

INDUSTRIAL DEVELOPMENT AUTHORITY OF GILA COUNTY
Commercial Loan Application

CONTACT INFORMATION			
Name:			
Mailing Address:			
City:	State:	Zip:	
Telephone:	E-mail:		
BUSINESS INFORMATION			
Business Name:			
Business Address:			
City:	State:	Zip:	
Tax I.D. #:			
Type of Business:			
Telephone:	E-mail:		
Bank Name:			
Bank Address:	Telephone:		
City:	State:	Zip:	
MANAGEMENT (Proprietor, Partner, Officers-%of Ownership must total 100%)			
Name:	Address:	Title	%
BUSINESS OBLIGATIONS (Loans, credit cards, etc.)			
Creditor Name	Amount	Balance	Payment
LOAN REQUEST			
Amount Requested:			
Term Amount:			
Purpose of Loan:			
Detailed use of loan proceeds: (Attach additional information if necessary)			
SIGNATURES			
All information in this application is true and complete to the best of my knowledge.			

Signature: _____

Title: _____

Date: _____

Signature: _____

Title: _____

Date: _____