

Garrett County Business Development FY 2027 Agriculture Marketing Grant Program



Contact Information: _____ Date _____

Applicant Business: _____

Contact Name and Title: _____

Contact Signature: _____

Mailing Address: _____

City, State, Zip: _____

Phone: _____ Email: _____

Project:

Detail how grant funding will be spent (**see grant guidelines for list of eligible purchases**).

All purchases must be made **within 30 days of grant approval**. Proof of purchases (**itemized invoices/receipts**) and proof of payments (**credit card receipts or fronts/back of canceled checks**) **must** be submitted to kdurst@garrettcounty.md.gov within **30 days of grant approval**. **Failure to comply will result in forfeiture of the grant.**

Applicant **will only be reimbursed** for costs associated with the items listed below, and **only** if all grant requirements are met.

Item(s) to be Purchased	Estimated Cost
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total Project Costs:	\$ _____

Grant Funds Requested (*no more than \$1,000*) \$ _____ %

My Contribution (*at least 10% of total project costs*) \$ _____ %

How will this project help your business?

Return completed application, with all required attachments, to:

Kim Durst, Manager of Business Development, Garrett County Business Development, via email at kdurst@garrettcounty.md.gov or mail to 203 South Fourth Street, Room 208, Oakland, MD 21550.