



Longmont Economic Gardening Initiative Application for Services

Please return to: LEGI Program, Civic Center Complex
350 Kimbark St., Longmont, CO 80501

| | |
|--------------------------------------|-----------------------------|
| Business Name _____ | Contact Name _____ |
| Address _____ | Title _____ |
| _____ | Business Phone _____ |
| Longmont CO Zip _____ | Business Fax _____ |
| Business Web Address _____ | Email Address _____ |
| Longmont Sales Tax License No. _____ | Year Business Founded _____ |

| | | |
|----------------------------------|----------------------------|----------------------------------------------------------------------------|
| Type of Business: | Business Structure: | Majority Owner Information: |
| Retail _____ Manufacturing _____ | C-Corp _____ | Male _____ Female _____ |
| Service _____ Construction _____ | S-Corp _____ | Disabled? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Wholesale _____ Other _____ | LLC _____ | Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| NAICS code(s) (if known) _____ | Partnership _____ | Disabled Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| _____ | Sole Proprietor _____ | |

| | | |
|-------------------------------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| Annual Sales \$ _____ | Owner Operated? <input type="checkbox"/> Yes <input type="checkbox"/> No | Is there a current Business Plan? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| No. of Employees _____ (include owner) | Home Based? <input type="checkbox"/> Yes <input type="checkbox"/> No | Are you 8(a) Qualified? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Franchise? <input type="checkbox"/> Yes <input type="checkbox"/> No | Spanish Language Preferred? <input type="checkbox"/> Yes <input type="checkbox"/> No |

Describe the nature of your Business: _____

Describe your business goals: _____

Describe current growth status of business: _____

What would you like to gain from participating in the LEGI program? _____

The Longmont Economic Gardening Initiative (LEGI) will treat all information received from applicants for assistance in a confidential manner. To the full extent allowed by law, we will not reveal any proprietary information (e.g., revenues, new products or strategies) to other businesses, either within or outside the city limits. We do reserve the right to create a summary list of the work we do for businesses to include in our regular reports to the city manager and city council, as well as in a handout on database searches.

| | |
|---------------------------|---------------------------|
| Date _____ | Internal Use Only: |
| Print Name/Title _____ | Intake _____ |
| Applicant Signature _____ | Initial Assessment _____ |