

# Lease Subsidy Grant Program APPLICATION



Daytona Beach CRA

Redevelopment District \_\_\_\_\_

Business (Tenant/ Applicant) \_\_\_\_\_

Business Address:

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

Mailing Address:

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

Email address \_\_\_\_\_

Business Telephone \_\_\_\_\_

Federal I.D. Number \_\_\_\_\_

Contact Name \_\_\_\_\_

Telephone \_\_\_\_\_

Property Owner \_\_\_\_\_

Telephone \_\_\_\_\_

Property Owner's Mailing Address:

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

Applicant's Business Type: \_\_\_\_\_

Description of Business:

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

Is this a new business (in operation less than 6 months) or a relocation of an existing business? \_\_\_\_\_

Proposed Business Hours \_\_\_\_\_

Estimated Date of Business Opening \_\_\_\_\_

Eligible businesses may receive awards of up to 3 months' rent for a minimum of one year lease with no single grant exceeding \$1,500 per month.

Annual Lease per sq. ft. \_\_\_\_\_ Lease Term: \_\_\_\_\_

Monthly Rent Amount \_\_\_\_\_ Total Requested Subsidy \_\_\_\_\_

The Applicant must attach and submit with this application the following documents:

1. A copy of the signed multi-year lease agreement.
2. A business plan including executive summary and three-year financial projections of revenues and expenses.
3. Three-years of historical financials (for existing businesses only).
4. Applicant must be part of the City's Business Development Program

If for any reason the Applicant/Grantee shall fail to comply with the requirements of the Lease Subsidy Grant Program as approved by the City of Daytona Beach Community Redevelopment Agency, or shall fail to comply with applicable City of Daytona Beach Land Development Codes or City Ordinances as determined by Redevelopment Staff the approved grant shall be subject to termination by Redevelopment Staff.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name: \_\_\_\_\_ Title \_\_\_\_\_

Property Owner Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ Title \_\_\_\_\_

FOR OFFICE USE:

<input type="checkbox"/> Zoning <input type="checkbox"/> Permitted Use	<b>Application Checklist:</b> <input type="checkbox"/> Proof of Ownership <input type="checkbox"/> Written Consent of Owner <input type="checkbox"/> Completed application form <input type="checkbox"/> Copy of Lease <input type="checkbox"/> Business Plan <input type="checkbox"/> Historic Financials (3yrs) <input type="checkbox"/> Applicant does not owe the City	<b>Approval:</b> Application received by: _____ Improvements meet Design Standards: _____ Date _____ Redevelopment Director Approval: _____ Date _____
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