

**GRANITE STATE DEVELOPMENT CORPORATION**  
**Economic Development Grant Fund (EDGF) Application**

1. Grantee/Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

2. Amount Requested: \_\_\_\_\_

3. Grant Eligibility:

Job creation

Business education/Workshops

Job Training

Business incubators

Capital Expenditures

Community Revitalization

Procurement of Technical Assistance

Create jobs and support environmental conservation, health care and business education

4. Brief Description of use of Grant:

5. Projected time line for use of Grant:

6. Job Impact of Grant:

7. Background of Grant Manager:

8. Additional Supporting Grant Information:

9. Certification/Authorization:

I/we certify that all information provided is accurate and true.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_