

Main Street High Side Beer Cheese Relief Fund

Please complete this application and return to the City of Winchester c/o Downtown Development Investment Fund Director, located at 32 Wall Street, Winchester, Kentucky. The following application will provide staff with the information needed to determine your eligibility to receive a Downtown Development Investment Fund (DDIF) Grant.

Business Support Grants will not exceed \$10,000.00 per business.

Date: _____

Applicant Information

Applicant Name: _____

Business Name: _____

Property Address: _____

Mailing Address (if different): _____

Contact Information: Home: () _____
 Mobile: () _____
 Email: _____

General Information

Is the property located within the Downtown Historic District?	YES	NO
Do you own the property?	YES	NO
Are the property taxes paid to date?	YES	NO
Are there current code violations levied against the property?	YES	NO
Have any insurance monies been paid, or have there been any claims against the structural property in the last five years?	YES	NO

Outline Letter

Once the above application is completed, attach an outline letter that includes the following information:

- Name, location and description of your business along with your official open-for-business date.

- Estimated confirmation of percentage of your business generated from walk-in traffic, unique (first time) visitors, tourism related assets or events (public or private.)
- Current hours of operation.
- Statement (as outlined in the eligibility guidelines) evidencing losses related to the High Side project. (Total losses eligible for reimbursement is 60% with a maximum of \$10,000.00.)
- Total amount requested for Grant (maximum is \$10,000.00.)
- Narrative of how the High Side Project has impacted your business.

Required Documentation Checklist

The following documentation **MUST** accompany your application, or it cannot be processed.

- ☐ Completed and signed application
- ☐ Listing of owners / partners and officers / directors who have ownership in the property or business.
- ☐ Outline letter as indicated above.
- ☐ Statement evidencing loss of income.
- ☐ Total amount requested for this grant.

APPLICANT ACKNOWLEDGEMENT OF UNDERSTANDING

I, _____ (print name) certify that all statements on this application are true and correct to the best of my knowledge. My signature below acknowledges I understand the City of Winchester's Downtown Development Investment Fund Program. I hereby grant permission to verify the information supplied on my application.

I understand that this program is funded by the City of Winchester Downtown Development Investment Fund and monies may or may not be available on a yearly basis. Therefore, by signing this application, I understand there is no guarantee of the availability of grant funds.

I understand that the Downtown Development Investment Fund committee will review all applications and further reserves the right to approve or deny any application.

I understand that any recipient of a grant will be issued a 1099 or a W-9 for the amount received. Signing this document, or receiving grant monies does not indicate a settlement nor does it absolve responsibility for future claims against the City of Winchester.

(applicant signature)

(printed name)

Completed submissions should be returned to:
Business Compensation Grant – Director - TBA