



## APPLICATION FOR BUSINESS INCENTIVE GRANT

### Applicant Information

Applicant Name: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Property Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Cell #: \_\_\_\_\_

Email: \_\_\_\_\_

Contact Person (if different from above): \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Cell#: \_\_\_\_\_

Property Owner (if different from above): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Cell#: \_\_\_\_\_

Email: \_\_\_\_\_

**Business Information**

Type of Business: \_\_\_\_\_

New Business: \_\_\_\_\_

Existing Business: \_\_\_\_\_

Year Organized: \_\_\_\_\_

Type of Business Organization:

- \_\_\_\_\_ Corporation
- \_\_\_\_\_ Limited Liability Corporation
- \_\_\_\_\_ General Partnership
- \_\_\_\_\_ Limited Partnership

- \_\_\_\_\_ Sole Proprietorship
- \_\_\_\_\_ Non-Profit Organization
- \_\_\_\_\_ City or County Government
- \_\_\_\_\_ Other

**Type of Financial Assistance Requested**

\_\_\_\_\_ Business Incentive Grant

**Briefly Describe what this grant will help you achieve:**

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**Use of EDC Funds & Amount Requested****Use of EDC Funds**

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**Amount Requested**

\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_

Total EDC funds requested

\$ \_\_\_\_\_

|                                                               |
|---------------------------------------------------------------|
| <b>Describe the Economic Benefits to the City of Junction</b> |
|---------------------------------------------------------------|

Number of full-time jobs created or retained: \_\_\_\_\_

Number of part-time jobs created or retained: \_\_\_\_\_

|                             |
|-----------------------------|
| <b>Confidential Section</b> |
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The following information is required for a completed application but is not subject to public review:

- New business
  - 1) Written business plan
  - 2) Financial projections with supporting assumptions
- Existing business
  - 1) Current Business Operations and any proposed changes
  - 2) Financial projections with supporting assumptions
  - 3) Profit/Loss Statement or Sales & Use Tax Statement

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| <b>Application Submitted</b> |
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I hereby certify that, to the best of my knowledge, all information submitted in the above application is correct and accurate.

\_\_\_\_\_  
Grant Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Business Organization

|                                |
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| <b>Approval of Application</b> |
|--------------------------------|

**REQUEST APPROVED:** \_\_\_\_\_ **REQUEST DENIED:** \_\_\_\_\_

**AMOUNT APPROVED:** \_\_\_\_\_

**DATE OF APPROVAL/DENIAL:** \_\_\_\_\_

JUNCTION TEXAS ECONOMIC DEVELOPMENT CORPORATION

\_\_\_\_\_  
President

\_\_\_\_\_  
Secretary

\_\_\_\_\_  
Business Owner