



COMMUNITY
IMPROVEMENT
CORPORATION
of
Sycamore Township

Hamilton County, OH

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Board of Directors

Cliff W. Bishop

Thomas J. Weidman

Dennis W. Connor

Executive Director

Greg Bickford, AICP

*"Working to promote
economic, commercial
and civic development
in Sycamore Township"*

2014 Grant Application Sycamore Township JEDZ

A separate application must be submitted for each individual
Application must be filed before December 31, 2017

Name: _____

Address: _____

City, State Zip: _____

Phone: _____

Email: _____

JEDZ District (Check One)

Southwest East Central Northwest

Amount Requested: _____

I understand and agree to the following terms and conditions:

The grant application will not be processed unless the following required items are submitted: 1) A valid Driver License or valid State ID. 2) A Copy of the applicant's W-2 that clearly shows the withholding amount and jurisdiction of the withholding. 3) Two additional items that show proof of residence. Acceptable items include but are not limited to utility bills, real estate tax duplicate, vehicle registration, or any other form that the Sycamore Township CIC, Inc. deems appropriate.

I also understand and agree that the Sycamore Township CIC, Inc. may use a variety of methods to determine proof of residency. I understand that this may include accessing information held in restricted databases maintained by Lexis Nexis or other data clearing houses and I consent to such access.

I understand and agree that if I was not a resident of Sycamore Township for the entire year that my grant amount will be prorated to the period of time I resided in the Township.

I understand that even if the proper information is submitted, the processing of the application may take up to 30 days and if I provide an email address, a status update will be provided. Grant checks will either be mailed to the address on file or may be picked up at the Township office. Direct deposit is not available.

I understand that the grant from the Sycamore Township CIC, Inc. is NOT A TAX REFUND and that I will receive an IRS form 1099 from Sycamore Township CIC, Inc. I acknowledge and agree that it is my responsibility to contact a tax professional if I have any questions or concerns about any additional tax implications as a result of the grant. I also understand that grant applications are subject to Ohio public records laws, including, but not limited to ORC Sections 149.43 and 1724.11. I acknowledge that I have received no legal or tax advice from the Sycamore Township CIC, Inc. or any of its employees or agents.

Signature, Date