

The Merchants Fund is committed to providing for the economic needs of the merchant community with modest grants. Merchants must do business in Philadelphia and have conducted business for a minimum of three years.

Business Stabilization grants of up to \$10,000 are available to help small businesses remain stable and viable in the face of economic challenges, changes and crisis. The application process is competitive. There is no guarantee of an award. We recommend that merchants explore other funding sources simultaneously to the grant application process.

The Merchants Fund does not support:

- New ventures
- Businesses operated from home or costs related to moving outside of the home
- Businesses holding only an off premises liquor license
- Excluded businesses: lawyers, doctors, accountants, brokers (insurance, real estate, stock), consultants, and other professionals. Please call if you are unsure whether your business is qualified to be considered for a grant.

The Merchants Fund does not discriminate based on race, color, religion, national origin, age, gender, sexual orientation, marital status, or disability.

Personal Information

Name: _____

(The applicant is the Merchant and primary owner.)

Home Address: _____

Email Address: _____ Telephone Number: _____

Social Security Number: _____ Date of Birth: _____

U.S. Citizen: Yes No Naturalized Citizen/Resident Alien: Yes No

Marital Status: Married Single

What is the name of the business? _____

What is the nature of the business conducted? _____

Address of business: _____

How long have been you in business? _____

How many employees do you have? (include yourself) Full time _____ Part time _____

State Tax Number: _____ Federal Tax Number: _____

Is your spouse also significantly involved/co-operator of the business? Yes No

Describe role: _____

Name of spouse: _____

Spouse's Social Security Number: _____

U.S. Citizen: Yes No Naturalized Citizen/Resident Alien: Yes No

Please check one: Sole Proprietor Corporation Limited Liability Corp.

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Do you have dependents whom you support (over 50% of annual expenses) that reside with you? If so list each person and their relationship to you.

Provide the name and phone number of three people or the officers of the corporation to whom The Merchants Fund may refer to confirm the information provided (*Do not include family or friends unless they are actively involved in the business*):

Business and Financial Information

Please provide the following:

- copies of all current licenses from the City
- current business plan, if available

Please provide the following:

- 3 years of state income tax returns
- 3 years of Philadelphia city income tax returns (if applicable)
- 3 years of federal income tax returns
- current profit and loss statement

Who maintains your financial records? Please provide the name and contact information. If it is a member of the family please note the relationship.

Assets

Checking Accounts:

<hr/>	<hr/>
(bank name)	(current balance)

Savings/Retirement/Investment/Trust Accounts:

<hr/>	<hr/>
(bank name)	(current balance)

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(bank name)	(current balance)

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Real Estate:

Assessed value of Real Estate Including Investment Properties (in your name or your spouse's): _____

Unpaid Mortgage Balance on Real Estate: _____

Grants for Business Stabilization

These grants are designed to help small businesses remain stable and viable in the face of economic challenges, changes and crisis.

These grants include: physical improvements or repairs to your building, equipment, fixtures, business plans, advertising or marketing campaigns.

The Merchants Fund may require a site visit to the business as part of the application process.

You may apply for up to \$10,000. Amount you are applying for: \$ _____ (total must be equal to list below)

Please describe how you will use the grant. Be as specific as possible. For example: if you are requesting funds for physical improvements or equipment please send photos, drawings or specifications

Do you have a deadline for when you need the grant in hand to meet a commitment?

Date: _____

It is **very strongly** recommended that you have someone from a supporting agency sign your application. Examples: Your local Community Development Corporation (CDC), Small Business Development Center (SBDC), Merchants Association, Empowerment Zone, Neighborhood Association, Corridor Main Street manager, etc. If you need help identifying an appropriate agency, please call or email.

Sponsoring Agency: _____

Contact Person: _____

Phone Number: _____ Email: _____

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The information provided in this application is true and accurate. I grant permission to the agents of The Merchants Fund to contact and discuss information contained in this application with the references provided. I agree to allow The Merchants Fund to run a credit check.

Date: _____ Signature: _____

Signature (spouse): _____

Information provided in this application is confidential and will be used solely to determine eligibility for a grant from The Merchants Fund.