

Village of Millington
Downtown Development Authority
Application for Equipment Lease Program

Business Information

Date: _____

Business Name: _____

Tax ID Number: _____ Number of Years in Business: _____

Contact Person: _____ Title: _____

Business Phone: _____ Alt.Phone: _____

Physical Address: _____

City: _____ State: _____ Zip Code: _____

Mailing Address (if different from physical address): _____

City: _____ State: _____ Zip Code: _____

E-Mail Address: _____

Business Owners

Type of Business: _____

(Sole Proprietor/DBA, Partnership, Limited Liability Co., Corporation, S Corp., Professional Corp., Individual)

Name: _____ Title: _____ % of Ownership: _____

Name: _____ Title: _____ % of Ownership: _____

Name: _____ Title: _____ % of Ownership: _____

Name: _____ Title: _____ % of Ownership: _____

Description of Business/Products/Service

Number of Employees: _____ Years under current management: _____

Lease Request Information:

Amount Requested: \$ _____ Term Requested: _____

Purpose: (List equipment you are requesting and why) _____

Other Business Information:

Is the Business and/or its owners delinquent on any Federal, State or Local taxes?
YES NO

Has the Business and/or its owners declared bankruptcy in the last 10 years?
YES NO

Is the Business and/or its owners party to any claims or lawsuits? YES NO

Please explain any YES answers: _____

Certification:

The undersigned hereby certifies that the information given in the foregoing application is true and complete and is submitted for the purpose of entering into a lease with the Millington Downtown Development Authority.

Signature: _____

Printed Name: _____ Title: _____

Title: _____

Return application to 8569 State St, Millington, MI 48746 or mail to Millington DDA P.O. Box 261, Millington, MI 48746

This application will be reviewed by the Millington Downtown Development Authority at the next available meeting held on the 2nd Wednesday of each month at 6:30 p.m.

DDA Use Only: This application has been reviewed by the Millington DDA Board at a meeting held on the _____ day of _____, 20__.

Application has been: _____ Approved
_____ Denied
_____ Postponed for further information or review

