

BUSINESS DEVELOPMENT FUND GRANT APPLICATION MAY 2025

Registered Business Name:	
Assumed Name (DBA) If Applicable	2:
Active MN Registration File #:	Legal Structure:
Business Physical Address:	
Business Mailing Address:	
Business Phone:	Business Website:
Business Social Media:	
Applicant Name:	Applicant Title:
Applicant Email:	Applicant Phone:
Applicant Address:	
Are you or your business delinquer	nt on Cook County Property Tax? Yes No
<u>Description of Business</u> Provide an overview of your busines and date started. <i>Attach additiona</i>	ess, including type of business, services or goods provided, al narrative pages as necessary.

Project Description Provide a summary of the project scope and intended use of grant funding. Define the need or problem for which you seek grant funding. Explain the anticipated outcomes as a result of grant funding and the overall project. Attach additional narrative pages as necessary. Project Start Date: Project Completion Date: **Funding** For grant requests exceeding \$5,000, there is a matching requirement. The matching requirement requires the grantee to invest their own money into the project. Please complete the following table. A) What is the total cost of your project? B) How much are you requesting in grant funding? C) If your requested grant amount requires a match, what is the dollar amount of your match requirement? If your grant request is \$5,000 or less, enter "0". If your grant request is between \$5,001 and \$10,000, enter 10% of the Item B.

If your grant request is between \$10,001 and \$25,000, enter 25% of the Item B.

How will you fund your project if Business Development Grant funds are not awarded?

Economic Impact / EDA Funding Priorities 1) Describe how your project supports new business creation or the expansion of an existing business. 2) Does your project support the retention and/or creation of jobs in Cook County? If your project supports the retention of jobs, please complete the following fields: Number of Current Full Time Positions: ______ Average Wage: _____ Number of Current Part Time Positions: _____ Average Wage: ____ How many current positions are year-round?_____ How many current positions are seasonal?_____ If your project supports the creation of jobs, please complete the following fields: Number of New Full Time Positions: _____ Average Wage: _____ Number of New Part Time Positions: ______ Average Wage: _____ How many new positions are year-round?_____ How many new positions are seasonal?______ 3) How does your project directly or indirectly increase the local tax base?

4)	Describe how your project aligns with the strategic initiatives of the EDA.

5) Does your project fulfill an unmet need or service in Cook County?				
6)	Does your project support creation of workforce housing or address unmet housing needs in Cook County?			
<u></u>				
7) Is the project feasible given the timeline and budget you've provided for impleme What additional steps or funding must be secured to complete the project?				
Cor	nmunity			
1)	nmunity Describe your connection to Cook County.			

2) Please attach any letters of support or endorsement from the community.

Certifications

- I (we) understand that submitting an application in no way ensures approval of my grant funding.
- I (we) understand that incomplete applications will not be reviewed.
- I (we) understand that any work performed <u>prior to</u> this application and/or approval from the EDA cannot be funded by a Business Development Fund grant award, per program guidelines.
- I (we) understand that information requested in this application will be treated in accordance with the Minnesota Government Data Practices Act, Minnesota Statutes, Chapter 13.

Applicant Name		Co-Applicant Name	
Applicant Signature	 Date	Co-Applicant Signature	 Date

Submission

Before submitting a Business Development Fund Application to the Cook County/Grand Marais EDA, please review the below checklist to confirm all requirement materials are included in your application. *Incomplete applications will not be reviewed.*

- ✓ Completed Application Form with any Supplemental Materials
- ✓ Project Budget with Itemized Project Costs and All Sources of Funding
- ✓ Formal Estimates or quotes from contractors or service providers for which grant funding is requested.
- ✓ Documentation for product/equipment/material purchases can be in the form of invoices or estimates from a manufacturer or retailer, screenshots of online orders, or self-made documents with pricing, links, images, and description.
- ✓ Current Cook County Property Tax status for any projects involving the development (including renovations) or purchase of real estate
- ✓ Certificate of Good Standing from the Minnesota Secretary of State. You can download a PDF copy of your registration here: https://mblsportal.sos.state.mn.us/Business/Search

Application materials can be submitted via email to <u>director@cookcountymneda.org</u> or mail:

Cook County EDA PO Box 597 Grand Marais, MN 55604