



KABBAGE

PPP LOAN APPLICATION

Kabbage PPP Loan Application Process

What's your business name?

PPP Business Example

[What if my business doesn't have a name?](#)

☐ I do business under a different name

Continue

Use complete legal name of business including, LLC, Inc etc.

If DBA, check box and enter DBA name

What's your legal name?

PPP Business Example

Miller

Continue

What's your business phone number?

(315) 265-8466

Kabbage, Inc., its affiliates and agents may place autodialed or prerecorded calls or texts to this number for servicing and collections.

☐ I Agree: I consent to have Kabbage, Inc., its affiliates and agents, whether acting on behalf of Kabbage or its [bank partners](#), call or text me for telemarketing or other purposes using autodialed or prerecorded calls or texts to the telephone numbers I provide to Kabbage (including mobile phone numbers). My consent is effective even if my number(s) are registered on a federal or state Do-Not-Call list. I am not required to give this consent to obtain any services from Kabbage.

Continue

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Most will choose "None of the above"

Do you or your business classify as any of the following?

☐

501(c)(3) nonprofit

☐

501(c)(19) veterans organization

☐

Tribal business (sec. 31(b)(2)(C) of Small Business Act)

☐

Independent contractor

☐

Eligible self-employed individual

☒

None of the above

Continue

Select "None of the Above" if you have employees.

Choose Legal Entity Structure, NOT Your Tax Status. Single LLC = Single Member LLC

What's your company structure?

☐

Sole Proprietorship

☐

General Partnership

☒

LLC

☐

Single LLC

☐

Corporation

☐

Professional Corporation

Continue

Use the EIN for the Business Entity which is applying to the program.

What's your tax ID number?

This is a 9-digit number that was given to you by the government when you registered your business.

16-1234567

[Where can I find this?](#)

Continue

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Try typing the name of your industry in box and choose from options that come up, or get the number from your tax return (Schedule F, Schedule C, etc.)

What's your 6-digit NAICS code?

We use your North American Industry Classification System (NAICS) code to classify your business. If you're unsure, please visit www.naics.com/search.

Dairy Cattle and Milk Production - 112120

Continue

Is the Applicant a franchise that is listed in the SBA's Franchise Directory?

☐ Yes ☒ No

Continue

The date of formation of the Legal Entity Applying. Use MM/YYYY Format. If you do not know the date, you can usually find this on your business entity tax return. You can also check with your Secretary of State / Commonwealth

When did you start FCE Test?

10/1980

Continue

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Count total employees paid in each calendar month in 2019. Add these 12 numbers together. Divide by 12. Equals average monthly number of employees. For those electing Seasonal, average number of employees Feb. 15 - June 30 2019 (4.5 months)

How many employees did you have as of Feb 15, 2020?

This number includes all employees on your payroll.

Continue

The number must be more than zero for you to participate.

If more than 38% of the business's annual payroll occurred between Feb. 15 - Jun 30 2019, a "Yes" answer will likely result in a higher monthly average payroll.

Is your business highly seasonal?

This will help us calculate your loan options. Please note that selecting "Yes" will significantly increase the time it takes to process your application.

☐ Yes
☒ No

Continue

Start with total Gross Payroll and subtract any compensation, including Payroll Taxes, of any employees who are not residents of the U.S. See "What counts as payroll" for definition of what else to include.

Let's calculate your average monthly payroll

We'll use the information you enter to make sure your application is accurate. We'll also ask you to upload the documents referenced to verify your average monthly payroll.

Total salaries, wages, commissions and tips in 2019

This is located in box 1 of your 2019 Form W-3.

What counts as payroll?

Total state and local income tax paid in 2019

State income tax is located in box 17 of your 2019 Form W-3. Local income tax is located in box 19.

Continue

State income tax located in Box 17 Form W-3

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In 2019, did you make payments for any of the following?

- Vacation, parental, family, medical or sick leave
- Severance, as allowance for dismissal

☒ Yes ☐ No

Enter the amount paid

\$ e.g. \$100,000

This can be found on box 4 of your 2019 Form 940.

Continue

Only include amounts that were not already included in employee's gross payroll

Do you want to include employer-sponsored healthcare and retirement benefits in your average monthly payroll calculation?

Please note that selecting "Yes" will significantly increase the time it takes to process your application.

☒ Yes ☐ No

Total employer-sponsored healthcare costs

\$ 32,918.15

Reference an annual statement from your healthcare provider

Total employer-sponsored retirement costs

\$ 4,335.36

Reference an annual statement from your retirement provider

Continue

Only include the employer share of contributions

For employee(s) who earn more than \$100,000 / yr., add the total amount OVER \$100,000 per employee.

(If 'yes' is selected, a box appears to enter amount over \$100,000.)

Only include cash compensation. Non-cash fringe benefits are not included.

Do you have employees whose combined 2019 wages, tips and other cash compensation exceeded \$100,000?

☐ Yes ☒ No

Continue

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If you excluded payments to non- US residents in the average monthly payroll that you reported earlier, you should answer "Yes" to this question.

Is the United States the principal place of residence for all employees of the Applicant included in the Applicant's payroll calculation?

☒ Yes ☐ No

Continue

Has the Applicant received an SBA Economic Injury Disaster Loan between January 31, 2020 and April 3, 2020?

☐ Yes ☒ No

Continue

Is the Applicant or any owner of the Applicant presently suspended, debarred, proposed for debarment, declared ineligible, voluntarily excluded from participation in this transaction by any Federal department or agency, or presently involved in any bankruptcy?

☐ Yes ☒ No

Has the Applicant, any owner of the Applicant, or any business owned or controlled by any of them, ever obtained a direct or guaranteed loan from SBA or any other Federal agency that is currently delinquent or has defaulted in the last 7 years and caused a loss to the government?

☐ Yes ☒ No

Is the Applicant or any owner of the Applicant an owner of any other business, or have common management with, any other business?

☐ Yes ☒ No

Continue

If 'yes,' will need to type in legal names of affiliated businesses. (Common Ownership, Common Management, or Closely Related Businesses)

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Based on your information, you can be eligible for a loan of

\$77,552.69*

*Pending final SBA guidelines

This is based on an average monthly payroll calculation of **\$31,021.08**.

Let's complete your application so we can confirm that amount.

Continue

What percentage of the loan will be spent in each of these categories over the 8 weeks after the loan is made?

At least 75% of the loan proceeds must be used to cover payrolls costs in order to receive total loan forgiveness. This information will be verified when you request loan forgiveness.

[How does loan forgiveness work?](#)

Payroll costs (%)

Lease/mortgage interest (%)

Only mortgage obligations incurred and leases dated before Feb 15, 2020 are valid for loan forgiveness.

Utilities (%)

Only utility payments under service agreements dated before Feb 15, 2020 are valid for loan forgiveness.

Other (%)

Only leases dated before Feb 15, 2020 are valid for loan forgiveness.

0% remaining to be allocated

Continue

What's your Social Security Number?

We need this info to verify your identity. This will not affect your credit score.

Continue

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What's your job title?

Manager

Continue

What's your business address?

PPP Drive

Apt, suite #, bldg

Canton

NY

13617

Continue

What's your home address?

Use business address

PPP Drive

Apt, suite #, bldg

Canton

NY

13617

Continue

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What's your date of birth?

04/17/1972

Continue

What's your personal phone number?

(315) 265-2655

Kabbage, Inc., its affiliates and agents may place autodialed or prerecorded calls or texts to this number for servicing and collections.

Continue

What percentage of your business do you own?

This will help us determine if we need to gather information from other stakeholders in FCE Test.

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Continue

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Is the Applicant (if an individual) or any individual owning 20% or more of the equity of the Applicant subject to an indictment, criminal information, arraignment, or other means by which formal criminal charges are brought in any jurisdiction, or presently incarcerated, or on probation or parole?

☐ Yes ☒ No

Initial here

CJM

Within the last 5 years, for any felony, has the Applicant (if an individual) or any owner of the Applicant 1) been convicted; 2) pleaded guilty; 3) pleaded nolo contendere; 4) been placed on pretrial diversion; or 5) been placed on any form of parole or probation (including probation before judgment)?

☐ Yes ☒ No

Initial here

CJM

Continue

You, as an authorized representative of the Business, certify in good faith to all of the below by checking next to each one:

☒ The Applicant was in operation on February 15, 2020 and had employees for whom it paid salaries and payroll taxes or paid independent contractors, as reported on Form(s) 1099-MISC.

☒ Current economic uncertainty makes this loan request necessary to support the ongoing operations of the Applicant.

☒ The funds will be used to retain workers and maintain payroll or make mortgage interest payments, lease payments, and utility payments, as specified under the Paycheck Protection Program Rule; I understand that if the funds are knowingly used for unauthorized purposes, the federal government may hold me legally liable, such as for charges of fraud.

☒ The Applicant will provide to the Lender documentation verifying the number of full-time equivalent employees on the Applicant's payroll as well as the dollar amounts of payroll costs, covered mortgage interest payments, covered rent payments, and covered utilities for the eight-week period following this loan.

☒ I understand that loan forgiveness will be provided for the sum of documented payroll costs, covered mortgage interest payments, covered rent payments, and covered utilities, and not more than 25% of the forgiven amount may be for non-payroll costs.

☒ During the period beginning on February 15, 2020 and ending on December 31, 2020, the Applicant has not and will not receive another loan under the Paycheck Protection Program.

☒ I further certify that the information provided in this application and the information provided in all supporting documents and forms is true and accurate in all material respects. I understand that knowingly making a false statement to obtain a guaranteed loan from SBA is punishable under the law, including under 18 USC 1001 and 3571 by imprisonment of not more than five years and/or a fine of up to \$250,000; under 15 USC 645 by imprisonment of not more than two years and/or a fine of not more than \$5,000; and, if submitted to a federally insured institution, under 18 USC 1014 by imprisonment of not more than thirty years and/or a fine of not more than \$1,000,000.

☒ I acknowledge that the lender will confirm the eligible loan amount using required documents submitted. I understand, acknowledge and agree that the Lender can share any tax information that I have provided with SBA's authorized representatives, including authorized representatives of the SBA Office of Inspector General, for the purpose of compliance with SBA Loan Program Requirements and all SBA reviews.

Continue

We need more information to verify your business

For businesses seeking a Paycheck Protection Program loan, Federal law now requires lenders to perform additional diligence on individuals that own more than 20% of such business.

- Provide us with details for each person who owns **more than 20%** of the business

Continue

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Add an owner

First name

Jan

Last name

Miller

Job title

Crop Manager

Ownership percentage

49

Email address

janmiller26@gmail.com

Address

PPP Way

Apt, suite #, bldg

City

Canton

State

NY

ZIP code

13617

Date of birth

01/29/1980

Social Security Number

055-55-5555

Add owner

Cancel

How many individuals own equity interest in your business?

Provide information for **each** individual who directly or indirectly owns **more than 20%** of the equity interests of the business (up to 4 individuals).

How do we define ownership?

FCE Test Haycook

Complete

Remove

Jan Miller

Complete

Edit

Remove

+ Add another owner

Continue

Who runs the leadership of your business?

Confirm the individual listed below has significant responsibility for managing the business. You must provide **1 individual** under this section.

How do we define leadership?

FCE Test Haycook

Complete

Replace

Continue

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- To the extent possible, I will purchase only American-made equipment and products.
- The Applicant is not engaged in any activity that is illegal under federal, state or local law.
- Any loan received by the Applicant under Section 7(b)(2) of the Small Business Act between January 31, 2020 and April 3, 2020 was for a purpose other than paying payroll costs and other allowable uses loans under the Paycheck Protection Program Rule.
- I am authorized to submit this application on behalf of the Applicant
- I have read, understand and have legal authority to submit this application on behalf of FCE Test
- I authorize Kabbage, Inc. and its bank partner, Cross River Bank, to share information collected or generated about me and my business in connection with my participation in the Paycheck Protection Program with each other for any purpose permitted by the Kabbage [Privacy Policy](#). This authorization extends to the affiliates, service providers and business partners of each party.
- Kabbage [Terms of Service](#) and [Privacy Policy](#)

For Applicants who are individuals: I authorize the SBA to request criminal record information about me from criminal justice agencies for the purpose of determining my eligibility for programs authorized by the Small Business Act, as amended.

Submit application