



# COVID-19 PACE RECOVERY PROGRAM II (CPR II) APPLICATION

BANK OF NORTH DAKOTA  
LENDING  
SFN 61884 (10-2020)

PO Box 5509, 1200 Memorial Hwy  
Bismarck, ND 58506-5509

800.472.2166  
800.366.6888 TTY  
701.328.5600  
[bnd.nd.gov](http://bnd.nd.gov)

## \*\*FORM MUST BE COMPLETED, SUBMITTED, AND CERTIFIED BY A FINANCIAL INSTITUTION\*\*

**INSTRUCTIONS:** Please send completed application to [BNDCPR2App@nd.gov](mailto:BNDCPR2App@nd.gov). This is the only documentation required to process this request. BND will notify local financial institutions the week of November 2nd which applicants were allocated buydown. Funds will be distributed as promptly as possible to local financial institutions who will distribute to applicants. Program information can be found [here](#). Applications must be received by **5pm on October 30, 2020**.

### General Eligibility

If any of the below responses are NO, the interest buydown <u>cannot</u> be approved:	Yes	No
1. Did the applicant incur economic injury as a result of the COVID-19 pandemic?		
2. As of March 13, 2020, the applicant:		
a. Had a physical presence in North Dakota		
b. Was current on financial obligations		
3. North Dakota based operations sustained a minimum 20% year-over-year gross revenue loss between April 1 and Sept 30, 2019 and the same time period in 2020		

### Calculating Percentage Loss in Gross Revenues

calculated as:  $\left( \frac{2019 \text{ Gross Revenues} - 2020 \text{ Gross Revenues}}{2019 \text{ Gross Revenues}} \right)$

2019 Total Gross Revenues (April 1-Sept 30, 2019)	2020 Total Gross Revenues (April 1-Sept 30, 2020)	Loss in Revenues
Year over Year Percentage Loss		

### Eligible Amount

Interest Expenses (April 1-Sept 30, 2020)	Buydown Amount Requested* (Max Limit: \$50,000)	DUNS Number (9 digits)
Check ONLY if buydown amount is equal to \$50,000 (Please note obtaining a DUNS Number and registering at SAM.gov are two separate processes)		
<input type="checkbox"/> DUNS Number obtained <b>AND</b> registration at <a href="http://SAM.gov">SAM.gov</a> complete		

\*If Buydown Amount Requested is \$50,000, applicant must obtain a DUNS Number (<https://fedgov.dnb.com/webform/>) **AND** register at [SAM.gov](http://SAM.gov).

### Financial Institution

Name of Financial Institution			
Address	City	State	ZIP Code
Account Officer	Email Address	Telephone Number	

### Applicant Information

Name	Tax Identification (ID) Number		
Telephone Number	Date of Birth (if applicable)	NAICS Code (6 digits)	
Mailing Address			
Street Address (if different than the mailing address)	City	State	ZIP Code

**Co-Applicant Information** (if applicable)

Co-Applicant Name		Tax Identification (ID) Number	
Telephone Number	Date of Birth (if applicable)		
Mailing Address			
Street Address (if different than the mailing address)			
City		State	ZIP Code

**List Owners (with over 50% or more ownership)**

Name	Title		
Telephone Number	Tax Identification (ID) Number	Ownership Percentage	
Address	City	State	ZIP Code

[Click for Additional Owner\(s\)](#)

**CERTIFICATION**

*Financial Institution and Applicant(s) hereby certify eligibility and use of interest buydown in accordance with the terms and conditions of the CPR II Program. Financial Institution and applicant(s) acknowledge that BND will accept and maintain an electronic version of this application.*

Financial Institution Account Officer
Applicant Signature
Co-Applicant Signature

**Note:** Prior to signing, ensure entire form is complete.

**Upon form completion, Account Officer can click submit button below to email to BND**

[Click to Submit Completed Form to BND](#)