City of Ada Small Business Matching Grant Fund Program Application

GRANT APPLICATION UP TO \$3,000

SECTION 1						
Applicant						
Applicant						
Home Address	City	State	Zip	County	Home Phone	
Home Email Address						
Name of Business			Tax ID Number			
Current Business Address	City	State	Zip	County	Business Phone	
Type of Business or Industry	Date Established	Busir	iess Email		Web Address	
Scope of Project:						
How project improves storefron	t and commercial district:					
Amount Requested (provide cos	st estimate):					
This institution is an eq	ual opportunity prov	vider and en	nployer			



Scoring Matrix and Weight (Graded by Loan Committee) Amount of money contributed to project by requesting entity (1-50%; 2-60%; 3-70%; 4-80%; 5-90%) Impact on commercial corridor (1, low-5, high): Community benefit from project (1, low-5, high): *10 point preference will be given to those who use local labor and materials (5 each); five point preference will be awarded to businesses along East or West Main Street. Total Score: *Funds will be dispersed following completion of the project, receipts will be required. Initial **Process and Approval Tracking** Date Submitted to Grant Committee (EDA) or City of Ada: Considered by Grant Committee: Approved by Grant Committee: Submitted to City Council: Considered by City Council: Approved by City Council: Interview with City Hall for purposes of paperwork (following approval): Money Dispersed: This institution is an equal opportunity provider and employer