

DOWNTOWN BUSINESS INCENTIVE GRANT PROGRAM



DOWNTOWN BUSINESS INCENTIVE GRANT APPLICATION

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APPLICANT INFORMATION

NAME:
PHONE:
EMAIL:

PROPERTY OWNER OR TENANT INFORMATION

NAME:	YEARS OWNED/LEASED:			
ADDRESS:	PHONE:			
CITY:	STATE:	ZIP:		
OWN/RENT:	OWN <input type="checkbox"/>	RENT <input type="checkbox"/>	IF RENT, OWNER APPROVAL ATTACHED:	YES <input type="checkbox"/>

DESCRIPTION OF NEW BUSINESS OR EXPANSION OF EXISTING BUSINESS