



**CAPITAL EXPENDITURE GRANT PROGRAM**  
**2025**  
**APPLICATION FORM**

A completed application must be sent by via email to [econdev@gorham.me.us](mailto:econdev@gorham.me.us). Hard copy submissions can be sent to Economic Development Division, c/o Kevin Jensen, 75 South Street, Gorham, ME 04038.

Please contact the Economic Development Division for any questions or assistance.

**INSTRUCTIONS:** Please write directly into this document template, do not create your own application format. Additional application materials (budget, sketch plans, images, etc.) may be included as attachments to this application.

**APPLICANT INFORMATION**

1. Applicant Name: \_\_\_\_\_
2. Business Name: \_\_\_\_\_
3. Business Mailing Address: \_\_\_\_\_
4. Contact Email Address: \_\_\_\_\_
5. Contact Phone Number: \_\_\_\_\_
6. Are you the commercial property owner or leaseholder? \_\_\_\_\_

## **BUSINESS INFORMATION**

### **7. Indicate the Targeted Sector under which you are applying (Please check one)**

- ☐ Agriculture, agribusiness & agritourism
- ☐ Manufacturing & Skilled Trades
- ☐ Retail & Food Services

### **8. How many full-time equivalent (FTE) employees do you have, including yourself?**

- ☐ 1 - 10 employees
- ☐ 11 – 20 employees
- ☐ 21 – 50 employees
- ☐ More than 50 employees

### **9. How long have you been in business?**

- ☐ Less than a year
- ☐ 1 – 2 years
- ☐ 3 – 4 years
- ☐ 5+ years

### **10. What is your approximate sales volume (farm income) over the past year?**

- ☐ Under \$50,000
- ☐ \$51,000 - \$100,000
- ☐ \$101,000 - \$250,000
- ☐ Over \$250,000

**PROJECT DESCRIPTION & BUDGET**

- 11. Tell us about your business and your objective for using grant funds from this program.  
*[How have you been successful? What are the challenges? How will this grant help you grow?]***

(400 words maximum)

**12. Provide a full description of the proposed project, including:**

- A summary of all planned activity proposed under the grant application;
- The purpose and need for the project at this time;
- Details on who will be responsible for completing the work;
- Estimated timeline for start/end date of project completion;

*(250 words maximum)*

### **PROJECT BUDGET & COST**

**13. Total grant amount requested by applicant for project:** \$ \_\_\_\_\_  
(Limit of 50% total estimated cost, up to a maximum \$12,000)

**14. Total estimated cost of project:** \$ \_\_\_\_\_

**15. What is the impact on the project if your application is only partially funded by the grant program? What is the minimum amount needed to proceed with the project as outlined?**

**16. Provide an estimated project budget, including a breakdown of costs by activity (procurement, technology, supplies, labor, etc.):**

*(A separate spreadsheet document may be included with the application.)*

**ADDITIONAL MATERIALS**

Supporting documents may also be requested based on the project scope and grant request, including:

- Minimum of three (3) quotes from vendors or service providers for capital items
- Financial information, including a profit & loss statement or similar
- Detailed images of the project area showing the current condition prior to work commencing
- A preliminary sketch plan of the proposed improvements
- Proof of ownership of the property OR written permission from the property owner in support of the full project scope (if project involves facility upgrades, construction, etc.)