



DEVELOPMENT  
JAMESTOWN / STUTSMAN COUNTY

Jamestown/ Stutsman Development Corporation (JSDC)

# *Daycare Expansion Assistance Program Application*

## *Fund Request*

120 2nd St SE / P.O. Box 293  
Jamestown, ND 58401

701-252-6861  
[www.growingjamestown.com](http://www.growingjamestown.com)

*The JSDC is funded by the authority of the City of Jamestown and Stutsman County. This application will require the approval of the Jamestown City Council and the Stutsman County Commission prior to an issue of a firm commitment to the prospect company/individual. This document serves as the application for the Daycare Expansion Assistance Program.*

## SECTION ONE-General Information

Legal Name of Company:		Company Address:
		city/state/zip
Contact Name	Title	Office Phone
Cell Phone	Email	

Does the applicant have a business relationship with any JSDC Board or staff member? ☐ Yes ☐ No  
If yes, who? \_\_\_\_\_

## SECTION TWO – Request Information

Purpose of Request (Check All that Apply):

☐ Fixtures ☐ Furniture ☐ Equipment ☐ Construction

Total Project Financing Requirements \$ \_\_\_\_\_ Amount Requested \$ \_\_\_\_\_

Level of Owner's Equity Commitment \$ \_\_\_\_\_ Date Funds Needed \_\_\_\_\_

Describe Equity \_\_\_\_\_

Loan Officer Name & Contact Information: \_\_\_\_\_

## SECTION THREE– Company Information

Current/Projected Legal Structure

☐ Sole Proprietorship ☐ Corporation ☐ S Corporation ☐ General Partnership ☐ Limited Partnership  
☐ Limited Liability Company ☐ Limited Liability Partnership ☐ Other

Federal Tax ID# \_\_\_\_\_ Date Company Established \_\_\_\_\_

Current Childcare Licensure:

☐ Licensed ☐ In Process of Licensing ☐ Not Licensed

Business Ownership Information

Owner Name(s)	% Owner	Title	Phone	Email & Home Address
Management Name(s)		Title	Phone	Email

Current number FTE employees \_\_\_\_\_

Projected number FTE employees \_\_\_\_\_

Current Average Annual Salary \_\_\_\_\_

Projected Average Annual Salary \_\_\_\_\_

## SECTION FOUR– Business Summary

*Applicant may attach the Executive Summary from the Business Plan in lieu of completing items below. Please make sure all items are addressed.*

Describe your business: \_\_\_\_\_

\_\_\_\_\_

Describe how this project benefits your business: \_\_\_\_\_

\_\_\_\_\_

Current capacity: \_\_\_\_\_

Additional capacity that will be gained by obtaining this grant: \_\_\_\_\_

How do you plan to sustain increased capacity? \_\_\_\_\_

\_\_\_\_\_

Provide a detailed scope of what will the funds requested be used for and how it will help raise capacity (Please attach additional pages including pictures, estimates, and description of project): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have any of the business owners received funds from JSDC in the past? Please explain: \_\_\_\_\_

Do you intend to apply for any additional incentives (i.e., taxes, etc.) \_\_\_\_\_

Anticipated Closing Date \_\_\_\_\_

***Applicants are strongly encouraged to attend the JSDC Board Meeting at which their application is being considered.***

I, as the applicant, will be responsible for reimbursing JSDC for all hard costs of processing this application. These costs include legal fees depending on the specifics of the project. JSDC will provide the invoices/receipts or an estimate of hard costs to be reimbursed.

\_\_\_\_\_  
Applicant Signature of Acknowledgement

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Applicant