

**CLEAN AIR RESOURCE CENTER
SMALL BUSINESS ASSISTANCE GRANT APPLICATION**

Type of Business (Circle all that apply): Sole Proprietor Individual Partnership Corporation
 Firm Association Not-for-Profit Public Entity

1. Name of Business Entity: _____
Owner's Name: _____
Principal Place of Business:
Address: _____ City, State & Zip: _____
County: _____ Telephone: (____) _____ Fax: (____) _____
E-Mail Address: _____ Website Address: _____
2. Parent Corporation Name and Address: _____

3. Will Parent Corporation be involved in financing? ____Yes ____No
4. Key Business Description: _____

5. Number of Employees: _____

AIR QUALITY

6. Does this entity emit fifty (50) tons or more per year of any regulated pollutant?
 ____Yes ____No
- Does this entity emit less than seventy-five (75) tons per year of all regulated pollutants?
 ____Yes ____No
- Air pollutants/contaminants emitted by your business: _____

7. Ohio EPA Source & Premise Number: _____

PROJECT

8. Brief description of proposed air quality facility. Please include a copy of detailed project description including quantities of pollution controlled and/or prevented as well as energy saved or reduced. Also include the equipment model and serial number(s).

9. Status of plans for project:

Contract with consulting engineers []

Preliminary plans completed []

Detailed plans completed (include copy of plans, if completed) []

10. Please provide reports, statements or plans applicable to the Air Quality Control Facility and other information or documentation to support your application.

11. Is an Ohio EPA permit required? _____

If yes, is the permit in process or received and date: _____

FINANCING INFORMATION

12. ESTIMATED COST OF FACILITY

Acquisition Expenses Associated with Air Quality Facility:

Legal Fees of Authority Counsel	\$ _____
Closing Fees	\$ _____
Authority Fees	\$ _____

13. Grant Funds Requested: _____

Has an entity previously applied for Grant funds? _____ Yes _____ No If yes, when? _____

14. Proposed Lender: _____

Loan Amount: _____ Interest Rate _____ %

15. Please provide letter evidencing lender certification of closing costs and proceeds use.

CERTIFICATION

By submitting this Grant Application, the undersigned certifies that it is an eligible small business within the meaning of Section 3706-2-01 of the Ohio Administrative Code. This business certifies that it:

- (1) is a small business stationary source, as defined in the Clean Air Act Amendments of 1990;
- (2) is not a major stationary source;
- (3) employees one hundred (100) or fewer individuals;
- (4) emits less than seventy-five (75) tons per year of all regulated pollutants;
and
- (5) emits fifty (50) tons or less per year of any regulated pollutant

The undersigned further certifies that should a grant be awarded to this business, the funds will be used exclusively to pay expenses associated with the acquisition of an Air Pollution Control Facility, as defined by Section 3706.01(G) of the

Ohio Revised Code, including, but not limited to, legal, closing, authority and other fees necessary for compliance with the Clean Air Act Amendments of 1990.

All information provided herein is true and accurate to the best of my knowledge. I/We understand that all statements contained herein will be relied upon in awarding a grant to the business named herein and will constitute a part of the Grant Agreement should a grant be awarded under the Air Quality Grant Assistance Program.

This application must be verified and signed by the applicant, a member of the firm or an officer of the corporation/association applying for Grant funds.

Date: _____

Name: _____
(Signature)

Title: _____

Telephone Number: (____) _____

Complete and mail this form to:

Mark Shanahan
Executive Director
Clean Air Resource Center
1718 LeVeque Tower
50 Broad Street
Columbus, Ohio 43215-5985

Or Fax to; (614) 752-9188

If you have any questions or require further assistance,
call us at 1 (800) 225-5051.