

Economic Development Fund Grant Application

This portion to be filled out by public entity

Public Entity Sponsor:	
Name of Company	
Corporate Address	
Project Address	
Telephone	
Form of Business Ownership	
Project Principal(s)/Contact(s):	
Name	Name
Address	
% Ownership	% Ownership
Select one: New Business Business Expansion	Business Retention
New Business Expunsion	Business Retention
Phase of project: Start-up Expansion	Retention
Full-Time Employees: present # fu	uture # by year
Average Hourly Wage: present \$ fu	iture \$ by year
Benefit Package Provided	
Please include the following attachments with your appli	cation:
1) Cover letter	
 Business plan to include description of business, de created, community impact, and any other information 	scription of the project, trade area served, type of jobs to be ation that may help describe the project.
3) Statement of project sources and uses	
4) Financial projections (3 years)	
Public Entity Sponsor Authorized Signature	
Title	



Economic Development Fund Grant Application

This portion to be filled out by applicant to public entity

Name of Company		
Corporate Address		
Project Address		
Telephone		
Form of Business Ownership		
Federal Tax ID Number		
Primary Bank Account(s):		
Name	Name	
Address		
Telephone		
Contact Person	·	
Working Capital Line of Credit	Working Capital Line of Credit	
Please include the following attachments with 1) Business plan	your application:	
2) Statement of project sources and uses		
3) Financial projections (3 years)		
orders, judgments, or injunctions to include company data which you supply to this public entity will be use We will not be able to process your financial applicat when the project is approved. If so, at that time, the	Itened litigation or administration proceeding or any outstanding administration officials or any of the principals involved in bankruptcy (for the past 5 years.) do to assess your firm's qualifications for Polar Economic Development funding ion without it. There is a possibility this data will become a public record if and data may be examined by anyone. By signing below, you represent that you are tyou have read it, and that you are familiar with the statements contained	The I
Signature of officer or applicant or owner if sole	proprietor	—
Title	Date	