

## **Rental Assistance Grant**

Application

Return to: Dayton City Hall 514 Sixth Ave, Dayton, KY 41074 PH: 859-491-1600

| SECTION A: APPLICANT INFORMATION          |                  |  |   |               |                    |        |   |           |       |                   |               |
|---|------------------|--|---|---------------|--------------------|--------|---|-----------|-------|-------------------|---------------|
| Legal Applicant                           | E-mail Address   |  |   |               |                    |        | SS#   |           |       |                   |               |
| Street or P. O. Box                       | City             |  |   | C             | County             |        | State Z   |           | ZIP   | Code              |               |
| Telephone Number                          | Fax Number Ta    |  |   |               |                    | Тах    | ıx ID Number  |           |       |                   |               |
| SECTION B: SUBJECT PROPERTY               |                  |  |   |               |                    |        |   |           |       |                   |               |
| Property Owner (if different)             | Telephone Number |  |   |               |                    |        | Email   |           |       |                   |               |
| Street or P. O. Box (owner mailing)       | City             |  |   | C             | County             |        | State Z   |           | ZIP   | ' Code            |               |
| Street (Physical address)                 | City<br>Dayton   |  |   |               | County<br>Campbell |        | State<br>KY   |           |       | ZIP Code<br>41074 |               |
| SECTION C: COMPANY INFORMATION            |                  |  |   |               |                    |        |   |           |       |                   |               |
| Company's Name                            |                  |  | Employer Identification<br>(EIN)        |               |                    |        | on I  | Number C  |       |                   | ompany's Date |
| Current Address of Company                | City             |  |   |               |                    | County |   | Sta       | te    | e ZIP Code        |               |
| Project Address (if different from above) | City<br>Dayton   |  |   |               | County<br>Campbell |        |   | Sta<br>KY | te    | ZIP Code<br>41074 |               |
| Company's Taxable Year End Organizatio    |                  |  |   |               |                    |        | have a Campbell County and Dayton upational License? YES NO |           |       |                   |               |
| SECTION D: COMPANY'S CONTACT              |                  |  |   |               |                    |        |   |           |       |                   |               |
| Name of Company's Designee                | Title            |  | Name of Contact (if differ<br>designee) |               |                    | ere    | ent from  |           |       | Title             |               |
| Street or P. O. Box                       | City             |  |   |               | County             |        |   |           | State |                   | ZIP Code      |
| Telephone Number                          | Fax Number       |  |   | Email Address |                    |        |   |           |       |                   |               |



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| SECTION E: RENTAL ABATEMENT APPLICATION   |  |  |                |   |                             |  |  |  |  |  |  |  |
|---|--|--|----------------|---|-----------------------------|--|--|--|--|--|--|--|
| Number of employees moving with business.   | Estimated number of expected weekly patrons? | Do you comply with Ca<br>County Code Ordinance<br>YES NO |                | Do you comply with City of Dayton<br>Code Ordinance?<br>YES NO  |                             |  |  |  |  |  |  |  |
| Has the subject property been<br>pursued for code violations<br>within the last year?   | If YES, explain                              | What is the busines annual revenues?                     | ss' expected t | Does the lease include a 3- year<br>non-adjustable rental rate? |                             |  |  |  |  |  |  |  |
| YES NO  |  | What is the busines annual costs?                        | ss' expected t | What is the 3-year non-<br>adjustable rental rate               |                             |  |  |  |  |  |  |  |
| Do you have a SBDC mentor?  YES NO  |  |  |                |   |                             |  |  |  |  |  |  |  |
| Please provide the following information about your mentor.   |  |  |                |   |                             |  |  |  |  |  |  |  |
| Name  | Mentors Field of Expertise                   | Meeting Schedule   |                |   | Mentor's Email              |  |  |  |  |  |  |  |
| Please list three previous work experiences most related to your current field.   |  |  |                |   |                             |  |  |  |  |  |  |  |
| Employer  | Job Title                                    | Dates E  | mployed        |   | Work Performed              |  |  |  |  |  |  |  |
| Telephone Number  | Supervisor                                   | From:  | То:            |   |                             |  |  |  |  |  |  |  |
| Employer  | Job Title                                    | Dates E  | mployed        |   | Work Performed              |  |  |  |  |  |  |  |
| Telephone Number  | Supervisor                                   | From:  | То:            |   |                             |  |  |  |  |  |  |  |
| Employer  | Job Title                                    | Dates E  | mployed        |   | Work Performed              |  |  |  |  |  |  |  |
| Telephone Number  | Supervisor                                   | From:  | From: To:      |   |                             |  |  |  |  |  |  |  |
| The following materials shall co<br>with the application packet.<br>Documents to Attach:<br>Standard Business Plan<br>1. Executive Summa<br>2. Company Descrip<br>3. Market Analysis<br>4. Organization and<br>5. Service or Produc<br>6. Marketing and Sa<br>7. Financial Projection | ry<br>tion<br>Management<br>t Line<br>les    | n. No documentation e                                    | xcept that red | questec   | d below should be submitted |  |  |  |  |  |  |  |
| Affidavit certifying the lease is an arm's length transaction   |  |  |                |   |                             |  |  |  |  |  |  |  |

Up to 3 most recent business's Tax Return(s) (*if applicable*)



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## SECTION F: APPLICATION AUTHORIZATION, CERTIFICATION & ACKNOWLEDGMENT

I, the person in charge, of the applicant business/property applying for "Approved Project" status from the City of Dayton, Kentucky, hereby certify that I have been authorized to file this application and to provide the information within the accompanying this application and that the information provided herein is true and complete and that it reflects the applicant's intentions for investment to the best of my knowledge after having conducted reasonable inquiry. I understand that the information provided with this application will be relied upon by the City in deciding whether to grant "Approved Project" status and that the City reserves the right to act against the applicant or any other beneficiary of the Approved Project if the City discovers that the applicant intentionally provided misleading, inaccurate, or false information. I make this certification under the pains and penalties of perjury.

The applicant's signatures also acknowledge that pursuant to KRS 61.870 et seq., the Kentucky Open Records Act that this application and documents submitted in support thereof are public record.

*Furthermore, the applicant's signature confirms that they have reviewed and accepted all parts of this program's policies.* 

Signed:

Name

Title

Date

Questions? Call Dayton City Hall at: 859-491-1600 or email jbarks@daytonky.com