

Business Recovery Grant Application

Business Name: _____ Contact Person: _____

Address: _____ Phone or email: _____

Years in business: _____ Number of Employees: _____ Full-time _____ Part-time

1. Tell us about your business (what do you do, who do you serve, what are your future plans, etc)

2. How has/did Covid-19 affected your business?

3. How would this grant impact your business/employees or what would this grant allow you to do at your business?

Applicants must be a business residing in Parke County and actively conducting business during the coronavirus pandemic.