Description of Business (Submit a business plan or a narrative that provides the following information)

Type of business, including activities, products, services, hours/days of operation

The above statements are true to best of my knowledge.

I acknowledge that, in order to receive funds that I and/or my business shall become a member of the EJCEDC

I understand that the EJCEDC has the right to deny any application without cause, and to terminate its Business Assistance Program without giving prior notice.

Signature of Applicant

Print Name

Title of Applicant