



In order to better serve you, please complete the following information and forward to your BP representative so that we can better understand the specifics of your PPP loan. Providing this information in advance helps us to provide the best service possible when discussing the ways you can engage the BP Team to assist with the PPP loan forgiveness process. Please see the linked [BP Blast](#) for additional details on our service offerings.

1. Company name _____
 - a. Is company part of an affiliated group that received PPP loans totaling \$2 million or greater? If so, please provide names of other entities and funding amounts.

2. Amount of PPP Loan Received: _____ SBA Loan Number _____
3. Bank that funded the loan _____ Contact person _____
Contact info (email and phone number) _____
4. Number of employees disclosed on the PPP loan application: _____
5. Estimated average number of employees at the following date ranges (we can assist with specific calculations later)–
 - a. 2/15/19 – 6/30/19: _____
 - b. 1/1/20 – 2/29/20: _____
 - c. During the covered period (8 or 24 weeks from the date of loan funding): _____
6. Payroll schedule - weekly biweekly (every other week) twice a month monthly other
7. Please describe your payroll cycle (ex. if twice a month: 1st-15th, paid on the 20th, 16th- 31st, paid on the 5th; if weekly: Sunday to Saturday, paid on the following Friday, etc.) _____
8. Do you utilize a third party payroll service, and if so, which one? _____
9. Do you expect to use the full loan amount on payroll costs during the covered period? Yes No
10. Funding date (what day did it hit your bank account) _____ Separate (new) account? Yes No
11. Do you expect to use the 8-week or 24-week covered period?
12. Did you reduce the annual salary or hourly wages of any employee by more than 25% during the covered period?
Yes No
13. Did you reduce the number of employees or average paid hours paid between 1/1/20 and the end of the covered period? Yes No
14. Was your business unable to operate at the same level of activity due to compliance with requirements established by a governmental agency related to work or safety requirements, including social distancing? Yes No

Other:

Please use this space to provide any other information that may be helpful for our team to know prior to contacting you to discuss your PPP loan forgiveness.

Contact information:

1. Primary contact name and title _____
2. Primary contact email _____
3. Primary contact phone number _____

Thank you for your time in completing this form. Please send this completed form to nwright@bpcpa.com.