WI TOMORROW MAIN STREET BOUNCEBACK GRANT APPLICATION

SECTION I-APPLICANT INFORMATION				
Legal Entity: □C Corp □S Corp □LLC □LLP □Partnership □Sole Proprietor				
□Nonprofit				
Legal Name (as it appears on W-9 or IRS filings for non-profit):				
Trade Name:				
Mailing Address:				
City, State, Zip:		County:		
FEIN: DO NOT ENTER SSN		NAICS:		
(Federal Employee Identification Number –Tax ID)		NAICS Code Lookup		
	Date Established: Primary			
	/ebsite URL: Phone:			
Head of Organization:	Title:			
Email:				
LOCATION	N INFORMA	TION		
Commercial Property Location: □City □Town □\	/illage of:			
Physical Address:				
C	ONTACT			
Application Contact:	Title:			
Email: Comp		any:		
Phone: Mailing		g Address:		
City, State, Zip:				
DEMOGRAPHICS (51% or more	ownership.	Please check all that apply)		
Is the business/organization:				
Minority-Owned Business:		□Yes □No		
Woman-Owned Business:		□Yes □No		
Veteran-Owned Business:		⊒Yes □No		
Disabled-Owned Business:]Yes □No		
LGBT-Owned Business:		□Yes □No		
Do not wish to disclose		□Yes □No		
SECTION II-EMPLOYMENT				
CURRENT FULL-TIME EQUIVALENT EMPLOYMENT One full-time equivalent (FTE) employee is one or more employees working a total of 40 hours a week				
Total Company FTE Employment:		otal Location FTE Employment:		

SECTION III-ATTACHMENTS					
Please include the following attachments:		Attachment #			
 Proof of Business Acceptable forms of business include but are not limited to: incorporation documents, government registration (federal, state, county, or city), permits, Doing Business As (or Fictitious Business Name, or Assumed Business Name), or business tax returns. Not accepted are Tax IDs/EINs as proof of business for sole proprietorships. 					
 Property Information a. Provide a copy of a fully executed 12-month lease with a term 12 months or greater reflecting the Applicant as the tenant or a Land Contract/Contract for Deed or Warranty Deed reflecting the Applicant as the purchaser. The lease/sale documents must also meet these conditions:					
3. Acknowledgement Letter (sample attached) a. Provide a letter from an economic development organization, including but not limited to: regional economic development organization, local municipality, Chamber of Commerce, Business Improvement District, Main Street or Connect Community organization, stating that the business occupant represents a new tenant/owner to the commercial space or an expansion of an existing tenant into additional commercial space, with lease/sale documents dated on or after 1/1/2021 and before or on 6/30/2022.					
4. Completed IRS form W-9					

SECTION IV-PLANNED USE OF GRANT FUNDS				
Please indicate how you intend to use the grant funds. Check all that apply.				
Lease Payments				
Mortgage Payments				
Business Operating Expenses				
Building Repair and Tenant Improvements				
Other:				

CERTIFICATION STATEMENT

THE APPLICANT CERTIFIES TO THE BEST OF ITS KNOWLEDGE:

- 1. Neither the owner(s) nor the business is listed on any of the following:
 - 1. Wisconsin Department of Revenue Delinquent Taxpayer List
 - 2. Wisconsin Department of Transportation Debarred Contractors List
 - 3. Wisconsin Department of Administration Compliance Vendor Directory
 - 4. Wisconsin Department of Corrections Sex Offender Registry
- 2. The business has not vacated a commercial space to become eligible to claim this grant.
- 3. The business is not part of a national chain, unless the business is a third-party franchise.
- 4. The business is not dead storage.
- 5. The business is not a governmental unit.
- 6. The business is not for residential use or a lessor of residential units/property (landlords), unless the business unit of the lessor is moving into a vacant commercial space to support functions of the business.
- 7. The business is not a real estate investment firm, when the real property will be held for investment purposes as opposed to otherwise eligible small business concerns for the purpose of occupying the real estate being acquired.
- 8. The business is not engaged in any illegal activity under federal, state, or local law.

Signature:		Date:			
	(Authorized Representative of Applicant Company)				
Printed	Name: Title	::			
Applicar	nt Company Name:				

Form Acknowledgment Letter (WI Tomorrow Main Street Bounceback Grant Application)

[Place on letterhead of regional economic development organization, local municipality, Chamber of Commerce, Business Improvement District, Main Street or Connect Community organization]

Date:							
To: {Insert Na	ne of Recipient	t Organization}					
Re: WI Tomo	rrow Main Str	eet Bounceback	Grant App	olication			
This letter shall confirm of a previously vacant previously vacant comm	commercial sp	ace or has expand	("Busin ded the Bus	ess") is a siness foc	new totprint	enant or ov into additi	wne ona
	-	s previously {{inse				located	a
The lease or sales contr	act entered into	by Business is d	ated				·
Sincerely,							
Name and title/position	of authorized	signer.					