

**Otsego County
2015 Agricultural Microenterprise Grant
NYS CDBG**

Grant Application Form

Date: _____

Applicant Information

Name(s): _____

Mailing Address: _____

Phone: (home) _____ (cell): _____

Email: _____

Business Information

Business Name: _____ Federal ID or SSN# _____

Unemployment ID#: _____ DUNS #: _____

How long in Business? _____

Phone #: _____ Email: _____

Fax #: _____ Website: _____

Company Attorney Name/Address: _____

Accountant Name/Address: _____

Nature of Business: _____

Describe Ownership: _____

Provide a brief narrative of the Company's History:

Identify the seasons in which the facility currently operates (check all that apply):

- Year-Round
- Winter (December, January, February)
- Spring (March, April, May)
- Summer (June, July, August)
- Fall (September, October, November)

<u>Company Officers</u>	Company Principals (Shareholders/Partners)
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Is the company behind in any of its tax obligations? _____

Is the company delinquent in the payment of any loans? _____

Has the company been declared in default on any of its loans? _____

Has the company ever filed for bankruptcy? _____

Have any of the company's principals ever personally filed for bankruptcy or in any way sought protection from creditors?

Are there currently any unsatisfied judgments against the company? _____

Are there currently any unsatisfied judgments against any of the company's principals? _____

If you answered "yes" to any of the seven (7) questions listed above, please explain below:

How many family members currently live in your household? _____

What is your anticipated total annual household income for the next 12 months? _____

Annual household income includes salaries, wages, retirement income, social security and disability payments, royalty payments, business income or income from rental properties, and other forms of regular income received by you or other members of your household.

What percentage of your current/projected annual sales is derived from tourism spending? _____%

Project/Site Information

I own rent/lease the location of my business.

Building Owner (If Other Than Applicant, Consent Required): _____

I am applying as either a(n):

Existing Agricultural business

New Agricultural business

Existing Street Address: _____

Tax Map #: _____ Main Street District: Yes No

Please complete the attached current Employment form

Planned Location Address: _____

Tax Map #: _____

Anticipated/pledged jobs to be created? _____ FT _____ PT

Project Costs

<u>Project Costs</u>		<u>Sources of Funds</u>	
Inventory	\$ _____	Bank	\$ _____
Machinery/Equip.	\$ _____	Equity/Cash*	\$ _____
Professional Fees	\$ _____	_____	\$ _____
Working Capital	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
Total	\$ _____	Total	\$ _____
		*Cash equity can be no less than 10% of the total project cost	

NOTE: Please attach to this application the source of all Project Costs identified above: vendor quotes, negotiated sales prices, engineer’s or contractor’s estimates, purchase agreements, catalog prices, etc.

Are you in need of *additional* financial assistance (i.e. a loan)? Yes No Amount: \$ _____

Summarize the status of any proposed project financing identified in the “Sources of Funds” column above, including status of other applications, sources of equity capital, etc.

Letters of Agreement, Consent, and Certification

I understand and by signing agree that:

- ◆ The County of Otsego IDA (COIDA) will review my application and if approved, may commit grant funds to assist with the cost of my project.
- ◆ COIDA must review and approve any changes or alterations proposed to my project, after the initial approval is given.
- ◆ I must disclose all funding related to my project.
- ◆ I must complete my project within 90 days after my application is approved. Extensions will be considered.
- ◆ By signing this application, I agree to provide COIDA any and all documentation regarding the jobs created or retained through this project that are deemed necessary to comply with the CDBG requirements.
- ◆ COIDA reserves the right to approve or disapprove each application.
- ◆ COIDA may approve a project at an amount other than the amount my application requests.
- ◆ In undertaking my project, I must comply with all municipal and other governmental regulations.

SIGN HERE: _____

NAME (PRINT): _____

DATE: _____

SIGN HERE: _____

NAME (PRINT): _____

DATE: _____

SIGN HERE: _____

NAME (PRINT): _____

DATE: _____

If the business has multiple owners, each must execute this page of the grant application. If more than 3 signatures are necessary, this page may be duplicated prior to signing.

Please provide the following information:

- Exhibit A – Completed Employment Form ***Required***
- Exhibit B – Copy of most recent Personal Federal Income Tax Return including Schedule C if applicable and copies of current pay stubs ***Required***
- Exhibit C – Documentation of committed funding sources and planned expenditures ***Required***
- Exhibit D – All project expense including: Two estimates for all planned project expenses ***Required***

Please label each Exhibit and put them in order.

Prior to funding approval, it may be determined that an in-depth review of the business's financial documents may be necessary.

Please submit applications to:

County of Otsego IDA
189 Main St, Suite 500
Oneonta, NY 13820
Phone: (607) 267-4010

Email: horvath@otsegoida.com

This is an Equal Opportunity Program. Discrimination is prohibited by Federal Law.

Current and Future Employment (Exhibit A)

Anticipated/Pledged Job Creation

Job creation is a goal of this program. Projects being undertaken by a business where the owners do not qualify as low-moderate income individuals according to HUD's current income limit guidelines may be able to use job creation as a means to meet eligibility requirements for this program.

What is the company's current employment and projected new hirings resulting from this proposed project for the next three years?

	Current	Year 1	Year 2	Year 3
Full-time				
Part-time				

Based on the above totals, how many of these jobs will be available year-round?

	Current	Year 1	Year 2	Year 3
Full-time				
Part-time				