

**NORTHERN SHORE COMMUNITY DEVELOPMENT, INC.**

**1131 W Conway Rd. Harbor Springs, MI. 49740**

**(231) 347-6753 or FAX (231) 347-6786**

**F.A.R.M. (Farming, Agriculture, Ranching in Michigan)**

**Grant Application**

**A fully completed application will result in a faster answer.**

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**I. INFORMATION ABOUT YOU**

Name of applicant: \_\_\_\_\_

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

Home Telephone Number: \_\_\_\_\_

Please check if you: • Own • Rent • Other (explain) \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Email address: \_\_\_\_\_

Tribal Enrollment #: \_\_\_\_\_

How did you hear about NSCD?

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**II. INFORMATION ABOUT YOUR BUSINESS**

Name of Business: \_\_\_\_\_

Address of Business: \_\_\_\_\_

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

Contact person: \_\_\_\_\_

Telephone number: \_\_\_\_\_ Fax number: \_\_\_\_\_

**III. BUSINESS OWNERSHIP & MANAGEMENT**

**Structure of business (Circle One)**

- Sole Proprietorship
- Doing Business As (d/b/a)
- Limited Liability Corporation
- Sub Chapter S Corporation
- C Corporation
- Partnership
- Business Start-up

**IV. DESCRIPTION OF THIS GRANT REQUEST**

Please describe your financing need and/or project \_\_\_\_\_