



Application  
Small Business Grant Program

<b>APPLICANT INFORMATION</b>	<input type="checkbox"/> Building Owner	<input type="checkbox"/> Business Owner
First Last Name:		
Phone Number:		
Email:		
<b>BUILDING OWNER</b>		
First Last Name:		
Phone Number:		
Email:		
<b>PROJECT INFORMATION</b>		
Business Name:		
Building Address:		
Planned start date:	Planned completion date:	
Description of work:		

Direct submittals and questions to:  
City of Piqua Development Department | 201 W Water St | Piqua, OH 45356  
937.778.2049 | [bharp@piquaoh.org](mailto:bharp@piquaoh.org)



Application  
**Small Business Grant Program**

<b>PROJECT BUDGET</b>			
Item of work	Amount		
1.	\$		
2.	\$		
3.	\$		
4.	\$		
5.	\$		
Total Project Cost	\$		
Total Grant Request (not more than eligible percentage of total project cost; max \$70,000)	\$		
Total Funding Match by Business/Owner (total project cost less grant request)	\$		
Source of Business/Owner Funding Match (business checking, bank loan, other):			
<b>SUPPORTING DOCUMENTS INCLUDED</b> (all items indicated must be included with application)			
Project Cost Estimate	Renderings, drawings, images	Statement of Impact	Statement of Need
<b>ACKNOWLEDGMENT AND AUTHORIZATION</b>			
By signing this form, I certify that the above information is true and accurate to the best of my knowledge and I approve of the proposed project improvements.			
_____ Applicant Signature		_____ Date	
_____ Property Owner Signature		_____ Date	

Direct submittals and questions to:  
 City of Piqua Development Department | 201 W Water St | Piqua, OH 45356  
 937.778.2049 | [bharp@piquaoh.org](mailto:bharp@piquaoh.org)