

## Sample form, not for offline completion.

Visit <https://mcrc.grantplatform.com> to apply.

# 2024 MCRC Bridge Bucks Program

To successfully submit an application for the 2024 MCRC Bridge Bucks Program, you must provide all of the requested information and upload all requested documents.

We highly recommend you download a copy of the application, become familiar with the application, prepare your information and narrative responses in advance. **Please remove all passwords from PDF documents prior to uploading them to the portal.** If there are passwords on any documents, we will not be able to open them, and your application will be disqualified.

**The first page of the application will ask you to provide a name for the application - please use your business name.**

If you have any questions or trouble completing the application, please reach out to the MCRC Administrator, Rebecca Mead, at [rebecca@middlesexchamber.com](mailto:rebecca@middlesexchamber.com).

Application name

Name of person completing this application.

What is the total allocation of Bridge Bucks coupons for which you are applying?

Legal Name of Business

Business Address

Years at Address

Business Phone Number

Business Email Address

Business Website

Please describe your business, your industry, your products/services, and your customers.

5000 words

Federal Tax ID Number

Form of Corporation

▼

Sole Proprietor

LLC

Corporation

S-Corporation

Partnership

NonProfit Organization

CT Dr Letter of Good Standing



Majority Business Ownership

- Women-Owned
- Minority-Owned
- Veteran-Owned
- Disabled-Owned
- None of the above

Name and address of majority business owner.

How many employees were on your payroll as of the following dates:

		Number of Full Time Employees	Number of Part Time Employees
1	12/31/2023		
2	Date of application		
3	If you anticipate adding employees within the next year, please provide the number of full and/or part time		

Please upload IRS form 941 for 2023 Q4. If your business is a Sole Proprietorship or LLC with no employees other than the owner/single member, this does not apply to you. All entities with employees are required to submit this form. (optional)



Description of the impact of the DOT project on the business to date

5000 words

Please provide a narrative sharing how the business has been impacted by the East Haddam Swing Bridge and other DOT projects to date, e.g. reduction in sales, increase in costs associated with employee travel, increase in costs and delivery fees for inventory or raw materials.

Description of how the business plans to use and promote the Bridge Bucks.

5000 words

Please be as detailed as possible as to how the Bridge Bucks will create or be added to a marketing promotion campaign for the business.

Description of how the business plans to track/monitor the redemption of the Bridge Bucks.

5000 words

In addition to the required monthly reporting process to MCRC, please share details on how the Bridge Bucks will be managed internally.

By submitting this application, you represent and certify to the best of your knowledge and belief, that the information you have provided and the attachments here to are true and complete, and accurately describes your participation in the Bridge Bucks Program.

You certify that the applicant business is in good standing with the town in which it is located, and is compliant with the Connecticut Department of Labor Office of Unemployment Assistance and all applicable state and federal employment laws and regulations, including but not limited to minimum wages, unemployment insurance, workers' compensation, and child labor.

You agree to promptly inform MCRC of any changes which may occur.

Name of person completing application:

Role at applicant business:

Best phone number should we have questions on your application:

Email address: