



GRANT APPLICATION UP TO \$2500

Applicant	/8				
Home Address	City	State	Zip	County	Home Phone
Iome Email Address	77.00	William I	1 4314-1941	-,11	
Name of Business		Tax ID Number			101/0
Current Business Address	City	State	Zíp	County	Business Phone
Type of Business or Industry	Date Established	Busi	ness Email	- I - I - I - I - I - I - I - I - I - I	Web Address
Scope of Project:					×
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How project improves storefront a	nd commercial district	:			
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Amount Requested (provide cost e	stimate):	8	*		
					2

City of Ada Small Business Matching Grant Fund Program Application



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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.							
Process and Approval Tracking	Initial	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 a	approval):						
Money Dispersed:							

This institution is an equal opportunity provider and employer