City of Copperas Cove
ECONOMIC DEVELOPMENT CORPORATION

Business Improvement Grant Program Application

2026-2027

Section 1 – Applicant Contact Information		
Date:		
Name of Applicant:	Title:	
Address:		
City:	State:	Zip Code:
Primary Phone Number:	Alternative Phone Number:	
Email:		

Section 2 – Business Information		
Business Name:		
Business Legal Name as Identified on W-9 (Please attach copy of W-9)		
Business Mailing Address:		
City:	State:	Zip Code:
Business Phone:	Website:	

Number of years in business in Copperas Cove, TX:	Number of Business Locations:	Tax ID #
Business Structure: ☐ C Corp ☐ S Corp ☐ LLC ☐ Partnership ☐ Non-Profit ☐ Other _____		

Please provide a brief description of your business:	
Full Time Workers:	Part Time Workers:
Do you plan to hire any new employees in the next 3 months?	
Are you currently in compliance with the City of Copperas Cove and Coryell County or Lampasas County? ☐ Yes ☐ No If No, please provide background information below: (This includes but is not limited to liens, court fines, delinquent City utility bills, or delinquent taxes.)	
Have you received a Business Improvement Grant from CCEDC in a previous funding cycle? ☐ Yes ☐ No If Yes, please provide the funding cycle and disbursement date:	

Section 3 – Grant Request Information

Please select the type of improvement(s) associated with the improvement project.
(See Program Guideline for additional details on Eligible Improvements and Expenditures)

☐ Façade Improvements

☐ Sign Improvements

☐ Site Improvements

Total Grant Amount Requested:	$

Please provide a detailed breakdown of the project costs, the amount requested from the CCEDC Business Improvement Grant, and the matching contribution.

Expense Item	Cost Estimate	Grant Request (up to 50%)	Applicant Match
Totals			

Provide a description of the proposed project. Attach any project drawings, photos of the area to be improved, specification, and/or any additional information about the project to this application.

Estimated start date of the project:

Estimated completion date of the project:

Name and cost estimate/quote from at least one (1) qualified contractor/supplier (Please attach a copy of the estimate with application)		
Physical Address of Property for Which the Grant is Being Requested:		
City:	State:	Zip Code:
Do you own or lease the property for which the grant is being requested: ☐ Own ☐ Lease		
If lessee, please provide contact information for the property owner		
Name of Property Owner:		
Address of Property Owner:		
City:	State:	Zip Code:
Phone:	Email:	

Section 4 – Attachments

Please attach the following documents with the completed application (failure to include all applicable attachments with result in the application being deemed incomplete):

- Signed Copy of W-9
- Detailed estimate/quote of proposed improvements or other eligible expenditures
- Project drawings and specifications (if applicable)
- Photos of the area to be improved (if applicable)
- If lessee, please attach a copy of the lease agreement and a signed letter of permission from the property owner (if applicable)
- Any additional information about the project that would be beneficial in reviewing the application

Section 5 – Certification and Signature

Please review and check each box to certify your understanding and agreement:

☐ I understand that it is my responsibility to obtain all required permits and inspections related to proposed improvement project.

☐ I acknowledge that CCEDC, its staff, and agents, do not guarantee or take responsibility for the quality, safety, or construction of the completed project.

☐ I understand that submitting this application does not guarantee grant approval, and that CCEDC reserves full discretion in approving or denying funding.

☐ I certify that the information submitted in this application, including all attachments, is true, correct, and complete. I understand that any omission or false information may result in the application being considered invalid.

Applicant Information and Signature

Name: _____

Title:_____

Signature:_____

Date:_____