

Small Business Grant Release Forms

Section A - Personal Data / Company Information

Applicant's Name: _____

Spouse's Name (if applicable): _____

Is spouse active in the business? _____

List the name(s) of any owners who own 25% or more of the company:

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-mail _____ Website: _____

Section B – Relative Acknowledgment

I, _____ hereby acknowledge that I am neither the spouse, the mother or father, the brother or sister, nor the son or daughter of any person on the McAllen Chamber of Commerce Board of Directors, the City of McAllen, the McAllen Chamber of Commerce staff or the Small Business Grant Panel of Judges.

Signed this the _____ day of _____, 20____.

Signature

Printed Name

Section C – Permission to check credit

I grant the McAllen Chamber of Commerce permission to conduct a check on my credit history.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Signature

Social Security Number

Date: _____

Section D – Authorization for Release of Arrest Information

Name: _____

Drivers License: _____ State: _____

Date of Birth: _____ Social Security Number: _____

I, the above named individual, authorize the McAllen Chamber of Commerce to seek information about me concerning any criminal record. I understand that this information shall be limited to the type, date and disposition of the offenses, if any. I further, agree to indemnify and hold harmless the McAllen Chamber of Commerce and it employees from any liability arising from the release of this information.

Signature

Subscribed and sworn to before me by _____ on this the _____ day of _____, 20____ which witnessed my hand and official seal of office.

Notary Public in and for the
State of Texas

My commission expires on: _____