

City of Olean
BOOST BUSINESS GRANT 75% / 25% PROGRAM
REAL ESTATE ASSISTANCE APPLICATION FORM
(RENTAL, MORTGAGE OR LAND CONTRACT)

TARGET AREA: 600 block of North Union Street – 600 block of South Union Street; 100 block of West State Street to 12th Street and 100 block of Wayne Street to 12th Street.

PART 1. APPLICANT INFORMATION

Name of Applicant: _____ Corporation Year _____ State _____

Business Address: _____ Partnership Year _____ State _____

_____ L.L.C. Year _____ State _____

Contact Person: _____ L.L.P. Year _____ State _____

Federal ID #: _____ Sole Proprietorship Year _____

Telephone: () _____ Cell: () _____ E-Mail: _____

Nature of Business and number of employees: _____

Company Attorney: _____ Accountant: _____

Firm Name: _____ Firm Name: _____

Address: _____ Address: _____

Telephone: _____ Telephone: _____

Ownership (Shareholders / Partners) interest	%	Company Officers	Position

(attach additional listing as necessary)

- Is the company delinquent in the payment of any City water or sewer bills? Yes No
- Is the company delinquent in the payment of any state or municipal property taxes? Yes No
- Is the company delinquent in the payment of any income tax obligation? Yes No
- Is the company delinquent in the payment of any loans? Yes No
- Is the company currently in default on any of its loans? Yes No
- Are there currently any unsatisfied judgments against the company? Yes No
- Are there currently any unsatisfied judgments against any of the company's principals? Yes No
- Has the company ever filed for bankruptcy? Yes No
- Have any of the company's principals ever personally filed for bankruptcy or in any way sought protection from creditors? Yes No

If the answer to any of the questions above is "Yes," please provide additional comments in the space below and on additional pages, if necessary.

PART 2. PROJECT INFORMATION

Summary Project Description: _____

Project Costs Per Month

Rental Assistance	\$ _____
Mortgage Assistance	\$ _____
Land Contract	\$ _____
Other	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total

Sources of Funds

Bank	\$ _____
Equity / Cash	\$ _____
BBG Assistance Request	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total

PART 3. BUSINESS DETAILS AND NEED

1. **Company Description:** a narrative describing the Company's history, current or planned operations, products and/or services currently sold and/or planned, the Company's management and structure, and current and projected employment.

2. **Need:** information regarding the need for financial assistance. (75% of the monthly payment will be covered by the business and 25% of the monthly payment will be requested under program funds via reimbursement.)

3. **Financial Information:** historical financial information (financial statements, tax returns), financial projection, profit and loss statement, balance sheet and monthly cash flow statement, letter from landlord, mortgagee, note holder, etc.

Please include any other material that may serve to document the information provided with this application or that would assist in the consideration of this application.

ACKNOWLEDGMENT OF SIGNATORY (IES)

State of New York)
)ss
County of Cattaraugus)

On the _____ day of _____ in the year 2022 before me, the undersigned, a Notary Public in and for said state, personally appeared _____ to me known or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

Signature of Notary Public

Notary Stamp:

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