

Application for Economic Gardening Program

APPLICATION FOR ECONOMIC GARDENING PROGRAM

Date of Application:

COMPANY INFORMATION

Company Name:

Physical Address (street, city, state, zip code):

Company Phone Number:

Founded:

Private or Public:

Website:

Social Media:

Recent News Story Links:

Company Officers:

Name and Title:

Email:

Phone Number:

Length of Time with Company:

Name and Title:

Email:

Phone Number:

Length of Time with Company:

Name and Title:

Email:

Phone Number:

Length of Time with Company:

Primary business and NAICS Code (if known):

Primary industry served:

QUALIFICATIONS FOR PROGRAM

10-100 employees? Yes No \$1-50 million in sales? Yes No

Year	FTE* employees	Annual Gross Revenues
2017		
2018		
2019		
2020		
2021		

**FTE = Full Time Equivalent (40 hours a week / full time + part time)*

Is company 51% owned by a woman, minority, veteran or disabled person? Yes No

Percent of employees located in Buffalo Niagara region:

Sales primarily to external markets (outside region)? Yes No

If no, is the company looking to expand to external markets in the future? Yes No

*****Please feel free to include additional Word documents if additional space is needed*****

What are your company's strengths?

What is the next big initiative for your organization?

If you had to identify your top three business issues, what would they be?

- 1.
- 2.
- 3.

For internal use only: **Sponsoring Economic Development Organization:**

Referred to Program by:

Date of Acceptance:

Completed applications and any questions regarding the program should be emailed to Olivia Hill, Business Development Manager, Invest Buffalo Niagara at ohill@buffaloniagara.org Subject Line Economic Gardening Application.