



Business Start-Up Program+

To further encourage new business, and promote long term success, the Cuero Development Corporation has developed the Business Start-Up Program Plus. This program can provide up to two grants for one year of business. The first grant is up to \$3,000 for businesses to encourage new businesses with rental assistance grants that generate sales tax. The second part of the grant is available up to \$1500.0 to encourage continued success of the business after the first six months.

The grants are available to all non-home-based small businesses in the City of Cuero; however, priority will be given to businesses that have frequent and/or close contact with customers. Rental Assistance is paid monthly to the landlord at 50% of the lease amount up to \$500 monthly up to a maximum of six months on a minimum 12 month lease for future payments only. All applicants must have a business that is open before applying for any grant monies. The second grant is available up to 25% of the monthly rent for a maximum amount of 250.00/ month for rental assistance and is paid to the landlord and is available after 6 months of consecutive operation.

The second grant will be available after a second application is filled out and submitted to the CDC office and approved at the next board meeting.

This grant is available for businesses that started operation after January 1, 2024.

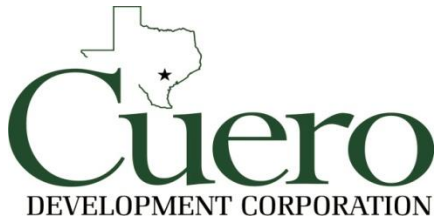
This application is good for one year.

Businesses must meet all the following criteria.

Please acknowledge that the below qualifications have been met by initialing in the boxes:

- Physical and publicly accessible location in the City of Cuero.
- In good standing with the City of Cuero regarding licensing and finance, including being current on sales and tax payments.
- This business generates sales tax.
- Engaged in activities that are legal under city and state law.
- Meet program technical requirements including ability to provide financial records to support grant request.
- Registered with the Texas Secretary of State's Office.
- Ineligible: Home-based businesses.

If your business meets the above criteria, please complete and email the application below to: Maggie J. Cromeens at mcromeens@cityofcuero.com. Funding for this grant is limited and is subject to closure once budgeted funds are expended.



CUERO DEVELOPMENT CORPORATION BUSINESS START-UP PROGRAM

214 E. Main St.
P.O. Box 660

Cuero, Texas 77954
www.cuerodc.com

phone 361-275-8178
cuerod@cityofcuero.com

fax 361-275-6274
cell 210-355-8865

Applications must be complete and signed off by CDC staff five (5) days before the Board of Directors' monthly meeting.

Applicant		Mailing Address	
Phone Number	Email	Fax Number	

Name of Business: _____

Location of Business: _____

Description of Business: _____

Type of Business (Check one):

- Apparel/Accessories – Men and Women/Family Clothing
- Eating Places
- Home Furnishing Stores: Appliances, Computers
- Retail
- Shoes Stores
- Specialty Food Stores
- Specialty Retail: Hobby, Toys, and Games
- Sporting Goods Stores

PROPERTY OWNER INFORMATION

Property
Address: _____

Name of Property
Owner: _____

Property Owner
Address: _____

Mailing
Address: _____

City: _____ State: _____ ZIP Code: _____

Telephone: _____ Cell: _____

Fax: _____ Email: _____

LEASE INFORMATION

Location of Leased
Space: _____

Lease Start Date: _____ Lease Expiration Date: _____

Monthly Rent: _____ Square Feet Leased: _____

Does any owner or officer of the business leasing the space have a business or familiar relationship to the property being leased? ____ Yes ____ No If yes, please explain:

Grant assistance and amount applied for:
Rental Assistance: \$ _____ /Month Number of Months: _____

I have read and understand the guidelines for this program. I understand that an application for funding is not a guarantee of funding and disbursement of funds will be made in compliance with the terms of the program. I understand that approval by the Cuero Development Corporation's Rental Assistance Program is subject to availability of funds. Further, I affirm that the above information I have provided is true and accurate.

**Please understand that this application is subject to Public Records

Applicant Signature Date

Property owner signature Date

CDC Receipt of completed application Date

Approved by CDC Board of Directors

Date