

City of Utica

Legacy Business Grant Application



APPLICANT INFORMATION

Legal name of business: _____

Commonly known name of business: _____
(if different from legal name)

Physical address of business: _____

Mailing address: _____
(if different from physical address)

Nature of business: _____

Business ID #: _____ Continuous years that business has been in operation: _____

Current employment level at time of application: Part-time _____ Full-time _____

CONTACT INFORMATION

Name of business owner: _____

Application contact name: _____
(To whom City should refer all questions)

Title: _____ Role in the business: _____

Telephone #: Work: _____ Cell: _____

Email: _____

Contact mailing address: _____

FUNDING REQUEST INFORMATION

Amount requested: \$ _____

Describe how the requested grant funds will be spent: _____

Describe how the grant funds will sustain current employment by the business into the future:

Describe the basis by which the grant amount was derived: (contractor/vendor quotes, architect estimates, etc.):

In order to be considered complete, the following items must be attached:

- ☐ Itemized project budget
- ☐ Estimates, quotes, bids, permits and drawings for all proposed construction to be paid for by the grant, if awarded
- ☐ Business license
- ☐ IRS Tax Return for the business doe 2024 and 2025
- ☐ Payroll tax form to verify total number of employees

Signature (of applicant)

Date