

BIG PROGRAM APPLICATION

(Business Innovations Grant)



BUSINESS NAME: _____ DATE: _____

BUSINESS ADDRESS: _____ PHONE: _____

Applicant Name: _____ Email: _____

Applicant Address: _____ Contact Phone: _____

(If different than above)

Property Owner Name: _____ Owner Phone: _____

Complete legal description: _____

Please provide a detailed description of your request:

Estimated Total Cost of Project: _____

Please provide a detailed list of project costs. _____

Timeline: Beginning Date: _____

Estimated Project Length: _____

Estimated Completion Date: _____

Please explain benefits to be gained from this request: _____

By signing this document, the applicant gives permission to the City Clerk to contact Grundy Center Municipal Utilities and Grundy County Treasurer to determine whether applicant has any past due accounts, and the applicant further authorizes Grundy Center Municipal Utilities and Grundy County Treasurer to release such account information to the City Clerk. By signing this document, the applicant certifies that the information on this application is complete and accurate to the best of my knowledge.

Property Owner Approval Signature _____

Date _____

Applicant Signature _____

Date _____

Return this application and all documents to the City Clerk at 703 F Avenue, Ste 2, Grundy Center, IA 50638 or email to cityclerk@gcmuni.net. Thank you!

Complete Application Checklist:

- i) _____ Estimate/Quote attached for all aspects of project.
- ii) _____ If project over \$20,000, two estimates/quotes for included project.
- iii) _____ Contractor estimate/quote from Grundy County area is included.
- iv) _____ Floor plans/drawings/before & after pictures must be included.
- v) _____ Application signed by building/property owner.