



DELIVERANCE INTERNATIONAL FOUNDATION INC.

201 St. Charles Ave. Ste. 2500, New Orleans, LA 70170

(504) 493-8156 DIFNOLA.ORG

Email: difnola@gmail.com

PROSPERITY GRANT PROGRAM APPLICATION

Name of Entity: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Type of Business: _____

Email Address: _____

Phone: Office: _____ Mobile: _____

Company Website: _____

NAICS Code: _____

Are you represented by an authorized representative, such as an attorney or accountant?

____(Yes) ____ (No)

If yes, please fill out the name of the contact person, phone number and email address:

Name of Contact: _____

Title: _____

Phone Number: _____

Email Address: _____

Do you have any share ownership interest? ____ (Yes) If ____ (No)

Yes, what is the amount of percentage ownership?

Brief Summary of Business:

List of Services or Products/Goods:

What is Your Business Performance History? For Example: List your sales or product service rendered over the past year:

Number of Employees: _____

Number of Projected Employees: _____

Number of Supporting Entities: _____
(Corporations or Personal)

Contact Names: _____

Contact Number: _____

Email Addresses: _____

Date when they became supporters: _____

Website: _____

Contact Names: _____

Contact Number: _____

Email Addresses: _____

Date when they became supporters: _____

Website: _____

Contact Names: _____

Contact Number: _____

Email Addresses: _____

Date when they became supporters: _____

Website: _____

(Please attach current and previous fiscal year records)

Operating Budget: \$ _____

Startup Budget: \$ _____

(Provide Bank Name and Contact information of Authorized Representative of Account)

Can you provide a 2-year Projection? ___(Yes) ___(No)

If yes, please provide a brief summary of your projections:

Do you have any commercial insurance? ___(Yes) ___(No)
(If yes, please attach to the application)

Do you have any indemnification listed in your company's bylaws or articles?:
___(Yes) ___(No)

How many subcontractors do you all have networking with you? _____

Are your employees employed under contract? ___(Yes) ___(No)

Does your business receive Bonds and Notes? ___(Yes) ___(No)
(If yes, please attach itemized list to the application)

How Much do you disperse in unemployment? \$_____

How Many times has your company been involved in criminal or civil lawsuits? _____

(Please Provide the Gross of Product and Service Sales for the past 6 months or most recent)

Does your company have established credit? ___(Yes) ___(No)

Has your company established debt? ___(Yes) ___(No)
If yes, how much debt is your company? \$ _____

What is your operating budget for the year? \$_____

(Please attach all required documents that will assist in the determination of your grant application).

I certify that this grant is solely for the use of

_____ (Business Name)

and will be used only for the purposes listed above. I certify that the information I am providing for this grant is for the development and betterment of the business.

_____ (Print).

Name: _____

Date: _____

Title: _____

(After completing this application please mail this information in a sealed envelope and mail it to the DIF Inc. Process center.)

DIF Inc Process Center Address:
201 St. Charles Ave. Ste. 2500, New Orleans, LA 70170

ACKNOWLEDGEMENT STATEMENT

I, (Applicant) _____, affirm that the submitted information is true, I promise to use any aid from the Prosperity Grant Program from DIF Inc. in the name of (Business Name) _____, will purchase equipment and/or services and establish corporate networking to meet the needs of the business. I will not use any funds provided by the Prosperity Grant Program for personal reasons to halt the development of the business and only use it for the purposes listed above.

PAYBACK CLAUSE

I, (applicant) _____, understand and agree that if I do not use this grant as directed or in a manner consistent with the purpose for which it was granted, Deliverance International Foundation Incorporated (DIF Inc.) has the right to (AND WILL) seek repayment of this grant with a 3% interest thereof, and all legal fees expended by DIF Inc. in the course of seeking repayment of this grant. I consent to Louisiana's civil law of contracts as the Choice of Law if DIF Inc. seeks repayment of this grant due to my failure to use the funds in a manner dictated or consistent with its granting. I consent to Louisiana's jurisdiction and that it will be the forum state of any subsequent suit unless DIF Inc. agrees otherwise.

Signature: _____

Date: _____

Please Attach to the Application