



## HOST RELIEF PUBLIC GRANT APPLICATION

Full Name:

Title:

Email:

Primary Phone:

Physical Address #1:

Physical Address #2:

Physical City:

Physical State:

Physical Zip Code:

Tax ID or Social Security #:

## BUSINESS INFORMATION

Company:

Company Address #1:

Company Address #2:

Company City:

Company State:

Company Zip Code:

Type of Business:

Type of Business:

☐ Corporate ☐ Partnership ☐ Sole Proprietorship

NAICS#:

Date Business Established:

Number of Full Time Employees:

Number of Part Time Employees:

Have you taken advantage of these State and Federal Grants? ☐ Emergency Injury Disaster Loan/Grant

☐ Payroll Protection Program ☐ I would like more information on these federal opportunities

## HOST PROGRAM INFORMATION

Summary of Hardships:

Please attach the following required documents to your application before submitting via mail:

Government Issued Personal Identification • Most Recent Federal Business Tax Returns • Personal Tax Returns • W-9 • Profit & Loss Statement

Please mail your application and documents to 719 S Kansas Ave., Suite 100, Topeka, KS 66603. For additional questions/inquiries, please leave a message at 785-246-6246 (English) or 785-246-6227 (Spanish). You can also fill out the application online at <https://supporttopeka.com/host/>