



**CITY CENTER RETAIL AND RESTAURANT INCENTIVE PROGRAM  
APPLICATION**

**Applicant Information**

Company Name: \_\_\_\_\_

Representative's Name: \_\_\_\_\_ Title: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

**Business Information:**

Written description of Business: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Estimated total number of jobs created: \_\_\_\_\_

Total investment associated with opening business: \_\_\_\_\_

**Use of Grant:**

Written description of how the Grant will be used: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Terms of Lease:**

Lease start date: \_\_\_\_\_ Number of years: \_\_\_\_\_ Square feet leased: \_\_\_\_\_

**Required Attachments to this Application:**

- Please provide a business plan.
  
- Please provide a chart breaking down and describing all expenses. Separate the expenses into *Renovations* and *Operational* expenses. Please be as descriptive as possible. The DCED Review Committee will award a \$2,000, \$3,000 or \$4,000 grant after reviewing your expenses against attributes:
  - ◇ Square feet leased
  - ◇ Proposed renovation expenses
  - ◇ Proposed operational expenses
  
- Please provide a copy of a draft or executed lease. If a draft lease is submitted, a final executed lease reflecting the same terms and conditions will be required prior to finalization of the incentive.

**Applicant Signature:**

*By signing below, I certify that the information above is true and correct. I agree to comply with the program requirements as outlined in the City Center Retail and Restaurant Incentive Program Guidelines and I understand that failure to comply with the program requirements will result in repayment of any City incentives received unless alternative approvals are granted by the City.*

\_\_\_\_\_  
*Applicant's Signature*

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

**Return to:**

Department of Community & Economic Development  
City of Hagerstown  
14 N. Potomac, Suite 200A, Hagerstown, MD 21740  
Phone: 301-739-8577 x111 Email: [dced@hagerstownmd.org](mailto:dced@hagerstownmd.org)