

MANAGEMENT TECHNICAL ASSISTANCE (MTA) CLIENT PROGRAM APPLICATION

For assistance, please call MTA Program at 602.534.4444 or email: mta@phoenix.gov

Business owner to complete. Please PRINT or TYPE.								NAICS CODE				
TODAY'S DATE:								COUNCIL DIST	RICT			
BUSINESS NAME :								CENSUS TRAC	г			
COMPANY'S LEGAL STATUS:												
BUSINESS DESCRIPTION:												
			RI	ISINES	SADDE	FSS						
Street A	Address			BUSINESS ADDRESS Suite, Unit, Floor				City		State		Zip Code
BUSINESS OWNER'S HOME ADDRESS Street Address Suite, Unit, Floor City State Zi									7in Codo			
Street	Address			Suite, Unit, Floor				City		State		Zip Code
			PRI	NCIPAL	OWN	ER (S)						
First				PRINCIPAL OWNER (S) Last				Gender			% (Ownership
								Female		%		
				PRINCIPAL CONTACT				<u> </u>				
First Last				Title								
Web Site Address:				Rusin	ace Tale	nhone	No ·					
				Business Telephone No.:						Fax No		
E-Mail:				Home Telephone No.:						rax IVC	· ·	
				BUSINE	SS DA	TA						
Business Type			Wholes	sale	☐ Mar	nufactur	ing	☐ Construction	Star	t date (ye	ar)	
Have you or are you now working very provider?	vith a busir	ness assistance] Yes		No	If Ye	es, whom?				
Are you currently providing services to the City of Phoenix?] Yes		No	Do y	ou own or lease your property?				
If no, are you interested in procurement opportunities at the City?] Yes		No	Wha	t is the square foo	age?			
Are you certified as an S/DBE with the City of Phoenix?] Yes		No	Wha	at is the average hourly salary?				
If not, would you like to receive information about the process?				Yes		No		rou considering expansion? Yes No_				No
# Current employees, including owner(s) # full-time (40 hours or more per week) employees # part-time (less than 40 hours per week) employees				Small Business EnterprisDisadvantaged Business					Expi Expi			
				Other Federal Program C				Certifications: Exp		ires:		
Please describe the business problems/issues you'd like to					address with a consultant from the MTA program							
ricase describe the business	problem	is/issues you u	iike t	dudi	233 WII	a co	iisait		A pros	graiii.		

The City of Phoenix MTA Program is funded through a grant from the United States Department of Housing and Urban Development.

Please return this application via U.S. Mail or fax to: MTA Program, City of Phoenix, Neighborhood Services Department, 200 West Washington Street, 4th Floor, Phoenix, AZ 85003-1611

Phone 602.534.4444; Fax 602.534.1555; Email: mta@phoenix.gov TTY 7-1-1 Friendly

COMMUNITY DEVELOPMENT BLOCK GRANT/MANAGEMENT TECHNICAL ASSISTANCE PROGRAM AGREEMENT

The purpose of this program is to assist low and moderate income individuals. If you hire an employee as a result of the technical assistance provided, we ask that you make your best effort to hire a low/moderate income individual.

Please fill out this page in its entirety. Incomplete applications cannot be processed.

This program is funded in full by a U.S. Department of Housing and Urban Development (HUD) grant, administered through the City of Phoenix. The primary intent of this program is to assist low and moderate income individuals. To be eligible for this program you must meet one of the following criteria:

Please consider total family income when determining income eligibility.

5

Person

Household

6

Person

Household

7

Person

Household

Referred by (if known)

Rev May 2021

8

Person

Household

1. You agree to expand your business with the help of this program in order to create a job for a low/moderate income individual.

2. You are a micro-enterprise owner with 5 or fewer employees and you are considered low or moderate income.

Person

Household

2021

Income

Limits

Business Owner's Signature

2

Person

Household

1

Person

3

Person

Household

	80% of Median	44,250	50,600	56,900	63,200	68,300	73,350	78,400	83,450		
Please check one box to indicate your race from one of the 10 options below:											
	White					An	nerican Indian/	Alaskan Nat	ive & White		
	Black/African American					As	ian and White				
	Asian						ack/African Am				
	Americ	American Indian/Alaskan Native					n. Indian/Alaska				
	Native Hawaiian/Other Pacific Islander					Other Multi-Racial					
PLEASE CHECK ONE BOX HERE ALSO: Additionally, do you consider yourself of Hispanic heritage? Yes No The entire household's income should be considered when determining low and moderate income. A person is considered low/moderate income if their Household Income is less than 80% of the Median Income.											
Please indicate the number of people in your household and check your total annual family income range:											
		\$	1 -	\$ 44,250	\$ 56,901	- \$6	63,200 \$	73,351 -	\$ 78,400		
		\$ 4	44,251 -	\$ 50,600	\$ 63,201	- \$6	68,300 \$	78,401 -	\$ 83,450		
		\$:	50,601 -	\$ 56,900	\$ 68,301	- \$7	73,350 \$	83,451 -	over		
Does y	Does your business plan to create a new job in the next 2 years? ☐ Yes ☐ No										
If yes, please indicate the title of the position(s) to be created and hourly wage:											
Title Wage Please check the box which describes your eligibility for this program: Your business will create a job for a low or moderate income person within the next two years. Business is located in the Poverty Census Tract (PCT) and will create a job. Click here to see the map. You are a low to moderate income with micro enterprise ownership (5 or fewer employees). ***Please provide last year's tax record or pay stubs with this application to substantiate your eligibility.											
The City of Phoenix and/or HUD staff will periodically verify income of the business owner and any employees whose jobs were created as a result of the technical assistance provided. Verification can include tax records or pay stubs.											
If your business is unable to fulfill this requirement, you may not be eligible for future economic development programs offered through the city of Phoenix.											
By signing below you certify that you have answered the questions above accurately and that you understand the terms of the assistance provided to you. Please feel free to call with any questions regarding this form: Jenny Hackelman, City of Phoenix, Neighborhood Services Department 602.262.4730. This information is required for reporting and documentation purposes only.											
Print N	ame of Busi	ness Ow	ner				Date		_		

