

**PLEASE NOTE: SCREEN SHOTS ARE NOT AVAILABLE FOR SBA'S UNIFIED LENDING PLATFORM SINCE THE NEW SYSTEM IS CURRENTLY BEING BUILT. THE FOLLOWING ELECTRONIC LOAN APPLICATION (ELA) SCREEN SHOTS ARE FROM THE DISASTER LOAN APPLICATION PORTAL (DLAP) IN SBA'S DISASTER CREDIT MANAGEMENT SYSTEM (DCMS) AND WILL BE UPDATED TO REFLECT THE RECENT FORM CHANGES ONCE APPROVED FOR USE.**

DLAP Home Application screens - Form 5C

## Disaster Loan Assistance

Federal Disaster Loans for Businesses, Private Nonprofits, Homeowners, and Renters

### Filing Requirements for Disaster Loan Application # 4000003685

**(Please save this Application # for future access)**

The following sections are required for all loan applications. A green check mark indicates that a section has been completed. Alternate [document delivery options](#) are available if needed.

Complete the <i>Disaster Home / Sole Proprietor Loan Application (SBA Form 5c)</i> .	
Disaster Home / Sole Proprietor Loan Application	<a href="#">Start</a>
Complete and sign each <i>Request for Transcript of Tax Return (IRS Form 4506-T/C)</i> shown below. This income information, obtained from the IRS, will help us determine your repayment ability. <a href="#">Instructions for IRS Form 4506-C</a>	
Request for Transcript of Tax Return	<i>Complete preceding section(s) first.</i>
Read and accept the Truthful Information Certification.	
Truthful Information Certification	<i>Complete preceding section(s) first.</i>
Submit Application and Supporting Documents.	
Submit Application	<i>Complete preceding section(s) first.</i>

WHILE NOT NECESSARY TO ACCEPT YOUR APPLICATION, YOU MAY BE REQUIRED TO SUPPLY THE FOLLOWING INFORMATION TO PROCESS THE APPLICATION. IF REQUESTED, PLEASE PROVIDE WITHIN 7 DAYS OF THE INFORMATION REQUEST:

If any applicant has changed employment within the past two years, provide a copy of a current (within 1 month of the application date) pay stub for all applicants.

If we need additional income information, you may be asked to provide copies of your Federal Income tax returns, including all schedules.

IF SBA APPROVES YOUR LOAN, WE MAY REQUIRE THE FOLLOWING ITEMS BEFORE LOAN CLOSING. WE WILL ADVISE YOU IN WRITING, OF THE DOCUMENTS WE NEED.

If you own your residence, a COMPLETE legible copy of the deed, including the legal description of the property.

If the damaged property is your primary residence, proof of residency at the damaged address.

If you had damage to a manufactured home, a copy of the title. If you own the lot where the home is located, a COMPLETE legible copy of the deed, including the legal description of the property.

If you have damage to an automobile or other vehicle, proof of ownership (a copy of the registration, title, bill of sale, etc.).



Application Information



Damaged Properties



Debts & Assets



Disclosures



Consent



Additional Comments

### Application Information

#### Primary Applicant Information

INFORMATION ABOUT THE APPLICANT		CONTACT INFORMATION	
Copy User Registration Information			
* First Name	<input type="text"/>	* Preferred Contact Method	<input type="text" value="Select an Option"/>
Middle Name	<input type="text"/>	Email Address	<input type="text"/>
* Last Name	<input type="text"/>	Personal Phone	<input type="text" value="____-____-____"/>
Suffix	<input type="text" value="Select an Option"/>	Work Phone	<input type="text" value="____-____-____"/>
* Date of Birth	<input type="text"/>	Closest Relative Not Living with You:	
* Social Security Number	<input type="text"/>	Name	<input type="text"/>
* Marital Status	<input type="radio"/> Married <input type="radio"/> Not Married	Phone	<input type="text" value="____-____-____"/>
* Are you a U.S. Citizen?	<input type="radio"/> Yes <input type="radio"/> No		
* Are you an SBA Employee?	<input type="radio"/> Yes <input type="radio"/> No		
* Household Size	<input type="text"/>		

MAILING ADDRESS					
* Address	<input type="text"/>				
* Zip	<input type="text"/>	* City	<input type="text" value="Select an Option"/>	* State	<input type="text"/>
			County	<input type="text" value="Select an Option"/>	

INCOME INFORMATION	
<input type="checkbox"/> Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Self Employed <input type="checkbox"/> Retired	Employer Name <input type="text"/>
Employer Phone Number	<input type="text" value="____-____-____"/>
* Total Annual Income (before deductions)	<input type="text"/>

**Note:** Include all recurring income from all sources such as employment, self-employment, part-time work, social security, retirement income, disability income, interest income, child support, alimony, etc.  
Do not include one-time or non-recurring income.

DEMOGRAPHIC INFORMATION		
Veteran <input type="checkbox"/> Non-Veteran <input type="checkbox"/> Veteran <input type="checkbox"/> Service-Disabled Veteran <input type="checkbox"/> Spouse of Veteran	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other	Ethnicity <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
Race (Select all that apply) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White		

**Note:** Veteran/Gender/Race/Ethnicity data is collected for program reporting only. Disclosure is voluntary and has no bearing on the loan decision.

[Add Joint Applicant](#)

[Previous](#)

[Save](#) [Next](#)



Application Information



Damaged Properties



Debts & Assets



Disclosures



Consent



Additional Comments

## Damaged Properties

### Damaged Property Information

#### DAMAGED PROPERTY ADDRESS

Same as primary applicant mailing address

(If applicable, please include Apt #, Suite #, Bldg #, Unit # etc.)

\* Address

\* Zip  \* City  \* State  \* County

\* Type of Damage:  Real Estate  Personal Property  Automobile

#### DAMAGED PROPERTY INFORMATION

\* Do you own or rent this property?  Own  Rent

\* Is this property your Primary Residence?  Yes  No

If No, please select from the list below  Vacation/secondary home  I own the property but a family member/friend lives in the property  Rental/Business Property

#### INSURANCE INFORMATION

Homeowner's  Flood  Automobile  Renter's  No Insurance  Other  (describe)

* Policy Type	* Insurance Company Name	Policy Number	Phone Number	Amount Received
Add Insurance				



### Debts & Assets

**DEBTS**  I have no debts

Mortgage Holder or Landlord's Name (Primary Residence)

Name	Monthly Payment/Rent	Current Balance
<input type="text"/>	<input type="text"/>	<input type="text"/>

2nd Mortgage Holder Name (if applicable)

Name	Monthly Payment/Rent	Current Balance
<input type="text"/>	<input type="text"/>	<input type="text"/>

Note: Please complete the section below if the amounts are NOT included in your mortgage payment:

Real Estate Taxes (per year)	Homeowner's Insurance (per year)	Condo/Townhome/HOA/Co-Op Fees (per year)
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Other Debt** including auto payments, credit cards, installment loans, student loans, etc. **Note: Only include debts that will last longer than 10 months.**

*Name of Creditor	*Monthly Payment	Current Balance
<input type="text"/>	<input type="text"/>	<input type="text"/>

Add Debt

### ASSETS

Pre-disaster values:

- \*Cash, Bank Accounts and Marketable Securities (e.g. Stocks & Bonds, CDs, etc.) (Not including retirement accounts)
- \*Retirement Accounts (e.g. IRAs, Keogh, TSP or other similar accounts)
- \*Personal Property (furniture, appliances, vehicles, RVs, etc.)
- \*Primary Residence

All Other Real Estate (describe)	Other Real Estate Description	Other Real Estate Amount
<input type="text"/>	<input type="text"/>	<input type="text"/>

### OTHER DISASTER ASSISTANCE

FEMA Registration Number

\*Other than FEMA, have you received any grant award (i.e. city grants, county grants, state grants, etc.):  Yes  No

State Amount	Other Amount	Describe
<input type="text"/>	<input type="text"/>	<input type="text"/>



## Disclosures

### DISCLOSURES

The responses below apply to the Applicant and Joint Applicant, if any. Please explain any "Yes" responses.

1. Are you delinquent on any Federal taxes, Federal loans, Federal grants, or 60 days past due on any child support obligation? Select an Option ▼
2. Have you filed for bankruptcy in the last 2 years? Select an Option ▼
3. Are you currently a defendant in any lawsuits or have pending judgements against you? Select an Option ▼
4. Are you currently suspended or debarred from contracting with Federal government or receiving Federal grants or loans? Select an Option ▼
5. Do you have federal loans, federally guaranteed loans, or previous SBA loans? Select an Option ▼
6. Are you engaged in the production or distribution of any product that has been determined to be obscene by a court of competent jurisdiction? Select an Option ▼
7. In the past year, have you been convicted of a felony committed in connection with a riot or civil disorder? Select an Option ▼
8. Are you presently, a) subject to an indictment, criminal information, arraignment, or other means by which formal criminal charges are brought in any jurisdiction; b) have you been arrested in the past six months for any criminal offense; c) for any criminal offense other than a minor vehicle violation -- have you ever: 1) been convicted, 2) plead guilty, 3) plead no lo contendere, 4) been placed on pretrial diversion, or 5) been placed on any form of parole or probation (including probation before judgement)? Select an Option ▼

### PHYSICAL DAMAGE LOANS ONLY

If your application is approved, you may be eligible for additional funds to cover the cost of Mitigating measures (real property improvements or devices to minimize or protect against future damage from the same type of disaster event). It is not necessary for you to submit the description and cost estimates with the application. SBA must approve the mitigating measures before any loan increase. SBA will provide you more information about the mitigation measures for which you may be eligible.

I'm not interested in learning more about how to increase my loan amount for mitigation measures.

### REPRESENTATIVE INFORMATION

If you have paid a representative (packager, attorney, accountant, etc.) to assist you in completing the application, please complete the section below.

Representative Name	Street Address	City	State	Zip	Fee charged or agreed upon
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

[Previous](#)

[Save](#)

[Next](#)

Application Number: 4000003686



## Consent

### CONSENT

I authorize my insurance company, bank, financial institution, or other creditors to release to SBA all records and financial information necessary to process this application.

SBA has my permission, as required by the Privacy Act, to release any information collected in connection with this application to Federal, state, local, tribal or nonprofit organizations (e.g. Red Cross, Salvation Army, Mennonite Disaster Services, SBA Resource Partners) for the purpose of assisting me with my SBA application, evaluating my eligibility for additional disaster assistance, or notifying me of the availability of such assistance.

If my loan is approved, I may be eligible for additional funds to safeguard my property from damages similar to those caused by this disaster. Although it is not necessary for me to provide with my application, a description and cost estimate will be required prior to SBA approval of the mitigation measure.

I have received and read a copy of the "STATEMENTS REQUIRED BY LAWS AND EXECUTIVE ORDERS" which was attached to this application.

**CERTIFICATION AS TO TRUTHFUL INFORMATION:** By signing 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:** Whoever wrongfully misapplies the proceeds of an SBA disaster loan shall be civilly liable to the Administrator in an amount equal to one-and-one half times the original principal amount of the loan under 15 U.S.C. 636(b). In addition, any false statement or misrepresentation to SBA may result in criminal, civil or administrative sanctions including, but not limited to: 1) fines and imprisonment, or both, under 15 U.S.C. 645, 18 U.S.C. 1001, 18 U.S.C. 1014, 18 U.S.C. 1040, 18 U.S.C. 3571, and any other applicable laws; 2) treble damages and civil penalties under the False Claims Act, 31 U.S.C. 3729; 3) double damages and civil penalties under the Program Fraud Civil Remedies Act, 31 U.S.C. 3802; and 4) suspension and/or debarment from all Federal procurement and non-procurement transactions. Statutory fines may increase if amended by the Federal Civil Penalties Inflation Adjustment Act Improvements Act of 2015.

Previous

Save

Next

OMB Control No. 3245-0018  
Exp. 10/31/2024

Application Number: 4000003686



## Additional Comments

(4000 character(s) left)

Previous

Save

Next

OMB Control No. 3245-0018  
Exp. 10/31/2024