



Jump Start Program

Purpose:

1. The Jump Start Program is a conditional grant for up to \$5,000, to assist with overhead expenses during the first 24 months of starting a new business.
2. Amount and frequency of payments will be determined by the need of the individual business.
3. The grant may be used for overhead expenses, such as rent, marketing, utilities, or other as outlined by the applicant. This program is not intended to be used for the purchase of equipment, fixtures, inventory or employee wages/expenses.
4. The applicant is expected to invest a sufficient level of own capital and/or resources into the business, which determines the amount of the grant.
5. The applicant will provide a financial need narrative to explain why Jump Start funds are needed and how it would benefit their business.
6. The applicant will provide a business plan that supports the financial need narrative.
Free consultations with Kansas Small Business Development Center are highly recommended to assist in the development of the business and marketing plan.
7. A KSBDC business wellness checkup may be done at 3-6 months after opening and again at the conclusion of the 24 month period. The business well checkup provides an in-depth look at your business management techniques and provides a comprehensive listing of best practices and recommendations for improving the bottom line.
8. The business must remain inside the city limits of Smith Center. If the business closes or is moved outside of the city limits within the 24 months of grant approval, any grant funds received must be immediately repaid in full.

DISCLAIMERS: The Jump Start Program is subject to the availability of funds. The SCED reserved the right to alter, amend, or discontinue the program at any time without written notice.

Building value (if owned) \$ _____ Mortgage on property YES NO
 Cost of remodeling or upgrades to the building to suit intended purpose \$ _____
 Job Creation: Number of full time employees _____ part time employees _____
 Estimated average monthly sales: _____
 Sales tax collected on products sold? YES NO Sales tax collected on services? YES NO

Projected monthly expenses: Mortgage or rent: _____ Phone _____
 Internet _____ Electricity _____ Gas _____ Water/Sewer _____
 Waste removal _____ Insurance _____

Applicant signature

Economic Development Signature