



Santa Fe Economic Development Corporation

APPLICATION FOR BUSINESS IMPROVEMENT GRANT OR TARGET LOCATION ASSISTANCE PROGRAM

Please carefully read the following:

A business may receive assistance from the following program that is not to exceed \$50,000 in total during the fiscal year (October 1 to September 30). Funding assistance is approved and awarded at the discretion of a committee designated by the Santa Fe Economic Development Corporation. Unless otherwise stated, funding assistance is distributed as reimbursement after the Applicant submits paid receipts for the approved project and a Certificate of Completion is issued to the Applicant by the Santa Fe Economic Development Corporation.

Photographs of the completed project shall be required when receipts are submitted.

Please indicate which program you are applying for:

Business Improvement Grant

☐

Target Location Assistance

☐

Applicant Name: _____

Business Name: _____

Property Address: _____

Mailing Address: _____

Phone: _____ Fax: _____ Other: _____

Email Address: _____

Please provide one of the following:

1. Individual Owner
2. Partnership
3. Corporation

Recorded DBA Certificate
Partnership Agreement
Articles of Incorporation

Date business was established or opened: _____



Brief description of business (attach additional sheet if necessary): _____

Number of employees: _____ Full-Time: _____ Part-Time: _____

Description of proposed project (attach additional sheet if necessary):

Estimated date of completion for this project: _____

Estimated material cost: _____ Labor cost: _____

The undersigned acknowledges and agrees to abide by and subject to the terms and conditions of the Business Improvement Grant and Target Location Assistance Program described herein, and affirms that they are authorized to enter into a binding contract on behalf of the business.

I certify that no improvements, as described in this application, shall begin prior to receiving written approval of potential grant funding from the Santa Fe Economic Development Corporation.

Business Owner's Signature: _____

Printed Name: _____ Date: _____

Property Owner's Signature: _____

Printed Name: _____ Date: _____

Applications may be delivered to the Santa Fe Economic Development Corporation office, 12002 Highway 6, Santa Fe, Texas 77510.

For more information, please call the office of the Santa Fe Economic Development Corporation at (409) 925-6412.



Checklist:

- ☐ Completed application
 - ☐ Entity legal documents
 - ☐ Proof of ownership
 - ☐ Current paid tax receipts (real & personal property)
 - ☐ Copy of lease agreement (if applicable)
 - ☐ Minimum of 3 bids for the requested improvement(s)
 - ☐ Application Fee (\$500.00) payable by Check to the Santa Fe EDC
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Santa Fe Economic Development Corporation Timeline

Application received by Santa Fe Economic Development Corporation	/	/
Submitted to Santa Fe Grant Program Review Committee	/	/
Applicant notified of decision to approve/disapprove (10 days)	/	/
Completion deadline (6 months from approval notification)	/	/
Certificate of Completion received by City	/	/
Inspection performed on (10 business days)	/	/
If applicable, letter of non-compliance issued to Applicant (within 10 business days)	/	/
Correction Submitted by Applicant (10 business days)	/	/
Final approved Certificate of Completion received by City	/	/
 Total of receipts submitted for reimbursement:		\$
 Amount of eligible grant funding:		\$
 Release of grant funds by Santa Fe Economic Development Corporation:		
Paid Amount: \$ _____ Check # _____	/	/



**Santa Fe Economic Development Corporation
Certificate of Completion**

Applicant Name: _____

Business Name: _____

AFFIDAVIT

I certify that all improvements have been satisfactorily completed in accordance with the approved Application, that all charges or bills for labor or services performed or materials furnished, and other charges against the subcontractors, have been paid in full and in accordance with the terms of their respective contracts; that no liens have been attached against the property and improvements of the owner as a result of the work or services performed for the approved project; that no notice of intention to claim liens is outstanding; that no suits are pending by reason on the project under the contract; that all Worker's Compensation claims have been settled; and no public liability claims are pending.

This Affidavit is made for the purpose of reimbursement of funds according to the Santa Fe Economic Development Corporation Business Improvement Grant or Target Location Assistance Program.

Total of paid receipts submitted for reimbursement: \$ _____

Business Owner's Signature: _____

Printed Name: _____ Date: _____

Property Owner's Signature: _____

Printed Name: _____ Date: _____

Attachments:

- ☐ Copies of paid receipts
- ☐ Photographs of completed work
- ☐ Other

Sworn to and subscribed before me, a notary public,

This _____ day of _____, _____.

Notary Public Signature

(seal)



INSPECTION

I certify that I have inspected the project and found all improvements to be satisfactorily completed in accordance with the approved application and performance agreement, and in compliance with all applicable City ordinances.

Inspector's Signature: _____

Printed Name: _____ Date: _____