address. This will be automatically filtered based on the information provided elsewhere. Here the question now asks for the "Mortgage holder's name and address" since they have already told us that they own the property.

1.25.1. User View

US. Small Business Administration		Disaster Loan	
Your Small Business Resource		Application	
DISASTER HOME LOAN		•	Help? Log Out
6		Property Address	
Same as applicant mailing address			C Own Home C Rent
* Damage Type: 🗌 Real Estate	Personal Property	Automobile	
* Address			
* Zip Code City	Inouron	County County	State
NO INSURANCE coverage of any I			
Insurance coverage(s) in force for this	loss: Please provide w	hatever information you have ava	
* Type of Coverage Insurance Co Select One	mpany Name	Phone Number Policy Num	ber Amount Received
Select One 💌			
Select One			
8 FEMA \$ S		e received or expected from:	
9 S		Other: Describe	\$
Cash & Bank Accounts (NOT including			Pre-disaster Value
IRAs, Keoghs & other similar retiremen			
Market value of stocks, bonds & other			
Estimated resale value of household go			
Primary residence address	ioda (idmanniga, id oppnor		
Other real estate owned address			
Other real estate owned address			
Other: (vehicles, boats, etc.) describe	Select One		•
Other: (vehicles, boats, etc.) describe	Select One		
		0000	
∏ I have no debts Mortgage holder's Name & Address		Monthly Payment	Present Mortgage Balance
Name			
Address			
Address Line 2 Zip Code City	State	1	
Second Mortgage holder's name and			
Name	uuuress (ir uny)	Monthly Payment	Present Mortgage Balance
Address			
Address Line 2			
Zip Code City Add another mortgage holder	State		
If you own your home and if payment(s) above do NOT include r	eal estate taxes and/or insurance	e, OR if residence is paid for,
Real Estate Taxes	Hazard Insurance	Condo / HC)A faa
\$ O Month O Year	\$ O Month		O Month O Year
		Debts	
Name of Creditor	Type of Debt Select One	Monthly Payment Bala	ance How Secured
	Select One 💌	\$0	\$0
	Select One Select One	\$0	\$0
	Select One	\$0 \$0	\$0
	Select One	\$0	\$0
Add another debt	Select One 💌	\$0	\$0
Add another debt	Fortune and P	(Deminal # C. d. 1. 1.	
Examples of Extraordinary Expenses	are unusually high and lor	ses (Required & Continuing) ng-term (10 months or longer) e.g	. medical costs, child care.
child support, alimony, tuition, school	s required by medical disa	bility.	
Monthly Payment [\$0 Select One	Description of Expense		
\$0 Select One	h	•	
\$0 Select One		v	
4			
PREVIOUS OMB Control No. 3246-0018 Exp. 2704/2012			NEXT User Name: joland100 Reference Number: 100000500 Declaration Filing Deadline: 10/27/2011

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1.26. Form View - Home Application Page 2 (Landlord) SC 272;

This page contains fields that are dynamically changed to help the user understand what they are answering. Item # 10 "Debts" on the paper form asks for "Mortgage holder's or Landlord's name and address. This will be automatically filtered based on the information provided elsewhere. Here the question now asks for the "Landlord's name and address" since they have already told us that they rent the property.

1.26.1. User View

U.S. Small Business Administration		Disaster Loan Application	
Your Small Business Resource	AN APPLICATION - Pa		Help? Log Out
		<u> </u>	
		roperty Address sidence? OYes ONo	C Our Hanne C Part
	ddress * Is this your primary re		C Own Home C Rent
* Damage Type: 🗌 Real Esta	ite 🗌 Personal Property 🔲	Automobile	
* Address			
* Zip Code	ity	County	State
7	Insurance	Information	
	f any kind (flood or other) was in fo		
Insurance coverage(s) in force f * Type of Coverage Insuran		atever information you have a Phone Number Policy Nu	
Select One	ce company warne	Finite Number Folicy Nu	Anount Necelled
Select One 💌			
Select One 💌			
8		received or expected from	
FEMA \$		Other: Describe	\$
9		ssets	Pre-disaster Value
	luding retirement accounts.) Do r		IS
RAs, Keoghs & other similar ret	irement accounts		
Market value of stocks, bonds &	other securities		
Estimated resale value of househ	old goods (furnishings, & applianc	:es)	
Primary residence address			
Other real estate owned address			
Other real estate owned address			
Other: (vehicles, boats, etc.) des	cribe Select One		
Other: (vehicles, boats, etc.) des			-
10		ens	
☐ I have no debts Landlord's Name & Address		Monthly Rent	Present Mortgage Balance
Name			
Address		- 1'	
Address Line 2			
Zip Code City	State		
Second Mortgage holder's nam	e and address (if any)	Monthly Payment	Present Mortgage Balance
Name			
Address Address Line 2		_ '	
Zip Code City	State		
Add another mortgage holds			
If you own your home and if pay		al estate taxes and/or insuran	ce, OR if residence is paid for,
please provide (as applicable): Real Estate Taxes	Hazard Insurance	Condo / H	IOA fee
\$ O Month O Year	S O Month (C Month C Year
	Other D		
Name of Creditor	Type of Debt	Monthly Payment Ba	alance How Secured
	Select One	\$0	\$0
	Select One 💌	\$0	\$0
	Select One Select One	\$0	\$0 \$0
	Select One	\$0	\$0
	Select One	\$0	\$0
Add another debt			
11	Extraordinary Expense	s (Required & Continuing)	
Examples of Extraordinary Exp	enses are unusually high and long	-term (10 months or longer) e	.g. medical costs, child care,
child support, alimony, tuition, : Monthly Payment	schools required by medical disabi Description of Expense	nny.	
	of One	•	
\$0 Seler	st One	•	
	ot One	•	
PREVIOUS			NEXT
PREVIOUS 0M/8 Control No. 3245-0018 Exp. 2/29/2012			User Name: jdland100 Reference Number: 1000080600

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1.27. Form View - Home Application Page 3 SC 273;

The present ELA asks the same questions as are displayed below with the Yes and No answers being required. The 912 question is updated with new language the IG suggested. A list of values displays the names of applicant and all joint applicants. These are similar to the paper 5C.

1.27.1. User View

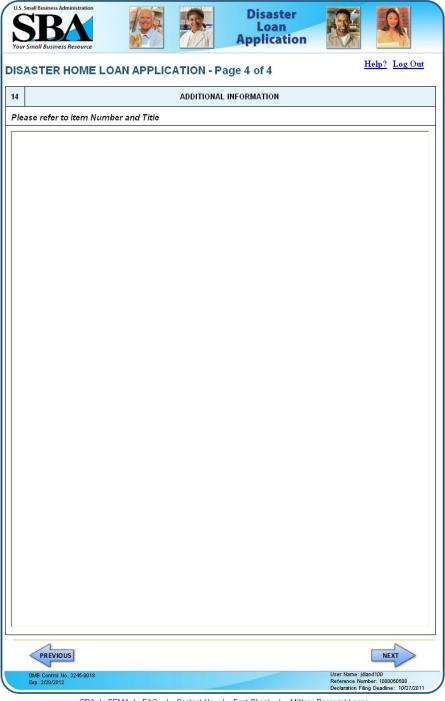
US. Small Business Administration SBBA Signal Business Resource	Disaster Loan Application
DISASTER HOME LOAN APPLICATION - F	Page 3 of 4
12 OTHER	NFORMATION
Note: This information also applies to Joint Applican next page.	nt, if any. If more space is needed, use Number (13) on Provide details for any question answered YES.
a. Has the applicant or joint applicant ever had a SBA loan or a SBA guaranteed loan? C Yes C No	SBA Office location Account number
b. Has the applicant or joint applicant ever had any Federal loans or Federally guaranteed loans? C Yes C No	Agence name Office location Account number
c. Is the applicant or joint applicant delinquent on any Federal taxes, direct or guaranteed loans (FHA, VA, student, etc.), contrancts, grants, or child support payments? C Yes C No	Agence name Office location Account number
d. Has the applicant or joint applicant ever been bankrupt? C Yes C No	Provide complete details such as dates and current status.
e. Does the applicant or joint applicant have a judgement or lawsuit pending? C Yes C No	Provide complete details such as dates and current status.
f. Has the applicant or joint applicant ever been convicted of a felony committed in connection with a riot or civil disorder, nor am lengaged in the production or distribution of any product or service that has been determined to be obscene by a court for the service that has been determined to be obscene by a court	Provide complete details
a crime, placed on pretrial diversion, or placed on any form of pa probation for any criminal offense other than a minor vehicle vi	cial process of having committed a crime; b) have you been een convicted , plead guilty to a crime, plead nolo contendere to rrole or probation including adjudication withheld pending
h. Is the applicant or any joint applicant currently suspended or receiving Federal grants or loans? O Yes O No If YES, pu	debarred from contracting with the Federal government or rovide dates and details in Number "13" on next page.
	wide dates and details in Number "13" on next page.
j, If my loan is approved, Imay be eligible for additional funds to damages as caused by this disaster. It is not necessary for me application. SBA approval of these safegaurding measures will ☐ By checking this box, I am interested in having SBA cons	to submit the description and cost estimates with the be required before any loan inclrease.
k. Has the applicant or joint applicant paid a representative (atto C Yes C No	rney, accountant, etc.) to assist with this application?
Name and address of representative (please print)	Fee charged or agreed upon
I. I authorize my insurance company, bank, financial institution, necessary to procees this application.	or other creditors to release to SBA all records and information
m. SBA has your permission, as required by the Privacy Act, to services(Red Cross, Salvation Army, Mennonite Disaster Servic	release information to state, local or private disaster relief es, etc.) unless I check here.
n. I hereby authorize the Small Business Administration to verify history as needed to process and service my disaster loan.	
 o. If my loan is approved, additional information may be required will be needed to obtain myloan funds. 	prior to loan closing. I will be advised in writing what documents
p. I have received and read a copy of the "STATEMENTS REQU All the information on this application and any doucments pro to provide disaster loan assistance. All damages claimed an could lose my benefits and could be prosecuted by the U.S Reference 18 U.S.C. 1001 and/or 15 U.S.C. 845.	wided is true to the best of my knowledge and you may rely on it a a direct result of the declared disaster. I understand that I
PREVIOUS	NEXT
OMB Control No. 3245-0018 Exp. 2/29/2012	User Name: jdland100 Reference Number: 1000000500 Declaration Filing Deadline: 10/27/2011

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1.28. Form View - Home Application Page 4 SC 274;

Additional information page is the same as the paper 5C.

1.28.1. User View



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1.29. Form View - Add Joint Applicant SC 275;

This page is displayed when the user clicks the "Add another joint applicant" link. Its function is the same as the original page 1 but collects information for 2 joint applicants and more can be added.

1.29.1. User View

US. Small Business Administration	Disaster Loan Application
Vour Small Business Resource	of 5 Help? Log Out
Additional Joint Applicants CANCEL	
1 Information about Joint Applicant # 2 ΣΕΕΕΕΕ	Information about Joint Applicant # 3 DELETE
[^] First Name [^] Middle Name [^] Last Name [^] Social Security Number [^] Birth Date [^] Relationship to Applicant C Spouse [^] C Other [^] Family Size [^] SBA Employee C Yes C No [^] Self Employee C Yes C No [^] Sel	First Name Middle Name Last Name Social Security Number Birth Date Relationship to Applicant C Spouse C Other Family Size SBA Employee C Yes C No Self Employed C Yes C No Mailing Address
* Address	Address
Address Line 2 * Zip Code City County State	Address Line 2 Zip Code City County State
Contact Information Contact Information Please use radio button to indicate the preferred method of contact. C Home Phone C Work Phone C E-mail Address	Contact Information Please use radio button to indicate the preferred method of contact. C Home Phone C Work Phone C Cell or Alt. Phone C E-mail Address
4 Closest Relative Not Living With You	Closest Relative Not Living With You
Name Phone Number	Name Phone Number
1	
5 Employment	Employment
1	
5 Employment Employer Name Address Address Address Address Line 2 Zip Code Zip Code City State State Length of Employment Years Gross Income \$0 Def C Week Di-Weekly	Employment Employer Name Address Address Line 2 Zip Code City State Length of Employment Years Months Gross Income \$0 Per C Week CBi-Weekly
5 Employment Employer Name	Employment Employer Name Address Address Line 2 Zip Code City State Length of Employment Years Months Gross Income (before taxes) \$0 Per C Month C Year Occupation Add another employer Other Income
5 Employment Employer Name	Employment Employer Name Address Address Line 2 Zip Code City State Length of Employment Years Months Gross Income (before taxes) \$0 Per Occupation Add another employer Other Income - if the income will be used to repay this loan. Examples are require partime work, social security, retrement or disability income, interest income, alinony, child support.
5 Employment Employer Name	Employment Employer Name Address Address Line 2 Zip Code City State Length of Employment Years Months Gross Income (before taxes) \$0 State Control Add another employer C Month Occupation Add another employer Other Income - if the income will be used to repay this loan. Examples are regular partitione work, solid security, retrement or disability income, interest income, alimony, child support. Source Select One Amount \$0
5 Employment Employer Name	Employment Employer Name Address Address Line 2 Zip Code City State Length of Employment Years Months Gross Income (before taxes) \$0 S0 Per C Veek Cocupation Add another employer Other Income - if the income will be used to repay this loan. Examples are regular partime work, social security, retirement or disability income, interest income, alimony, child support. Source Select One Amount \$0 \$0 Per C Week C Bi-Weekly
5 Employment Employer Name	Employment Employer Name Address Address Line 2 Zip Code City State Length of Employment Years Months Gross Income \$0 Verars Months Gross Income \$0 Per C Week Bi-Weekly Occupation Add another employer Other Income - if the income will be used to repay this loan. Examples are require part-time work, social security, retirement or disability income, interest income, almony, child support. Source Select One Amount © Per C Week C Bi-Weekly C Month C Year Add another income source I own 20% or more of a coporation, partnership, limited
5 Employment Employer Name	Employment Employer Name Address Address Line 2 Zip Code City State Length of Employment Years Months Gross Lincow \$0 Per C Week C Bi-Weekly C Month C Year Occupation Add another employer Other Income - itthe income will be used to repay this loan. Examples are regular part-time work, social security, retirement or disability income, interest income, alimony, child support. Source Select One Amount \$0 Per C Week C Bi-Weekly C Month C Year Add another income source I own 20% or more of a coporation, partnership, limited partnership, or LLC C Yes C No

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1.30. Form View – Affiliates SC 281;

This page only will appear when the user has indicated that the applicant or any joint applicant indicates they own 20% or more of another business.

1.31. User View

U.S. Small Business Administration			Disaster Loan Application	n 🐺	A.
Affiliated Businesse					<u>Help?</u> <u>Log Out</u>
lease complete the affiliate infi After you've entered the affilia				st.	
Affiliated Business					
* Applicant or Owner Nan	ne for Affiliate deta	ils.			
Select One	•				
* Business Name	* EIN		* Туре	% Owned	
				-	
* Address Line 1	,			,	
Address Line 2 * Zip Code City	S	tate Coun	ty		
			SA	VE CANCEL	
reen Leaf, LLC Affiliate Name <i>Greenleaf, LLC</i>	EIN 12-3456789	Type LLC	% Owned 55%	EDIT DEL	ETE
hn J Smith					
Affiliate Name	EIN	Туре	% Owned		
Please enter	affiliated business	information	for John J Smith.		
PREVIOUS					NEXT
OMB Control No. 3245-0017 OMB Control No. 3245-0018 Exp. 2/29/2012					: jdland100 Number: 1000060500 Filing Deadline: 10/27/2011

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1.32.1. Form View – Submit SC 242:

After the user clicks the "Submit" button on the Business Requirements page, they will see this page that will require that they click the "I Certify check box before their application can be submitted to DCMS.

1.32.2. User View

U.S. Small Business Administration SBBA		Disaster Loan Applicatio	RUE	Q,
				Help? Log Out
CERTIFICATION AS TO nformation in your application a you will submit truthful informat	and submitted with your ap			
WARNING: Submitting false emedies against you. If you a ined up to \$250,000 under 18 t against you for three times the contracts for submitting false in purpose(s) stated in your applic	re prosecuted for submittin J.S.C. § 1040 and other Fe amount of your loan, and r formation in or with yo	ng false information, you may ederal statutes. The Governr may exclude you from partici our application or if you do no	be imprisoned for up t ment may also pursue pating in Federal progr	to 30 years and/or a civil fraud case rams and
□I Certify		CONTINUE		
OMB Control No. 3245-0017				

1.33.1. Log Out (Not Submitted);

New message that displays when the user clicks the "Exit" or "Log Out" links on any of the application pages and has not submitted their application.

1.33.2.	User	View
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U.S. Small Business Administration SBBAA Jour Small Business Resource		9 -	Disaster Loan Application	n R	
ou have logged out of	the Disaster /	Application .			
our information has beer			ot completed your a	pplication. To c	omplete your
application, log back in. F	<pre>teturn to Log in</pre>	<u>l</u> .			
Ve suggest that you <u>close</u> prowser's memory. This is					/ from your
nowed e memory. The is	, coposidily imp	vontanit in you o		e computor.	
OMB Control No. 3245-0017 OMB Control No. 3245-0018 Exp. 2/29/2012					lland100 mber: 1000060500 ling Deadline: 10/27/2011
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1.34. Log Out (Submitted);

New message that displays when the user clicks the "Exit" or "Log Out" links on any of the application pages and has submitted their application.

1.34.1. User View



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