



Howard Lake Chamber of Commerce Small Business Grant Program

Howard Lake Chamber of Commerce has instituted a program designed to assist small business development and growth. Grants ranging from \$250 to \$1000 will be awarded to selected businesses in Howard Lake who meet the specified criteria and provide adequate documentation supporting their grant request.

Applications will be judged in the following categories:

- Grant funds will increase business exposure.
- Grant funds will increase business capacity.
- Grant funds will positively impact City and surrounding businesses.
- Plans for spending grant funds are clearly defined.

To apply, review the guidelines below and complete the application. You must provide all requested information to be eligible.

The applications will be reviewed bi-annually. Please submit to the HLACC by January 30th and/or June 30th.

Completed applications may be mailed to: HLACC, PO Box, Howard Lake, MN 55349 or emailed to info@HowardLakeChamber.com

Please type or print clearly. You may attach extra documentation if more space is required.

Guidelines and Eligibility Check List

- ___ 1. To be eligible for the HLACC Grant you must become a member of the Howard Lake Area Chamber of Commerce.
- ___ 2. The award may be granted to a selected small business who is new or reopening by grant submission date in the area of Howard Lake.
- ___ 3. Applicants must complete the entire application, and it must be typed or written clearly. Please include as much detail as possible.
- ___ 4. Application for the grant gives permission for the Howard Lake Area Chamber of Commerce Board of Directors, staff or a designee to visit the business for evaluation.
- ___ 5. A small business is defined as a business with the equivalent of 50 full time employees or less.
- ___ 6. Applicants must include a brochure, business card or flyer that adequately describes their business.
- ___ 7. If you are selected as a HLACC Grant recipient, you will be required to fill out a grant accountability form.
- ___ 8. To be eligible for the HLACC grant, you agree to provide in-kind match of funds, goods, or services for the amount of funds received by the grant. The in-kind funds can include payment for rent, advertising, office supplies purchased, etc.

Payment Terms

Grant money will be provided as reimbursement for spending after approval of the small business grant application by the selection committee. Payments will be made directly to vendors or reimbursed to grant recipient with a copy of invoice and proof of payment. An accountability form will be provided and must be completed prior to grant funds being released. The accountability form will include a section for in-kind matching.

Recipients would be encouraged to select products and/or services from a list of chamber member businesses. You may obtain a list of chamber member businesses by visiting www.howardlakechamber.com.

**The decisions of the selection committee will be final.
The HLACC reserves the right to limit applications, modify or change the program at any time.
Email info@howardlakechamber.com**



**Howard Lake Area Chamber of Commerce
Small Business Grant Application**

Date Joined _____
Office Use Only

Date: _____

Business Name: _____

Physical Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

Telephone Number: _____ Fax Number: _____

Are you currently open for business? YES NO Is your business home-based? YES NO

What year did you start your business: _____

Business Information: Form of Business (circle one) Sole Proprietorship Partnership* Corporation
* If your business is a partnership, all owners must be listed below.

Type of Services/Products Offered: _____

Date Business Originated: _____ Number of Full-Time Employees: _____

*Business Owner(s): _____

Federal ID# _____ State ID# _____

Have you applied for the Howard Lake Area Chamber Small Business Grant in the past? YES NO If yes, when _____

On average, how many chamber functions do you attend each year? _____

Have you or anyone from you company served on any committees with the Chamber? _____

What is your mission or vision of your business?

Give a brief statement on the plans for your business over the next five years.

Project Estimates: \$ _____ Grant Requested Amount: \$ _____

Describe how you plan to use the grant: _____
Attach additional information if needed

How will you measure or quantify whether the grant is successful to your business? _____

Grant Awards will be up to \$1000. If your project exceeds this amount or if you do not receive the full amount requested, will your project be completed? YES or NO

By signing this application, I certify that the information in this application is true, complete and accurate to the best of my knowledge. I am aware that information will be kept confidential and that the selection of the grant recipients is at the sole discretion of the Howard Lake Area Chamber of Commerce.

Signature: _____ Print Name: _____ Date: _____

*Signature: _____ Print Name: _____ Date: _____

*A second signature is required if there is more than one business owner.

ATTACH BUSINESS CARD, BROCHURE OR FLYER THAT ADEQUATELY DESCRIBES YOUR BUSINESS