



SBA Paycheck Protection Program Pre-Submission Checklist

Applicant: _____

Officer: _____

- ☐ Date Business Started: _____
- ☐ [NAICS Code](#): _____
- ☐ Email Address: Business _____
 Owner _____
- ☐ Phone #: Business _____ Owner _____
- ☐ Ethnicity of Owner: _____
- ☐ Are the principal signers Veterans: Yes No
- ☐ City of Birth: _____
- ☐ State of Birth: _____
- ☐ Full 9 digit Zip Code: Business _____ Owner _____
- ☐ Credit Score(s): _____
- ☐ Credit Score Date(s): _____
(must be within the last 12 months)
- ☐ CSB Loan #: _____
- ☐ CSB Checking Account #: _____

File must contain at least one of the following for payroll documentation:

- | | |
|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> 940 Form | <input type="checkbox"/> W-2 Form |
| <input type="checkbox"/> 941 Form | <input type="checkbox"/> W-3 Form |

Notes:

Date submitted: _____

Submitted by: _____

Application Status: Denied Approval # _____