



City of Emory Development Corporation
 P.O. Box 100
 329 N. Texas St
 Emory, TX 75440
 903-473-2465 X 106
leah@emorytx.com

Revolving Loan Fund Application

Owner(s) Name(s):	Business Legal Name:
Contact Phone:	Business Phone:
Mailing Address:	Project Site/Address:
Email Address:	Property Owner: (if different than applicant)
Equipment Requested:	Amount Requested:

Details of Planned Improvements relating to Loan request:

*****Attach any & all quotes with equipment details.*****

Applicant Signature: _____ Date: ___ / ___ / _____

Print Name: _____ Title: _____

Property Owner Signature* (If applicant is Tenant) _____

****By signing, you agree to the proposed improvements to the property by the Applicant (Tenant).****

OFFICE USE ONLY

Date Received: ___ / ___ / _____ Received By: _____

Approved Date: ___ / ___ / _____ Work Completion Deadline _____

Please return the completed application with necessary attachments and signature to City of Emory Economic Development Corporation. If you have any application questions, contact 903-473-2465 X 106.