



# City of Casey Business Improvement Grant Application FY15

Allows up to \$10,000 per project in matching funds for for-profit business projects which improve infrastructure, appearance, create expansion opportunities, or otherwise improve our business community.

Name of Business: \_\_\_\_\_

Federal ID#: \_\_\_\_\_ Property (Parcel) #: \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone Numbers: \_\_\_\_\_

Email Address/Website: \_\_\_\_\_

Name of Business Owner: \_\_\_\_\_

Name(s) listed as owner(s) of property, percent of owner(s) interest in property: \_\_\_\_\_

\_\_\_\_\_

Type of Business:       Commercial       Industrial       Retail       Office

Are you located in the Enterprise Zone?     Yes     No

If so, are you requesting Enterprise Zone incentives for your project?     Yes     No

If no, why not? \_\_\_\_\_

\_\_\_\_\_

## Project

Infrastructure     Construction     Façade     Expansion     Job Creation     Rehabilitation     Other

Brief description of proposed project (please attach detailed project plan and drawings, including plat sketch): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Total Project Cost:** \_\_\_\_\_

**Anticipated Job Retention due to Project:** \_\_\_\_\_

**Total City Funding Requested:** \_\_\_\_\_

\_\_\_\_\_

**Total Owner Financing:** \_\_\_\_\_

**Anticipated Job Creation due to Project:** \_\_\_\_\_

**Additional Outside Funding\*:** \_\_\_\_\_

\_\_\_\_\_

\*Please list additional revenue sources and amounts: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Project Start Date:** \_\_\_\_\_

**Projected Completion Date:** \_\_\_\_\_

*Please note: All projects must be completed by April 14, 2015 to be considered for this funding cycle.*

Detailed Project Description: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

*Attach additional sheets if necessary; attach drawings.*

Is there any additional information you would like the committee to consider? \_\_\_\_\_

***Under penalties of perjury as provided by law pursuant to Section 1-109 of the Code of Civil Procedure, the undersigned certifies that the statements set forth in this instrument are true and correct except as to matters therein stated to be on information and belief and as to such matters, the undersigned certifies as aforesaid that he/she verily believes the same to be true.***

Name of Applicant: \_\_\_\_\_ Title: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*In order to qualify for a City of Casey Business Improvement Grant, a business must have an eligible project, be vested in its building and provide at least 50% in matching funds.*

*75% of the grant will be made available to the grantee upon grant approval and project commencement. The Committee will require progress updates which may include site visits. Upon the successful completion of the project, the remainder of the grant will be awarded to the grantee. The Committee reserves the right to revoke a grant if no project progress is seen at the first quarter, or after 90 days, whichever is longer.*

*Applications will be reviewed by the Economic Development Committee and awarded on a first come/first serve basis. The City of Casey reserves the right to award a partial grant and to accept or reject any applications. If you have any questions, please contact the Economic Development Director via the contact information below.*

**Please return completed application and relevant materials to:**

*Nicole Weigand  
City of Casey  
108 East Main Street  
P.O. Box 425  
Casey, Illinois 62420*



**Telephone: 217.932.4074  
Fax: 217.932.2026  
[nweigand@mchsi.com](mailto:nweigand@mchsi.com)**

Date Application Received: _____	Forward to Committee? <input type="checkbox"/> Yes <input type="checkbox"/> No
Date Forwarded to Committee: _____	Send to Council? <input type="checkbox"/> Yes <input type="checkbox"/> No
Date Sent to Council: _____	Approved? <input type="checkbox"/> Yes <input type="checkbox"/> No