



## **PS, I Love You!**

### **Small Business Stabilization Fund Application**

This application will be reviewed by community members. Along with the requested items, please include any applicable information that would assist them in making a funding decision for your business.

Date:

Name of Business:

Email Address:

Phone Number:

Business Address:

Amount requested: \$ \_\_\_\_\_

How long have you been in business? \_\_\_\_\_

How many months do you have remaining on your current lease? \_\_\_\_\_

Please check this box to verify that your business has fewer than 50 employees.

Documents to include with this application:

- Business plan:
  - High level overview of your business
  - How does your business contribute to Pioneer Square?
  - What will these funds be used for?
  - How will these funds stabilize your operations?
- Current/signed W-9 form
- Copy of current business license

Signature of Applicant

Printed Name of Applicant

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