



City of Erie, PA
Department of Economic and Community Development
Microenterprise/Small Business Stabilization Grant Application

Business Name: _____

Business Address: _____

Owner's Name: _____

Business Phone: _____ Cell Phone: _____

Do you ___ RENT or ___ OWN Business Property? Monthly Rent/Mortgage: _____

EIN/SSN: _____

Primary
Industry/DUNS#: _____

Ownership Structure: ___ Corporation ___ LLC ___ Sole Proprietorship ___ Other

If Other, please specify: _____

2019 Gross Sales: _____

2019 Net Earnings: _____

Number of Employees: _____

Monthly Expenses: _____

Amount Requested: _____

Purpose of Grant/Forgivable Loan:

Have you filed Bankruptcy within the past 10 years? ____ YES ____ NO

Are there any outstanding judgements against you? ____ YES ____ NO

Are you presently a party to any lawsuits? ____ YES ____ NO

Are there any local, state, or federal tax liens filed against you? ____ YES ____ NO

Are you current with all local, state, and federal taxes? ____ YES ____ NO

Signature: _____

Date: _____

Please attach all documentation required per the application guidelines and submit to:

Jennifer Hoffman

City of Erie - Business Development Officer

jhoffman@erie.pa.us