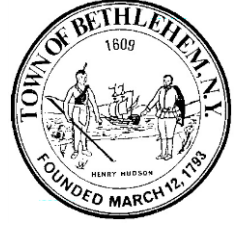


David VanLuven
Town Supervisor

Robert Leslie, AICP
Director of Planning

TOWN OF BETHLEHEM
Albany County - New York
ECONOMIC DEVELOPMENT AND PLANNING
445 DELAWARE AVENUE
DELMAR, NEW YORK 12054
(518) 439-4955 x1157
Fax: (518) 439-5808
Email: rleslie@townofbethlehem.org



Town of Bethlehem Microenterprise Grant Program Application 2021

Applicant Information

Name of Business:	
Name of Principal Contact:	
Social Security Number:	
Mailing Address:	
Email:	
Phone:	

Owner Information

Name of Owner:	
Percent Ownership:	
Name of Owner:	
Percent of Ownership	

Business Information

Business Address: (Physical location or current/anticipated)	
Business Type:	<input type="checkbox"/> LLC <input type="checkbox"/> S Corp <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> DBA <input type="checkbox"/> Other:
Type of Business:	<input type="checkbox"/> Start-up (open less than 6 months) <input type="checkbox"/> Expansion
If Expansion, How Many Years in Business?	
Number of Employees?	
Type of Project: (Check all that apply)	<input type="checkbox"/> Fixtures <input type="checkbox"/> Inventory <input type="checkbox"/> Equipment <input type="checkbox"/> Machinery <input type="checkbox"/> Working Capital <input type="checkbox"/> Other:
DUNS Number: (see DUNS lookup instructions)	

Project Description. Please provide a description of your business and the intended use of funds. Attach additional sheets if necessary. *Please note: construction, labor, and real estate purchases are ineligible expenses for this program.*

Job Creation

Number of Existing Jobs:	
Number of New Jobs:	
New Job Title(s) and Description(s)	

Fund Request. *Total grant request may not exceed \$35,000. Grant request may not exceed 90% of total project costs.*

Estimated Project Costs:	
Grant Request:	
Do you have quotes/estimates for project costs? <i>If yes, please attach. If no, when will those be available?</i>	
Anticipated Project Start Date:	
Anticipated Completion/Business Opening:	

Source of Funds. *Please complete the following chart based on the estimated project costs and identified sources of funds.*

Use of Funds	Estimated Project Total	Owner Equity	Other Sources	Grant Request
Working Capital				
Fixtures				
Equipment				
Machinery				
Inventory				
Other:				
Total				

Application Check List. Place an “X” in the box to confirm information is included with the application form.

For All Applicants	
	Completed and signed application
	Copy of Certificate of Incorporation, DBA certificate, partnership filing, or signed letter of joint venture agreement
	Personal financial statements for all principals (persons with 20% or greater share of profits and losses in the business)
	Documentation showing commitment to operate within the Town of Bethlehem (signed lease agreement and/or mortgage)
	Cash flow projections for 3 years
	Profit and loss projections for 3 years
	Employment projections and wage rates for 3 years
	Documentation to support use of funds and amount requested (quotes, cost estimates etc.)
	All other documents necessary to support the application (marketing materials, references, etc.)
	Commitment letters from additional funding sources.
For existing, expanding businesses only	
	Signed copies of tax returns for past 3 years (business and personal)
	Profit and loss statements
	Balance sheets
For new businesses only	
	Business plan

Please email your complete application to jtaylor@townofbethlehem.org or deliver it (by mail or in-person) to:

Town of Bethlehem Department of Economic Development and Planning
 Bethlehem Town Hall
 Attn: Senior Economic Developer
 445 Delaware Avenue
 Delmar, New York 12054

Application Certifications

I understand that by signing this document I agree:

- That the Town of Bethlehem Microenterprise Grant Program will review my application and if approved, may commit up to \$35,000 of assistance not to exceed 90% of total project costs.
- That the Town of Bethlehem may decline my application for any reasonable cause.
- That I will participate in the required Entrepreneurial Training Program, as it is a pre-requisite to obtaining requested grant funds.
- That I am eligible for this program because I meet the threshold for low-to-moderate Income (LMI) and/or will make a job available to LMI persons. In order to qualify as LMI, a person must have a combined family income below the following limits based on household size.

Family Size	1	2	3	4	5	6	7	8
Income Limit	\$53,550	\$61,200	\$68,850	\$76,500	\$82,650	\$88,750	\$94,900	\$101,000

- That the Microenterprise Grant Application Review Committee must review and approve any changes or alterations proposed to my project, after the initial approval is given.
- That the Town, the Department of Economic Development and Planning, and the Microenterprise Grant Application Review Committee will not be responsible for unsatisfactory work completed or claims of property damage and/or personal injury.
- That construction is an ineligible expense associated with this project and no charges pertaining to labor can be funded, but that I am solely responsible for obtaining the proper permits or variances for my project.
- That my personal labor, donated or in-kind labor and/or materials are ineligible for funding, and do not count against the 10% cash equity match, for the purposes of this program;
- That businesses which cease to exist during the term of the grant agreement may be required to repay the full grant portion of the award or a prorated amount.
- That businesses that relocate to an area outside of the Town during the term of the grant agreement will be required to repay the full grant portion of the award.
- That a Unified Commercial Code may be filed by the Town with the NYS Department of State to obtain security on grant funded items.
- THAT ALL IMPROVEMENTS WILL BE CONDUCTED IN CONFORMANCE WITH THE EXISTING LOCAL AND STATE BUILDING CODES and that proof of compliance will be made available on request.
- That I have read and understand the 2021 Town of Bethlehem Microenterprise Grant Program Design and Guidelines.

By signing below I certify that all above statements are true and to the best of my knowledge AND that I am authorized to represent the Business in question in certifying these statements.

Signature:	
Date:	
Printed Name:	
Witness Name:	

Credit Release

I hereby request and authorize you to release to the Town of Bethlehem Department of Economic Development and Planning for verification purposes, personal and corporate credit reports and information concerning the company/corporation/partnership and/or the officers and individuals listed below. That information may include but is not limited to:

- Employment history; dates, title income, hours worked etc.
- Banking (checking/savings/money market) accounts of record
- Mortgage loan rating (open date, high credit, payment amount, loan balance and payment)
- Any information deemed necessary in connection with a consumer credit report for the loan application

This information is for confidential use of the lender in compiling a loan credit report. A facsimile, photographic or carbon copy of this authorization may be deemed the equivalent of the original and may be used as a duplicate original.

We request a consumer report on each Principal, Officer, or Guarantor signing below in connection with this application and subsequent consumer reports in connection with updating, renewing or extending the requested credit. Upon your written request, we will provided the name and address of the consumer agency furnishing such a report to us, if any.

Name of Applicant:	
Name of Affiliated Business:	
Telephone:	

Name of Business Officer/Owner:	
Signature:	
Address for last two years:	
Social Security number:	

Name of Business Officer/Owner:	
Signature:	
Address for last two years:	
Social Security number:	

The Town of Bethlehem’s Department of Economic Development and planning is not responsible for the information contained in the credit report. The correctness of the information resides with the reporting agency and the requester. Any questions regarding information contained in the report should be directed to the reporting agency.