

WYOMING MAIN STREET REVOLVING LOAN APPLICATION

Applicant		Tax ID # or SS #	
Mailing Address		Full Street Address	
City	County	Zip Code	
Contact Person	Phone Number	Fax Number	E-Mail Address

USE OF FUNDS:	Dollar Amount Requested
Total Dollar Amount of Loan Request	\$ _____

The undersigned hereby certify they are aware that proceeds for this loan program are made available under Wyoming Statute (W.S.) 9-12-1104 (vi) and further certify that all statutory requirements will be met. A business plan with sufficient detail so the request may be properly analyzed including, at a minimum, collateral offered to secure the loan, cash flow projection, resume of the owners, and historical financial information for the business is included and attached with this application.

Interest rate on loans will be a fixed rate at four percent (4.0%) per annum

Maximum term of the loan will be fully amortized in fifteen or less years

_____ Applicant	_____ Position/ Title	_____ Date
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Return the application and all supporting information to:

Wyoming Main Street
214 W 15th Street
Cheyenne, WY 82002