



Loan Application Commercial Revitalization Loan Fund (CRLF) and ED-RLF



Version: 5.22.2012

SECTION A: APPLICANT INFORMATION

Business Legal Name:	
Doing Business As (DBA):	
Street Address:	
City/State/Zip:	
Municipality:	
Web Site:	
DUNS Number*:	
Contact Person Regarding this Application	
Name:	
Title/Position Function:	
Street Address:	
City/State/Zip:	
Phone Number:	
Alternate Phone:	
Fax Number:	
E-mail Address:	

*A Data Universal Numbering System (DUNS) number must be provided for each business. A business may contact Dun & Bradstreet at 1-800-333-0505 to register and obtain a free DUNS number.

SECTION B: BUSINESS INFORMATION

1. Legal Structure (*check one*)

- | | | |
|--|--|--|
| <input type="checkbox"/> Sole Proprietorship | <input type="checkbox"/> Corporation | <input type="checkbox"/> Limited Liability Company (LLC) |
| <input type="checkbox"/> General Partnership | <input type="checkbox"/> S-Corporation | <input type="checkbox"/> Limited Liability Partnership (LLP) |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Other _____ | |

2. Is there a written operating agreement, partnership agreement, or bylaws? Yes No

3. If an LLC, is the LLC managed by all members? Yes No. If no, who is the managing member?

4. Date Business Originally Established _____

5. Number of Years Under Current Ownership _____

6. Type of Business (check all that apply):

- | | | | |
|---------------------------------------|--|--|--|
| <input type="checkbox"/> Architecture | <input type="checkbox"/> Consultant | <input type="checkbox"/> Construction Contractor | <input type="checkbox"/> Engineering |
| <input type="checkbox"/> Fabricator | <input type="checkbox"/> Finance | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Retail/Vendor |
| <input type="checkbox"/> Service | <input type="checkbox"/> Transportation | <input type="checkbox"/> Wholesale/Distributor | <input type="checkbox"/> Legal |
| <input type="checkbox"/> Broker | <input type="checkbox"/> Other (specify) | | |
-

7. Certifications held by business (check all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Minority Business Enterprise | <input type="checkbox"/> Small Business Enterprise |
| <input type="checkbox"/> Section 3 Business | <input type="checkbox"/> Women-Owned Business Enterprise |

8. How many years have you been doing business under your present firm or trade name?

_____ years

9. Please list any other names under which this business may have operated:

10. Current number of employees: _____ Full-time _____ Part-time

11. How many hours per week does an employee work to be considered full-time? _____

12. Briefly describe the primary products and/or services of the business.

13. Briefly describe critical trends in the business/industry in which this business is operating.

14. Describe the existing and potential target customers of the business.

15. Ownership of Business - Identify all owners; attach separate sheet if necessary. Personal financial statements will be required for each owner of 20% or more of the business.

Name	Address	Latino or Hispanic (Y / N)	Race*	Gender*	Ownership		Voting %
					%	Date	

* Demographic Options

Gender: <ul style="list-style-type: none"> • Female • Male 	Race: (Indicate all that apply) <ul style="list-style-type: none"> <li style="width: 50%;">• African-American, Black (B) <li style="width: 50%;">• Native American (NA) <li style="width: 50%;">• White, Caucasian (W) <li style="width: 50%;">• Asian (A) <li style="width: 50%;">• Pacific Islander (PI)
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16. If your business is incorporated please provide names of all officers.

Board of Directors	Title	Latino or Hispanic	Race*	Gender*
	President			
	Vice President			
	Secretary			
	Treasurer			

17. Provide information on the key members of your management team. Please be sure to attach resumes.

Management Team	Title	Latino or Hispanic	Race*	Gender*

SECTION C: PROJECT AND FINANCING REQUEST

18. Provide a description of the location where the project will take place, indicate whether the site is leased or owned, and the current zoning. Attach a map to this application.

Project Name:	
Street Address:	
City/State/Zip:	
Municipality:	

Owned or Leased:	
Current Zoning:	

19. Provide a description of the proposed project.

20. Provide information on the site acreage, square footage of the facility currently used by your business (if any) and proposed facility, whether the business will own or lease each facility, and the current and proposed number of tenants in each facility.

Facility	Site Acreage	Square Footage	Own/Lease	Number of Tenants
Existing Facility				
New/Rehabbed Facility				

21. If this project involves the purchase of land, provide a legal description of the property to be purchased.

22. If this project involves the purchase of land and/or existing building(s), provide a description of the current and any prior uses of the property.

23. If this project involves the purchase of land/or existing buildings, have any environmental studies been done?
 Yes No (If yes, please attach one copy.)

24. Will the project require any change in zoning? Yes No

25. Will the project involve the demolition or conversion of any existing structures? Yes No

26. Provide a description of the sources and uses of funds for the project. Please note that a detailed budget showing the sources and uses of all funds for the project is required to be attached.

Uses of Funds	Dane County CRLF/RLF Funds	Source 2 Name:	Source 3 Name:	Total
Acquisition of Land or Buildings				
Rehab or remodeling				
New Equipment				

Uses of Funds	Dane County CRLF/RLF Funds	Source 2 Name:	Source 3 Name:	Total
Inventory				
Working Capital				
Other,				
Total				
Total				

27. Business Loan Terms. For each existing loan source identified in 26, please indicate the loan terms, original amount of the loan, the current outstanding balance, and the name and phone number of your contact person.

Source	Interest Rate	Terms	Original Amount	Current Outstanding Balance	Contact Name/ Phone Number

28. Collateral. Provide a description of the collateral for this proposed loan. (Please attach one copy of any appraisals that have been done.)

Collateral	Cost	Appraised Value	Source of Appraisal	Other Lien Holder(s)

29. Describe the reason for requesting funds under the Dane County Commercial Revitalization Loan Program (Check all that apply and describe):

<input type="checkbox"/> Insufficient equity available for capital costs.	<input type="checkbox"/> Lender unable to commit more funds to project.
<input type="checkbox"/> Unable to pay market rates.	<input type="checkbox"/> Insufficient rate of return for business.
Describe:	

30. Project Timeline. Provide a timeline for this project. Milestones may be such items as securing all financing, bidding on construction, acquiring equipment, or hiring employees. Please customize this for your project.

Milestone	Timeline

Milestone	Timeline

JOBS are the major inducement for the County to provide loan funds. One full-time equivalent (FTE) job must be created or retained for every \$35,000 in CRLF funds loaned. At least 51 percent of those jobs (computed on a full-time equivalent basis) must be made available to or held by a low-and-moderate income person. A full time equivalent is a 40 hour per week or 2,080 hour per year job. If two persons are hired for 20 hours per week for 52 weeks per year, that is 1 full-time equivalent job.

The following requirements must be met for jobs to be considered created or retained.

- a. For projects that **create** jobs, at least 51% of the jobs must be held by or **made available** to low-and-moderate income persons.
- b. For projects that **retain** jobs, there must be sufficient documentation that the jobs would be lost without this loan and that one or both of the following apply to at least 51% of the jobs:
 - The job is currently held by a low-and-moderate income person; or
 - The job can reasonably be expected to turn over within the following two years and steps will be taken to ensure that the job will be filled by, or made available to, a low-and-moderate income person.

Created or retained jobs are only considered to be **made available to** low-and-moderate income persons when:

- Special skills that can only be acquired with substantial training or work experience or education beyond high school are **not** a prerequisite to fill such jobs, or the business agrees to hire unqualified persons and provide training; and
- The business takes actions to ensure that low-and-moderate income persons receive first consideration for filling such jobs, such as:
 - advertising the jobs to be filled with the Dane County Housing Authority, Centro Hispano of Dane County, Madison Apprenticeship Program, Madison Urban Ministry, Porchlight, and other non-profits serving low-and-moderate income populations;
 - conducting a job fair in a low-and-moderate income neighborhood;
 - listing the jobs to be filled with Job Service;
 - providing a listing of the jobs to be filled to the Associate Division Manager of Economic Assistance and Work Services Division (EAWS) of the Dane County Department of Human Services who will work to refer eligible applicants
- The business must track the persons interviewed for each position and maintain income self-certification forms from each applicant for review by the County, HUD, and the Office of Inspector General.

For developments in which units or space will be leased or purchased by other tenants, such as a retail mall, the borrower/owner must ensure that the job creation and reporting requirements are incorporated into the lease or purchase agreements for each tenant.

31. Jobs Created. For each job to be created and filled in the next 24 months, please list the job title, job type, whether it will be full time or part time, the number of employees to be hired, whether the position requires any special skills, training, or education beyond a high school level, the number of hours per week, the hourly wage, and whether the job will be made available to low-and-moderate income persons. Please attach additional pages as needed.

Job title	Job Type*	Full-Time or Part Time (FT/PT)	Number of Employees to be Hired	Requires Special Training (Yes, No)	Number of Hours Per week	Number of Weeks Per Year	Hourly Wage	Job to be Made Available to LMI Person (Yes/No)

* JobType:

Officials and Managers
 Technicians
 Office and Clerical
 Operatives (Semi-Skilled)
 Service Workers

Professional
 Sales
 Craft Workers (Skilled)
 Laborers

32. For any jobs that require special skills, training, or education beyond high school prior to hiring and that will be made available to low-and-moderate income persons, please list by job title the actions that will be taken to assist low-and-moderate income persons to meet those requirements.

33. Describe the actions that will be taken to ensure that jobs are made available to low-and-moderate income persons.

34. Job Retention. In order to claim job retention, a business must provide clear, convincing, and objective evidence that without the CRLF loan, the jobs would be lost to Dane County within an immediate time frame. If this application is for the retention of jobs, please indicate which of the following statements apply and attach the supporting documentation to this application.

Statement	Yes	No
A notice of mass layoff or business closing has been filed with the Wisconsin Department of Workforce Development in the past 60 days.	<input type="checkbox"/>	<input type="checkbox"/>
A notice has been given to employees of layoff or business closing within the past 60 days.	<input type="checkbox"/>	<input type="checkbox"/>
Articles have appeared in a local newspaper or other trade publication related to employment loss.	<input type="checkbox"/>	<input type="checkbox"/>
Financial statements demonstrate the need for funds and/or a deteriorating competitive position that will result in a reduction in the workforce or the business closing.	<input type="checkbox"/>	<input type="checkbox"/>
Other, specify:	<input type="checkbox"/>	<input type="checkbox"/>

35. Jobs Retained. For jobs that are being claimed as created, please provide the job title, job type, full/part time status, number of hours per week, hourly wage, whether the job is held by a low-and-moderate income person, and whether the job can reasonably expect to turnover in the next two years. Please attach to this application, the most recent payroll in order to document current employment levels. The payroll should indicate whether each employee is part-time or full-time. Social security numbers and other sensitive identifiers should be redacted. Please note that for each employee who is being claimed as low-and-moderate income, an Employee Certification Form must be completed.

Job title	Job Type	Full-Time or Part Time (FT/PT)	No. of Hours Per Week	Hourly Wage	Number of Current Employees Who Are:		Is Job Expected to Turn over in Next 2 years (Yes/No)
					Low and Moderate Income (LMI)	Not LMI	

SECTION D: JOB PIRATING

Job pirating is prohibited under Section 588 of the Quality Housing and Work Responsibility Act of 1998. The County is prohibited from providing assistance that will result in the relocation of a plant, facility, or operation from one Labor Market Area to another, within three years of the date of assistance, if such relocation will result in a significant loss of jobs in the labor market area from which the relocation occurs. A significant loss is defined as the loss of 500 or more jobs or equal to or greater than one-tenth of one percent of the total number of persons in the labor force of that Labor Market Area.

36. Will the project relocate jobs from one labor market to another? Yes No
37. If yes, how many jobs will be lost from the labor market area from which the jobs will be relocated? (Include jobs that will not be relocated to or replaced at the project site.) _____ jobs.
38. From which location will the jobs be relocated or lost?
- City _____ State _____

SECTION E: ENVIRONMENTAL CERTIFICATION

Prior to the County being able to commit funds to a project, an environmental review must be conducted, and if needed, approval for the release of federal funds must be obtained from HUD (Department of Housing and Urban Development).

39. This business understands and agrees that:

Statement	Yes	No
CRLF funds are provided under the Community Development Block Grant (CDBG) program which requires that projects obtain environmental clearance prior to any portion of the project moving forward or project funds will be rescinded and repaid to the County.	<input type="checkbox"/>	<input type="checkbox"/>
The environmental review must cover the entire scope of the project as presented in this application. The project is defined and includes all line items listed in the application and all aspects necessary to successful completion of the project, including both private and public on and off-site investment by any party.	<input type="checkbox"/>	<input type="checkbox"/>
It will assist the County in fulfilling its environmental review requirements.	<input type="checkbox"/>	<input type="checkbox"/>
Local and regional governmental and civic bodies and citizens must be notified of the project's potential effects on various aspects of the environment. In addition, the environmental review process may include coordination with several regulatory entities. These entities may have requirements such as archaeological studies, special permitting, and mitigation measures.	<input type="checkbox"/>	<input type="checkbox"/>
Federal regulations may require that a public notice be published in a newspaper of general circulation and that a 15-day public comment period be observed. This process takes a minimum of 20 days and may take longer if public comments are received.	<input type="checkbox"/>	<input type="checkbox"/>
Federal regulations may require that a approval for Release of Funds be obtained from HUD. This process takes a minimum of 20 days.	<input type="checkbox"/>	<input type="checkbox"/>
If a purchase option is offered prior to the environmental review being completed, the option must contain contingency language indicating there will be no transfer of title to the purchaser until all environmental review procedures have been completed. Any deposits made must be nominal (less than \$1,000) or refundable (if more than \$1,000).	<input type="checkbox"/>	<input type="checkbox"/>

SECTION F: LEGAL INFORMATION

Statement	Yes	No
Has the applicant or any owner been involved in any lawsuits or judgments in the last five (5) years of have any lawsuits pending?	<input type="checkbox"/>	<input type="checkbox"/>
Has the applicant or any owner been involved in any bankruptcy or insolvency proceedings or have any proceedings pending?	<input type="checkbox"/>	<input type="checkbox"/>
Has the applicant or owner had any civil or criminal charges in the last five (5) years or have any charges pending?	<input type="checkbox"/>	<input type="checkbox"/>
Does the applicant or any owner have any outstanding tax liens or judgments?	<input type="checkbox"/>	<input type="checkbox"/>
Is the property tax delinquent?	<input type="checkbox"/>	<input type="checkbox"/>

Please attach a detailed explanation for any YES responses.

SECTION G: CONFLICT OF INTEREST

Immediate Family Ties

Immediate family ties includes spouse (including fiancée/fiancé), parent (including step parents), child (including step-children), siblings (including step-brothers and step-sisters), grandparent, grandchild, and in-laws of a covered person.

40. For each owner of the business, please list any immediate family ties to any employees of Dane County, the County Board of Supervisors, or the CDBG Commission.

Business Owner	Name of Person to Whom the Business Owner has Immediate Family Ties	Relationship

SECTION H: CERTIFICATION

The Applicant for loan funds certifies:

- a. To the best of my knowledge and belief, all information contained in this application is true and correct.
- b. No work on this project has been accomplished and that no work will be undertaken until environmental clearance has been received and a contract with Dane County has been executed.
- c. That the applicant is in compliance with all laws, regulations, ordinances, and orders of public authorities applicable to it.
- d. That the applicant is not in default under the terms and conditions of any grant or loan agreements, leases, or financing arrangements with its creditors.
- e. That the applicant has disclosed and will continue to disclose any occurrence or event that could have an adverse material impact on the project. Adverse material impact includes, but is not limited to, lawsuits, criminal or civil actions, bankruptcy proceedings, regulatory intervention, or inadequate capital to complete the project.
- f. Understands that unless it qualifies as trade secret, all information submitted to the County is subject to Wisconsin's Open Records Law.

The applicant requests that the County treat the following items as TRADE SECRET:

Item	Yes	No	Not Applicable
Personal financial statements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal or business tax returns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Historic business financial statements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business financial projections	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business plan or study	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- g. I possess the legal authority to apply for this loan.

Warning: Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government.

Signature

Date

Name (Typed or Printed)

Title

Signature

Date

Name (Typed or Printed)

Title

IDENTIFICATION NUMBERS

Please list the FEIN for the business.

Federal Tax Identification No:	
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Please list the Social Security Numbers for: 1) each proprietor, or 2) each limited partner who owns 20% or more interest and each general partner, or 3) each stockholder owning 20% or more voting stock, or 4) any partner or entity providing a guaranty on the loan.

Business Owner Name	Social Security Number (SSN)

APPLICATION CHECKLIST

Each completed application to be submitted to the County of Dane shall consist of the following:

Business Documents

- 1. Completed CRLF Loan Application
- 2. Business plan outlining management, marketing, competition, business history, and future potential (for new businesses and those in operation less than five (5) years.)
- 3. Detailed project budget
- 4. Balance sheets for the preceding three years.
- 5. Profit and loss statements for the preceding three years.
- 6. Federal income tax returns for the prior three years.
- 7. Three year projections of cash flow with the first year being on a month-to-month basis. Include an explanation of all assumptions.
- 8. Three year projections of income and expenses. Include an explanation of all assumptions.
- 9. Aging of accounts receivable and payables, even dated with the current financial statements.
- 10. If claiming jobs as retained, documentation that without this loan, that jobs would be lost. (See item 29)/
- 11. If claiming jobs as retained, copy of most recent payroll.

Personal/Individual Information

- 12. Current personal financial statement of: 1) each proprietor, or 2) each limited partner who owns 20% or more interest and each general partner, or 3) each stockholder owning 20% or more voting stock, or 4) any person or entity providing a guaranty on the loan. NOTE: A notarized statement from a certified accountant indicating the net worth of each business owner under this section may be substituted for the personal financial statements.
- 13. Resumes of all key management personnel.
- 14. In the case of stock option, copies of Private Placement Memorandum.

Project Information

- 15. Map of project location.
- 16. Evidence of site control, such as a signed offer to purchase, current building lease, etc..
- 17. Copies of any estimates or quotes regarding work to be done or equipment to be purchased in connection with the project.
- 18. Appraisal of real estate, property, or other collateral.
- 19. Pictures of collateral offered.
- 20. Copy of any environmental studies done for the project.
- 21. If the project involves acquisition of land or buildings, new construction, or rehabilitation, a letter of support signed by the chief elected official of the municipality where the project is located.
- 22. Real estate projects must include at least 4 photographs of the site and adjacent land uses from all directions, including applicable street views.
- 23. If applicable, copies of building lease(s).

Lender Documents

- 24. Commitment letter(s) from bank and/or other lenders that includes a description of the terms of the loan(s), a description of collateral and/or guarantees, listing of any co-signers, and a signed acceptance from borrower (s). The bank and other lenders should advise the County of all covenants and/or limitations relating to the loan(s).

Additional materials may be requested by the County. Please consult with the County's Economic Development Specialist as to the required documents for your specific loan request.

Closing

Additional information will be required at the time of loan closing. This may include, but is not limited to:

- 25. Copies of Articles of Incorporation and Bylaws if a corporation; Articles of Organization and Operating Agreement if a LLC; or any written Partnership Agreement if a partnership.
- 26. Title Commitment/Equipment make, model, serial numbers
- 27. Appraisals
- 28. Environmental
- 29. Hazard Insurance
- 30. Life Insurance/Life Insurance Collateral Assignment Form
- 31. Proposed Lease Draft
- 32. Evidence of Equity Injection

PERSONAL FINANCIAL STATEMENT

Confidential

Statement as of: _____

Complete this form for: 1) each proprietor, or 2) each limited partner who owns 20% or more interest and each general partner, or 3) each stockholder owning 20% or more voting stock, or 4) any person or entity providing a guaranty on the loan.

Name:	Business Phone:
Residence Address:	Residence Phone:
City, State, Zip Code:	
Business Name of Applicant/Borrower:	
Section 1: Disclosure of Ownership. Please list all businesses in which you have any financial interest. (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)	
Legal Name of Business:	
Trademark Name (DBA):	
Entity Type (Corporation, LLC, LP, etc.)	
Street Address:	
City, State	
Percent Ownership:	
Legal Name of Business:	
Trademark Name (DBA):	
Entity Type (Corporation, LLC, LP, etc.)	
Street Address:	
City, State	
Percent Ownership:	
Legal Name of Business:	
Trademark Name (DBA):	
Entity Type (Corporation, LLC, LP, etc.)	
Street Address:	
City, State:	
Percent Ownership:	

ASSETS		LIABILITIES	
	Omit cents		Omit cents
Cash on hand and in banks	\$	Accounts Payable	\$
Savings Accounts	\$	Notes Payable to banks & others	\$
IRA or Other Retirement Accounts	\$	Installment Account (Auto)	\$
		Mo. Payments \$	
Accounts & Notes Receivable	\$	Installment Account (Other)	\$
		Mo. Payments \$	
Life Insurance – Cash Surrender Value	\$	Loan on Life Insurance	\$
Stocks and Bonds (Describe in Sec. 3)	\$	Mortgages on Real Estate (Describe in Sec. 4)	\$
Real Estate	\$	Unpaid Taxes (Describe in Sec. 6)	\$
Automobile – present value	\$	Other Liabilities (Describe in Sec. 7)	\$
Other Personal Property	\$	Total Liabilities	\$
Other Assets (Describe in Sec. 5)	\$	Net Worth	\$
	TOTAL \$	TOTAL	\$
Section 2: Source of Income		Contingent Liabilities	
Salary	\$	As Endorser or Co-Maker	\$
Net Investment Income	\$	Legal Claims & Judgments	\$
Real Estate Income	\$	Provision for Federal Tax Income	\$
Other Income (Describe below)	\$	Other Special Debt	\$
Description of other income in Section 1 (Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments count toward total income.)			

Section 3: Notes Payable (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)

Name/Address of Note Holder(s)	Original Balance	Current Balance	Payment Amount	Frequency (Monthly, etc.)	How Secured or Endorsed Type of Collateral

Section 4: Stocks and Bonds (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)

Name of Securities	Number of Shares	Cost	Market Value Quotation/ Exchange	Date of Quotation/ Exchange	Total Value

Section 5: Real Estate (List each parcel separately. Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)

	Property A	Property B	Property C
Type of Property			
Street Address			
City, State			
Date Purchased			
Original Cost			
Present Market Value			
Name of Mortgage Holder			
Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Monthly Payment/Year			
Status of Mortgage			

Section 6: Other Personal Property and Assets. ((Describe, and if any is pledged as security, state name and address of lien-holder, amount of lien, terms of payment, and if delinquent, describe delinquency)

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Section 7: Unpaid Taxes (Describe in detail as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches).

Section 8: Other Liabilities (Describe in detail.)

Section 9: Life Insurance Held (Give face amount and cash surrender value of policies – name of insurance company and beneficiaries.

I authorize the County of Dane to make inquiries necessary to verify the accuracy of statements made and to determine my credit worthiness. I certify that the information contained in this Personal Financial Statement and any attachments are true and accurate as of the stated date(s). These statements are for the purpose of either obtaining a loan or guaranteeing a loan. I understand FALSE statements may result in forfeiture of benefits and possible prosecution.

Signature: _____ Date: _____ Social Security Number: _____

Signature: _____ Date: _____ Social Security Number: _____

WARNING: Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government.

WISCONSIN RESIDENTS – PLEASE COMPLETE AND SIGN THIS SECTION ALSO

I am: Married Unmarried Legally Separated

If married and my spouse is not signing the credit obligation, the name of my spouse is:

And my spouse resides at the following address:

Any obligation incurred by me will be in the interest of my marriage or family.

Signature: _____

Notice to Married Persons No provision of any marital property agreement, unilateral statement under §766.50, WI Statutes, or court decree under §766.70, WI Stats., adversely effects the interest of the creditor unless the creditor, prior to the time the credit is granted or an open-end credit plan is entered into, is furnished a copy of the agreement, statement of decree or has actual knowledge of the adverse provision.