



**GWYNEDD COUNCIL  
GWYNEDD TOWN CENTRE  
LOAN FUND  
EXPRESSION OF INTEREST FORM**

Economy and Community Department

**To be returned to:**

**Business Support Service  
Gwynedd Council  
Council Offices  
CAERNARFON  
Gwynedd  
LL55 1SH**

 (01286) 679231  
 [business@gwynedd.llyw.cymru](mailto:business@gwynedd.llyw.cymru)  
 [www.gwynedd.llyw.cymru](http://www.gwynedd.llyw.cymru)



Llywodraeth Cymru  
Welsh Government



**Please tell us about yourself or your business**

Applicant(s) Name .....

Business Name (if applicable) .....

Occupation or Business Activity .....

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Address of Premises Subject to Enquiry .....

..... Postcode: .....

Telephone No ..... Mobile Telephone No .....

E-mail ..... Website .....

Home Address (if different) .....

..... Postcode: .....

Telephone No ..... Mobile Telephone No .....

E-mail ..... Website .....

**Please state how much you would like to borrow, the term and the purpose of the investment**

Required amount of funding £ ..... Preferred Term (1-5 years) .....

Purpose of investment .....

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Please state available security and its approximate value .....

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Total cost of project £ .....

Total funding from other sources £ .....

