## CITY OF ERLANGER ECONOMIC INCENTIVE AND GRANT FOR SMALL BUSINESSES



The Economic Incentive and Grant for Small Businesses is available to certain qualified City of Erlanger small businesses who are proposing to make capital improvements to their buildings including 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 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: Emi Randall, Director of Economic Development, 505 Commonwealth Avenue, Erlanger, Kentucky 41018. For questions, please contact Mrs. Randall at 859-727-7995 or <a href="mailto:emi.randall@cityoferlanger.com">emi.randall@cityoferlanger.com</a>.

## **APPLICATION FORM**

The business applicant may be either the building owner with a business tenant or a tenant business within the City. The applicant must be the party responsible for funding and maintaining the proposed project improvements.

## 1.0 BUILDING OWNER INFORMATION

Company Name:			
Name of Local Contact Person:		Title:	
Address:			
		E-mail:	
2.0 APPLICANT BUSINESS EN' FOR IMPROVEMENTS)	TITY INFORMAT	TON (PARTY RESPONSIBLE	
Business Applicant:			
Erlanger Local Address:			
Name of Local Contact Person:		Title:	
Local Contact Phone No:	Fax:	E-mail:	
Home OfficeAddress (if differe	nt) :		
Name of Home Office Contact		Title:	

Home Office Phone No:	Fax:	E-Mail:
Employer Tax Identificatio	n Number (TIN):	
Submit a completed W-9 here: https://www.irs.gov/p	along with the application. Toub/irs-pdf/fw9.pdf	The <b>W-9</b> form can be found
the history of the business.	ription of the organizational s You may provide this on a se	parate sheet if preferred.
What is the total annual pa	yroll of the business? \$	
therein or any officer or suj	or anybody with more than a pervisor thereof ever been charpitude or with a penalty of in	arged with any criminal
YESNO.	If yes, please furnish details	on a separate sheet.
therein or any officer or suj	or anybody with more than a pervisor thereof ever been der ked by any governmental age	nied a business related license
YESNO	O. If yes, please furnish detail	s on a separate sheet.
Is the business applicant in and with the Secretary of S	good standing with its City S tate?	tate Occupational License
YESNO	O. Please furnish proof on a se	eparate sheet.

## 3.0 PROPOSED PROJECT INFORMATION

What is the	anticipated cost of the proposed improvement? \$
What is the	dollar amount being requested (50%, up to \$10,000)? \$
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 BUSINESS IMPROVEMENTS
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Please circle yes	s or no for each project impact factor below. For each impact circled, how the improvement will accomplish that impact.
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YES/NO The business aesthetics and structural improvements will significantly increase the property tax value
5.0 Review of Ordinance No. 2519
The business applicant hereby acknowledges and represents to The City of Erlanger that the copy of Erlanger Ordinance No. 2519 attached to this application has been read and understood by the business applicant. The 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 business applicant, the approval of the Economic Incentive and Grant For Small Businesses shall be terminated by Erlanger; and, (c) upon such termination, the business applicant shall refund to Erlanger any funds received by the business.
SIGNATURE
NAME (PRINT)
TITLE
DATE
6.0 CERTIFICATION OF APPLICATION
The person completing this application hereby certified that they are a named representative or officer who is authorized to submit this application for funding on behalf of the business entity. In addition, 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