DISASTER HOME / S					
SBA Internal Use Only:					
	Date ReceivedLocationBy				
SBA Application Number: FEMA Registration Number:	Filing Deadline: Declaration Number:				
ARE YOU APPLYING FOR:					
Primary Residence Sole Proprietor - Phy	vsical Damage Sole Proprietor - Economic Injury				
INFORMATION ABOUT THE APPLICANT(S)					
Primary Applicant	Joint Applicant				
First Name Theodore Middle Name Walter	First Name Middle Name				
Last Name Elliot Suffix	Last Name Suffix				
Social SecurityNumber 471-23-4567 Date of Birth 03/11/1970	Social SecurityNumber Date of Birth				
Household Size 5					
Marital Status Married Not Married	Marital Status Married Not Married				
Are you a U.S. Citizen?	Are you a U.S. Citizen?				
Are you an SBA Employee?	Are you an SBA Employee?				
CONTACT INFORMATION					
Check your preferred method of contact:	Check your preferred method of contact:				
E-mail Address ted.elliot@gmail.com	E-mail Address				
Cell Phone 320-555-1234	Cell Phone				
Home Phone	Heme Phone				
Work Phone 320-555-1235	Work Phone				
ClosestRelative Not Living WithYou: Name: Angel Elliot Phone Number: 320-555-4	DAMAGED PROPERTY INFORMATION				
DAMAGED PROPERTY ADDRESS additional damaged properties added in "addition					
Address	this property?				
City County State	Zip Isthis property your Primary Residence? Yes No				
Type of Damage: Real Estate Personal Property	Automobile If No, please select from the list below:				
MAILING ADDRESS if different than the damaged property address.	Vacation/secondary home				
Address	member/friend lives in the property				
City County State	Zip Rental/Business Property				
INCOME INFORMATION					
Primary Applicant	Joint Applicant				
Employed Unemployed SelfEmployed Retired	Employed Unemployed SelfEmployed Retired				
Total Annual Income (before deductions) \$ 105000.00	Total Annual Income (before deductions) \$				
EmployerName Ted's Bakery	Employer Name				
Employer Phone Number 320-555-1234	Employer Phone Number				
Note: Include all reoccurring income from all sources such as employment, self-employment, part-time work, social security, retirement income, disability income, interest income, child support, alimony, etc. Note: Include all reoccurring 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-reoccurring income.	Do not include one-time or non-reoccurring income. Do not include items covered by Primary Applicant				
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DEBTS I have no debts			
Mortgage Holder or Landlord's Name (Primary Residence)	Monthly Payment/Rent	Current Balance	
Name Theodore Elliot	\$858.46	\$ 122425	
2nd Mortgage Holder Name (if applicable)	Monthly Payment/Rent	Current Balance	
Name	\$	\$	
Note: Please complete the section below if the amounts are NOT inc	luded in your mortgage payn	nent:	
RealEstateTaxes Homeowner's Insurance	Condo/Townhome/H0	<u>DA/Co-Op Fe</u> es	
\$2150 peryear \$1290 peryear	\$	per year	
Other Debt including auto payments, credit cards, installment loans, stu Name of Creditor	dentloans, etc. Note: O	nly include debts that will last lo Monthly Payme	••••••••••••••••••••••••••••••••••••••
BF Bank & Trust		\$ 324.95	\$3526
SOFIT Student Loan		\$ 125.95	\$10055
		s	\$
		*L	
		\$\$	\$
		\$	\$
		\$	\$
INSURANCE INFORMATION			
Please check all insurance in force for the damaged property:		(describe)	
Homeowner's Flood Automobile Renter's	No Insurance	ther:	
PolicyType Insurance Company Name	Policy Number	Phone Number	Amount Received
			\$
			\$
			\$
OTHER DISASTER ASSISTANCE			
Other than FEMA, have you received any great award (i.e. city grants, cou	unty grants, state grants, etc.):		Yes 🗸 No
ASSETS			
Pre-disaster values;			F
Cash, Bank Accounts and Marketable Securities (e.g. Stock & Bonds,			
Retirement Accounts (e.g. IRAs, Keogh, TSP or other similar accounts)		\$ 180500
Personal Property (furniture, appliances, vehicles, RVs, etc.)			\$ 25000
Primary Residence.			\$ 250000
All Other Real Estate (describe)			\$
DISCLOSURES			
The responses below apply to the Applicant and Joint Ap			Vos // No
1. Are you delinquent on any Federal taxes, Federal loans, Federal			
2. Are you currently a defendant in any lawsuits or have pending judgeme	ents against you?		Yes ✓ No
3. Are you currently suspended or debarred from contracting with Fed			
4. Do you have federal loans, federally guaranteed loans, or previous SBA			Yes 🖌 No
Are you engaged in the production or distribution of any product the jurisdiction?	at has been determined to be c	bscene by a court of competent	Yes 🗸 No
6. In the past year, have you been convicted of a felony committed in con			
 Are you presently, a) subject to an indictment, criminal information, arra jurisdiction; b) have you been arrested in the past six months for any crim have you ever; 1) been convicted, 2) plead guilty, 3) plead nolo contemparole or probation (including probation before judgment)? 	ninal offense: c) for any criminal	offense-other than a minor vehicle vi	iolation
parole or probation (including probation before judgment)? SBA Form 5C (05-18) Ref SOP 50 30	Page 2 of 6		

REPRESENTATIVE INFORMATION	
If you have paid a representative (packager, attorney, accountant, etc.) to assist you in completing the application,	
Nameand Address of Representative:	Fee charged or agreed upon
NA (Insert name and address if someone completed this form for a fee)	\$ 500.00 (only if paid)
CONSENT	
I authorize my insurance company, bank, financial institution, or other creditors to release to SBA all records and financial in	nformation 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 (e.g. Red Cross, Salvation Army, Mennonite Disaster Services, SBA Resource Partners) for the purpose of assisting me with my 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 provide with my application, a description and cost estimate will be required prior to SBA approval of the mitigation measure.	this disaster. Although it is not necessary for me to

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 15U.S.C. 645, 18U.S.C. 1001, 18U.S.C. 1014, 18U.S.C. 1040, 18U.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.

Signature of Applicant	Date	Signature of Joint Applicant	Date

DDITIONAL COMMENT

SAMPLE

Disaster **Request for Transcript of Tax Return**

▶ Do not sign this form unless all applicable lines have been completed.

Request may be rejected if the form is incomplete or illegible.

▶ For more information about Form 4506-T, visit www.irs.gov/form4506t.

Tip. Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Get a Tax Transcript..." under "Tools" or call 1-800-908-9946. If you need a copy of your return, use Form 4506, Request for Copy of Tax Return. There is a fee to get a copy of your return.

1a Name shown on tax return. If a joint return, enter the name shown first.	1b First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)		
Theodore Walter Elliot	471-23-4567		
2a If a joint return, enter spouse's name shown on tax return. Angel Marie Elliot	2b Second social security number or individual taxpayer identification number if joint tax return		
Angel Marie Elliot	470-12-3456		

Cedar Lane Willmar, MN 56201

4 Previous address shown on the last return filed if different from line 3 (see instructions)

5a If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number.

U.S. Small Business Administration Office of Disaster Assistance

5b Customer file number (if applicable) (see instructions)

Caution: If the tax transcript is being mailed to a third party, ensure that you have filled in lines 6 through 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy. Once the IRS discloses your tax transcript to the third party listed on line 5, the IRS has no control over what the third party does with the information. If you would like to limit the third party's authority to disclose your transcript information, you can specify this limitation in your written agreement with the third party.

3	6	Transcript requested. Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number request.	per
	а	Return Transcript, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120-A, Form 1120-H, Form 1120-L, and Form 1120S. Return transcripts are available for the current-year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days.	
	b	Account Transcript, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 10 business days	
	C	Record of Account, which provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. Available for current year and 3 prior tax years. Most requests will be processed within 10 business days	~
	7	Verification of Nonfiling, which is proof from the IRS that you did not file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days	
	8	Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript. The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2011, filed in 2012, will likely not be available from the IRS until 2013. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 10 business days	
		n: If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed ur return, you must use Form 4506 and request a copy of your return, which includes all attachments.	
	0	Very or parind requested. Enter the anding date of the year or parind using the mm/dd/sear format. If you are requesting more than four year	

9	Year or period requested. Enter the en periods, you must attach another	nding date of the ye Form 4506-T. For	ar or period, using t requests relating	the mm/dd/yyyy fo	ormat. If you are reques	sting more than four years or
3	each quarter or tax period separately.	12 / 31 /	2018 12 /	31 / 2017	/ /	/ /
Caution: Do not sign this form unless all applicable lines have been completed.						

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, at least one spouse must sign. If signed by a corporate officer, 1 percent or more shareholder, partner, managing member, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. Note: This form must be received by IRS within 120 days of the signature date.

	tory attests that he/she has read the attestation clause and upon so rea rity to sign the Form 4506-T. See instructions.	ding declares that he/she has the	Phone number of taxpayer on line 1a or 2a
Ciam	Signature (see instructions)	Date	
Sign Here	Title (if line 1a above is a corporation, partnership, estate, or trust)	1	
	Spouse's signature	Date	
	n Art and Danamual Daduction Art Nation are new 2	C . 11	F. 4506 T (D. 0.0010)

For Privacy Act and Paperwork Reduction Act Notice, see page 2.