

# MONROE COUNTY INDUSTRIAL DEVELOPMENT AUTHORITY

## APPLICATION FOR MONROE COUNTY SMALL BUSINESS GRANT/LOAN PROGRAM

### BUSINESS CONTACT INFORMATION

Company Contact & Title		Date of Application	
Company name		<input type="checkbox"/> Sole proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other	
Phone   Fax			
E-mail			
Company address City, State ZIP Code			

### BUSINESS INFORMATION

Number of Current Employees		Bank name:	
Number of New Jobs to be created		Bank Contact Person	
Date Company commenced		Phone	
Type of Business		Account number	
Business Product or Service		Type of account	<input type="checkbox"/> Savings <input type="checkbox"/> Checking <input type="checkbox"/> Other

### PROJECT INFORMATION

Expected Use of Funds		Total Project Cost	
Amount Requested from Program		Other Funding Sources & Amounts	
When do you expect to start the project?		When do you expect the project to be complete?	

### REQUIRED ATTACHMENTS

Did you attach a Project Narrative?	<input type="checkbox"/> Yes <input type="checkbox"/> No If No, why not?	Did you attach documentation of other funding sources?	<input type="checkbox"/> Yes <input type="checkbox"/> No If No, why not?
Did you attach a Business Plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No If No, do you need assistance putting one together?	Did you attach the past 3 years of company financial statements or personal income tax returns?	<input type="checkbox"/> Yes <input type="checkbox"/> No If No, why not?
Did you attach detailed cost estimates?	<input type="checkbox"/> Yes <input type="checkbox"/> No If No, when will you have it?		
Did you attach a Project Schedule or Timeline?	<input type="checkbox"/> Yes <input type="checkbox"/> No If No, do you need assistance putting one together?		

### AGREEMENT

My signature below indicates that I have read and agree to the Program Requirements as stated in the Monroe County Small Business Grant/Loan Program Guidelines.

### SIGNATURES

Signature		Printed Name	
Title		Date	

# PROJECT BUDGET

	<b>MCSBGLP</b>	Source #2:	Source #3:	Source #4:
Acquisition				
Construction				
Infrastructure/Site Prep				
Machinery/Equipment				
Working Capital				
Professional Services				
Engineering				
Inspections				
Fees				
Insurance				
Environmental Assessment				
Legal Costs				
Closing Costs				
<b>TOTAL</b>				