



## 2010 Enterprise Zone Marketing Grant Application

1. Organization (Sub-grantee) Name:

2. Person Completing Application:

Address

City:

State: CO

Zip:

Phone:

Email:

3. Project Title:

4. Project Grant Request and Match:

Marketing Grant Requested (maximum \$2,000):

Matching Funds (at least equal to grant request):

5. Source(s) of Matching Funds

6. Estimated Timeframe for the Project:

Start Date (dd/mm/yyyy)

(eligible expenses must occur after January 1):

Completion Date (dd/mm/yyyy):

7. Insurance Verification

The state requires that Enterprise Zone Marketing Grant Project Organizations (sub-grantees) must have general liability insurance in the amount of \$1,000,000 per occurrence. As part of this application, please certify to one of the following statements by checking the appropriate box:

**My organization verifies that it carries general liability insurance in the amount of \$1,000,000 per occurrence.**

**My organization does not have sufficient liability insurance, and wishes Region 10, as Grantee, to provide coverage for this marketing project.**

*Please continue to the next page*

**Please describe your marketing project succinctly in the space below:**

**Signature (you will be prompted to create a digital signature. It's easy!)**

**Date of Application (dd/mm/yyyy)**

**Please save a copy of this application to your hard drive, then submit it to us by attaching it to an email, faxing it to (970) 249-2488, or dropping it in the mail.**