



Community Development Corporation

Assistance Inquiry Form

Business Name: _____

Address: _____

Primary Contact: _____

Contact's Phone Number & email: _____

Requested Assistance Amount: \$ _____

In the following table, please list all other County, State, and/or Federal programs to which the business has applied for Covid-related financial assistance:

Program	Date of Application	Amount of Request	Current Status: Granted, Denied, Pending, Other

Please provide a brief description of the reason for the requested assistance and how the monies would be utilized (Provide additional pages as needed.):

This form and any additional materials you choose to submit should be emailed to communitydevelopment@zionsville-in.gov or mailed to:

Community Development Corporation
 Attn: Wayne DeLong
 10855 Creek Way
 Zionsville, IN 46077