



## **UTILITY GRANT APPLICATION**

(PLEASE TYPE OR PRINT)

Name of Business: \_\_\_\_\_

Street Address: \_\_\_\_\_

\_\_\_\_\_

Owner or Contact Person: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail address \_\_\_\_\_

Business Owner (if different than contact): \_\_\_\_\_

Address : \_\_\_\_\_ Phone: \_\_\_\_\_

Type of Business: \_\_\_\_\_ Commercial \_\_\_\_\_ Industrial \_\_\_\_\_ Retail

Product(s) or Service: \_\_\_\_\_

Permanent (full-time) employees: \_\_\_\_\_

Number of Full-time Equivalent Jobs (Take total hours per week worked by full-and part-time employees and divide by 40.)

Retained due to project: \_\_\_\_\_

Created within one year due to project: \_\_\_\_\_

Estimated Date of Project Start: \_\_\_\_\_ Completion: \_\_\_\_\_

Estimated Cost of Project:

Remodeling \_\_\_\_\_

New Construction \_\_\_\_\_

Capital Equipment \_\_\_\_\_

Material \_\_\_\_\_

Site \_\_\_\_\_

Total Project Costs \_\_\_\_\_

Description of project: \_\_\_\_\_

Under penalties of perjury as provided by law pursuant to Section 1-109 of the Code of Civil Procedure, the undersigned certifies that the statements set forth in this instrument are true and correct except as to matters therein stated to be on information and belief and as to such matters, the undersigned certifies as aforesaid that he/she verily believes the same to be true.

Name of Applicant(PRINT): \_\_\_\_\_ Title: \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date: \_\_\_\_\_

**The following criteria must be met in order to be eligible for the City of Marshall Utility Grant:**

- **City of Marshall Utility Customer**
- **Must be a new business or an existing business expansion with job creation**
- **Must be in good standing with current utilities**

**The maximum grant amount is limited to \$1200.00 per business per year. The grant can be applied to the business applicant's utility account or be used towards utility hook-ups fees for a new business. If payment defaults or you have a late payment you forfeit the remainder of the grant. All applications will be reviewed and approved by the City of Marshall's Economic Development Committee on a case-by-case basis. Grants will be awarded on a first come/first serve basis as long as funds are available. The City of Marshall reserves the right to accept or reject any and all applications. If you have any questions, please contact Mayor Camie Sanders at 217-826-8087.**

Grant applications may be mailed to:  
City of Marshall  
C/O Economic Development  
201 S. Michigan Avenue, P.O. Box 298  
Marshall, IL. 62441

**FOR OFFICE USE ONLY**

**File Number:** \_\_\_\_\_

**File Name:** \_\_\_\_\_

**Date Application Received:** \_\_\_\_\_

**Economic Development Committee Approval** \_\_\_\_\_

**Date** \_\_\_\_\_

**Grant Amount** \_\_\_\_\_