

# LAKE WORTH CRA LOAN FUND

## INTAKE FORM

SENT BY:	
DATE:	
PART I: BUSINESS/CONTACT INFORMATION	
Name:	Title:
Company name:	
Phone:	
Website:	
E-mail:	
Registered company address:	
City:	
State:	
ZIP Code:	
Type of Business:	Sole Proprietorship    LLC    Partnership    Non Profit    S-Corporation    Corporation
Project Address:	
Is location within Lake Worth CRA District? :	
How did you learn about the loan program?:	
What is the estimated dollar amount of your loan request?:	
For what purpose are you requesting a small business loan?:	
Do you have a business plan?:	
PART II: TECHNICAL ASSISTANCE PLAN	
Name:	Date:
File Number:	Date Input:

