METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY

Freddie O'Connell, MAYOR

OFFICE OF ECONOMIC AND COMMUNITY DEVELOPMENT

Jamari Brown, Executive Director

Lilibeth Leon, Manager

One Public Square
Nashville, Tennessee 37201
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Legacy Business Grant Application

Grant Award Criteria

The Legacy Business Grant supports longstanding businesses that significantly contribute to Nashville's history, unique character and identity.

The goal of the grant is to help those businesses be more competitive and resilient to economic downturn by assisting financially with investments in equipment modernization, marketing, improved security, and other reasonable expenses in relation to helping the business remain viable and further economic development goals.

The minimum eligibility requirements for an applicant are:

- Be a for-profit business with less than 100 employees
- Be independently and locally-owned
- Have a physical location and not be a home-business
- Have 10+ years of continuous operation in Davidson County
- Contribute to the neighborhood's culture, history, and identity

To appropriately submit a grant application to the ECD staff, the Applicant shall submit: (i) an electronic copy of the grant application in portable document format (PDF) to the ECD staff. If any minor errors exist within a submitted grant application, then the ECD staff may, in its sole discretion, allow the Applicant up to ten (10) business days to make the necessary corrections.

The submitted grant application must contain the following subject line in the email:

"Legacy Business Grant Application (Name of Applicant); (Month/Year)"

Grant applications and supporting documents shall be collectively emailed to the individuals listed below:

Jamari Brown, Executive Director
One Public Square
Nashville, Tennessee 37201
Telephone: (615) 862-6000
Fax: (615) 862-6040
Email: Jamari.Brown@Nashville.gov

Lilibeth Leon, Manager
One Public Square
Nashville, Tennessee 37201
Telephone: (615) 862-6000
Fax: (615) 862-6040
Email: Lilibeth.Leon@Nashville.gov

Applicant Information

Applicant Name: _____ Title: _____

Phone Number: _____ Email: _____

Business Information

Business Name: _____

Business Address: _____

City: _____ State: _____ ZIP Code: _____

Website: _____

Federal Tax ID Number: _____ State of Incorporation: _____ Year Established: _____

Current Number of Employees: _____ NAICS Code (census.gov/naics): _____

Is the business independently and locally owned? _____

Brief Description of Business:

Please list the business's owners, officers, and directors:

Name	Percent Owned

Community Presence

Describe any unique traditions, practices, menu items, merchandise, or service offerings the business is known for in the community.

Is the business considered a community anchor? Describe how.

Does the building have distinctive architecture, murals, or design features that make it a recognizable destination?

Improvement/Modernization Plan

Please describe current challenges the business faces that the grant would help address.

Describe the improvement or modernization project that would address any current challenges.

Provide an anticipated project timeline with key milestones.

Describe any risk to this project and how the applicant plans to mitigate them.

Project Impact

Describe how the proposed project will improve productivity, reduce costs, enhance customer experience or some other operational efficiency gains.

Explain how this project will support job retention, job creation, or employee training.

Organizational Capacity & Readiness

Describe the leadership team's experience with implementing similar projects

Describe the systems, processes, or staff capacity currently in place to support the proposed project.

Project Budget

What is the total estimated cost of this project?

Please list all sources of funds for this project:

Source	Amount
Applicant/Owners:	
Legacy Business Grant:	
Investor:	
Financial Institution:	
Other Grants:	
Other Sources:	
Total Project Cost:	

Grant Budget

Amount Requested: _____

Purpose of Grant (Describe how the grant funds will be used to achieve specific business goals.):

Category	Total
Construction:	
Furniture, Fixtures, Equipment:	
Marketing:	
Staffing:	
Total Grant Budget:	

Business Legal Standing

The company registered to conduct business in Tennessee	☐	All ad valorem taxes have been paid	☐
Company has a business license in Davidson County	☐	All business taxes have been paid	☐

Confirmation of Accuracy: To the best of my knowledge and belief, the information contained in this Metro Nashville Application for Incentives is true and correct. ☐

I certify that the business has 10+ years of continuous operation in Davidson County. ☐

I certify that the business is independently and locally-owned within the Nashville-Davidson–Murfreesboro–Franklin, TN Metropolitan Statistical Area. ☐

I certify that the business has a physical location and is not a home-based business. ☐

I certify that the business is a for-profit entity with less than 100 employees globally. ☐

I further certify that the business entity is in good standing under the laws of jurisdiction(s) in which the entity organized or authorized to conduct business and that no delinquent taxes are owed to any taxing entity. ☐

Supporting Documents Requested

Copy of Business Licenses ☐	Certificate of Good Standing ☐	Profit & Loss Statement or 12 Month to Month Cash Flow Statement ☐
Copy of all listed Owner's Driver's License ☐	Photos of Building ☐	

Signature: _____ Date: _____