



2020 Willow Run, Suite 100 | Enid, OK 73703
P: 580 233 4232 | F: 580 242 5603 | TDD: 1 800 722 0353 or 711
www.growenid.com

Small Business Renovation Program Application for Funding

The Small Business Renovation grant would pay 50 % of renovation costs to owned or leased space up to \$5000. Funds will be provided as a reimbursement of expenses to renovate, expand, or redesign a commercial, retail space.

Qualifications: The small business would have a maximum of 6 FTE. The business must pay sales tax revenue to the City of Enid to qualify for this grant. Award may be forfeited if work is not completed within 12 months of award date or within 60 days of receiving certificate of occupancy issued by the City of Enid, whichever comes first. An extension may be requested but is not guaranteed.

ERDA's Assistance Programs are reimbursable competitive grants. If funds are awarded, a check would be processed once ERDA receives paid receipts for the renovation and a copy of the certificate of occupancy issued by the City of Enid.

To apply for assistance an application must be completed and requested documents delivered to ERDA by 4:30 pm on January 3, 2023. The ERDA Board of Directors will review all applications at their next scheduled board meeting.

Name of Business: _____

Owner's Name(s): _____

Contact name: _____

Address: _____

Phone number: _____

Email address: _____

Does your business fall under any of the following categories (mark all that apply).

- Black American Owned (51% or more ownership)
- Hispanic / Latino Owned (51% or more ownership)
- Asian / Pacific Islander Owned (51% or more ownership)
- Native American Owned (51% or more ownership)
- Female Owned (51% or more ownership)
- Veteran Owned (51% or more ownership)
- Other _____

Estimated Total Renovation Cost: \$ _____ (attach corresponding quotes if applicable)

Number of current employees: _____ Average wage of all employees: _____

Number of current employees live in Garfield County or within 50 miles of Enid: _____

Will this project increase # of jobs? _____ If yes, how many jobs will be added over the next three years? Year 1 _____ Year 2 _____ Year 3 _____



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If you pay sales tax to the City of Enid, what do you currently pay annually? \$ _____

In a separate document please answer each of the following questions

- Give a detailed overview of your business including how long you have been in operation.
- Detailed overview of how the funds will be utilized.
- Examples of past projects you have completed and how it benefited your business.
- What is your financial need for this business/project you are applying for?

Please Provide Additional Documents: Applications will not be considered without all the requested information.

- Financials / Pro-forma
 - Last 12 months profit and loss statement if existing business
OR 12 month projected Profit & Loss statement
 - Current balance sheet
 - Oklahoma Tax Commission Report
 - Garfield County Property Tax Report
- Timeline of Project
- Quotes for Equipment
- Investor and Financing information/plan
- Capital Expenses budget
- W-9 Form

I acknowledge that the program is structured as a reimbursement grant. If I am selected as a recipient, I must purchase the equipment and then provide proper documentation to ERDA to receive the funds. All details of the process for submitting of reimbursements will be outlined in a contract between the ERDA and the recipient. **INITIAL:** _____

I hereby authorize the Enid Regional Development Alliance (ERDA) and its program partners to investigate my background and qualifications for purposes of evaluating whether I am qualified for the program for which I am applying. I understand that ERDA will utilize an outside firm or firms to assist it in checking such information, and I specifically authorize such an investigation by information services and outside entities of the company's choice. I also understand that I may withhold my permission and that in such a case, no investigation will be done, and my application will not be processed further.

Applicant Signature: _____ Date: _____

Revised 07.11.2022