ENTREPRENEUR GRANT PROGRAM 2020



APPLICATION FORM

| Date: | |
|--------------------------------------|--|
| Name of Business: | |
| Name of Business Owner(s):_ | |
| Legal Land Location: | |
| Mailing Address: | |
| Email Address: | |
| Phone: | |
| | |
| Please read Policy 1.33 Entreg form. | Grant Program Policy before filling out this application |
| Applicants must attach their or | e description to this Application Form. |
| | ic and Tourism Development Committee meeting one year . I/We will present our business idea, plan, the process and siness coach. |
| Applicant Signature | Business Owner |

Please submit your application to the County's Economic Development Officer by mail at Bag 1300, Peace River, AB, T8S 1Y9, by fax at (780) 624-0023 or by email at lflorence@northernsunrise.net.