

START-UP CREATIVE BUSINESS GRANT

Majority Business Owner's Ethnicity

- American Indian/Alaska Native
- Asian
- Black/African American
- Hispanic/Latino
- Native Hawaiian/Other Pacific Islander
- White
- I prefer not to say

Majority Business Owner's Gender

- Male
- Female
- I prefer not to say

Are you currently a resident of Erie County, Pennsylvania?*

- Yes
- No

Have you lived in Erie County for at least one year?*

- Yes
- No

Name of Owners with 20% equity or more

Owner 1

First name

Last name

Owner Address

Owner 2

First name

Last name

Owner Address

Owner 3

First name

Last name

Owner Address

Business Type*

- Corporation
- Limited Liability Company (LLC)
- Sole Proprietorship
- Partnership
- Other

If *Other*, please specify

Date business established*

Number of employees

Full-time

Part-time

Is this a new venture within an existing business over 2 years of age or a newly established business less than 2 years of age?*

- New Venture Newly Established Business

Describe the business venture in detail for which you are seeking funds. What about your business venture is creative? How would this grant impact your business venture?*

Have you researched the intended market?:*

- Yes No

What market do you believe your venture would fill (who wants what you're trying to sell)?:

Will your venture be:*

- Local Regional National International

What personal investment will you be making in this venture by way of personal funds, borrowed funds, small business loans or other grants?:

Amount

Please explain

Have you received funding from the Erie Community Foundation for the intended project?*

- Yes No

Have you received a StART-Up grant within the past 12 months?*

- Yes No

Do you have a written business plan?:*

- Yes No

If so, please upload a file of the business plan*

Have you created any multi-year financial projections?:*

- Yes No

If so, please upload a file of the projections*

Do you have a project budget?*

- Yes No

If so, please upload a file of the budget.*

If not, please download the template below and upload the file when completed.*

Click
Here
to download the Budget Template

Please provide driver's license for all business owners.*

Have you read the guidelines carefully and believe your application & budget comply?

Yes

I also understand that all applications will become property of ECRDA and all applications are subject to the Pennsylvania Open Records Act, provided that the County and ECRDA will use its best efforts to maintain the confidentiality of any confidential financial information submitted, as permitted by law.

Yes

The undersigned, hereby verifies that the statements made in the application are true and correct to the best of my knowledge, information and belief. I understand that false statements made herein are subject to the penalties of 18 Pa. C.S. § 4904, relating to unsworn falsification to authorities.

Signature

By signing this application, you are authorizing ECRDA to verify any information contained in this application. I understand that, by not providing the required documentation my application may not be processed. I understand that making a false statement on this form is a violation of law and could result in criminal prosecution, significant civil penalties, and a denial of the grant.

IMPORTANT: CLICK YES WHEN YOUR ENTIRE APPLICATION—INCLUDING ALL FILE ATTACHMENTS—HAS BEEN COMPLETED. CHECKING YES ACKNOWLEDGES YOUR APPLICATION IS FINAL AND CAN BE REVIEWED IN IT'S ENTIRETY.*

Yes No