

**APPLICATION FOR AN ECONOMIC INCENTIVE
AND GRANT FOR SMALL BUSINESSES**

The Economic Incentive and Grant for Small Businesses is available to certain qualified legacy City of Erlanger small businesses who are proposing to make capital improvements to their buildings through facade and exterior improvements. The information requested in this application is necessary for a determination of the qualification of the business for this economic incentive.

Any changes in the information provided by the legacy business owner applicant in this application could disqualify the business applicant from the economic incentive and grant. Please communicate all proposed and actual changes in the information provided in this application to the Erlanger Director of Economic Development immediately.

Fill in all blanks on this application using "not applicable" where necessary. If more space is needed, please use a separate sheet. Please submit all incentive applications to: David Hahn, Director of Economic Development, 505 Commonwealth Avenue, Erlanger, Kentucky 41018.

1.0 LEGACY BUSINESS APPLICANT INFORMATION

Name: _____

Address: _____

Phone No: _____ Fax: _____ E-mail: _____

2.0 LEGACY BUSINESS INFORMATION

Business Name of Legacy Business Applicant: _____

Local Address: _____

Home Office Address: _____

Name of Local Contact Person: _____ Title: _____

Local Contact Phone No: _____ Fax: _____ E-mail: _____

Name of Home Office Contact Person: _____ Title: _____

Home Office Phone No: _____ Fax: _____ E-Mail: _____

Employer Tax Identification Number (TIN): _____

Please provide documentation of the organizational structure of the legacy business.

What is an accurate description of the history of the legacy business?

What is the total annual payroll of the legacy business? \$ _____

How long has the legacy business been located within the City of Erlanger?
_____ (Please provide proof)

Please provide, on a separate sheet, proof of ownership of the legacy business.

Has the legacy business applicant or anybody with more than a 10% ownership interest therein or any officer or supervisor thereof ever been charged with any criminal offense involving moral turpitude or with a penalty of imprisonment?

_____ YES _____ NO. If yes, please furnish details on a separate sheet.

Has the legacy business applicant or anybody with more than a 10% ownership interest therein or any officer or supervisor thereof ever been denied a business related license or had it suspended or revoked by any governmental agency?

_____ YES _____ NO. If yes, please furnish details on a separate sheet.

3.0 LEGACY BUSINESS PROJECT INFORMATION

Please provide, on a separate sheet, an accurate description of the proposed improvements proposed for the legacy business.

What is the anticipated cost of the proposed improvement? \$ _____

What is the dollar amount being requested? \$ _____

What is the estimated start date for the proposed improvements? _____

What is the estimated end date for the proposed improvement? _____

4.0 BENEFITS TO THE CITY FROM THE LEGACY BUSINESS IMPROVEMENTS

Please provide how the improvement to the legacy business meets any of the following factors:

Directly increase future revenue/job creation in the City of Erlanger

Significantly decrease blight within the City of Erlanger

The legacy business aesthetics and structural improvements will significantly increase the property tax value

5.0 Ordinance No. _____

The legacy business applicant hereby acknowledges and represents to The City of Erlanger that the copy of Erlanger Ordinance No. _____ attached to this application has been read and understood by the legacy business applicant. The legacy business applicant hereby agrees: (a) to comply with the provisions of the ordinance; and, (b) upon any default to the ordinance or application therein by the legacy business applicant, the approval of the Economic Incentive and Grant For Small Businesses shall be terminated by Erlanger; and, (c) upon such termination, the legacy business applicant shall refund to Erlanger any funds received by the legacy business.

6.0 CERTIFICATION OF APPLICATION

The person completing this application, having been duly cautioned and sworn to the truth, hereby acknowledges and represents under the penalties of perjury that the information provided in this application is accurate and true to the best of his or her knowledge, information and belief.

SIGNATURE _____

NAME (PRINT) _____

TITLE _____

DATE _____

Subscribed and sworn before me this _____ day of _____, 20____.

Notary Public _____

State of _____

My Commission Expires _____