



City of Rockford

6031 Main Street • Rockford, MN 55373 • (763) 477-6565 • Fax (763) 477-4393

MISSION STATEMENT: To recognize and fulfill our citizens' needs for all services in a respectful, efficient, and economical manner.

City of Rockford No Interest Business Loan Application

Applicant: _____

Address: _____

Contact Person: _____

Business Phone: _____ **Home phone:** _____

Amount of Loan Requested: _____

Description of project: _____

Please attach 3 sets of colored design plans of the project.

Please check the following if they apply to you:

- Owner of the building (not renting)
- Have been in business at this location for 5+ years in the City of Rockford
- Downtown business owner
- Business owner's good past credit rating
- Handicap Accessible Improvement
- Proposed project reflects a much needed visible improvement
- Highway business
- Improvement complies with city standards
- Has never been approved for a previous city loan or matching grant

Project costs: _____

Employment: Total number of employees at this business location are: _____

Sources of Funding:

Bank Loan	Equity or cash	City Loan	Total

Please provide two credit references:

I certify that all of the information provided in this application is true and correct to the best of my/our knowledge. I authorize the City to Check credit references and verify financial and other information. I agree to provide any additional information which may be requested by the City.

Applicant Signature: _____

Date: _____