In order to submit this form, you should open it with Adobe Acrobat Reader.

Seattle Office of Economic Development

IGA

# Application for the Seattle Grocery Store Technical Assistance Program

Apply for technical assistance for your grocery store. Complete the required fields and provide the requested supporting documents.

## Acknowledgements and Eligibility

About the program: The Seattle Neighborhood Grocer Technical Assistance Program offers 10 independent Seattle grocery stores a free year of one-on-one support in 2027, including up to $29,000 for store improvements, $500 a month for completing monthly reports, and an experienced grocery advisor. It is funded by the Seattle Office of Economic Development and delivered by the Independent Grocers Alliance (IGA).

Key dates:

- Application opens Monday, November 9, 2026
- Information session Tuesday, November 17, at 10 AM PT
- Applications due Friday, December 4, 2026 at 11:59 PM PT
- Selected stores notified by Wednesday, December 16, 2026
- Program begins the week of January 11, 2027

For full program details, eligibility requirements and FAQs, click here.

Questions: Ashley Page, apage@igainc.com | (773) 742-7417.

Help with your application: Eduardo Rojas, Eduardo.Rojas@seattle.gov | (206) 561-5181.

Application: You can save your progress and return to finish later.
To complete the application you will need the following information:

- Business information, including your Washington State Unified Business Identifier (UBI) number, City of Seattle business license number, legal and trade name, and Seattle store address
- Owner and operator contact information, including the person who will participate in the cohort
- Store information, including the staple food categories you carry and your SNAP retailer status
- Proof of site control through at least December 31, 2029, in one of the following forms:
  - A current lease
  - A shorter lease plus a landlord letter of intent or an unexercised extension option
  - Proof of property ownership and a certification of your intent to operate the store
- Business tax returns for 2024 and 2025

Personal information entered on this form is subject to the Washington Public Records Act. This means that anyone can request access to this information. If requested, this can include business names, contact information, address, and more. The City of Seattle commits to protecting your privacy and will ensure that any disclosures are made according to law. To learn more about how the information is managed, please see our Privacy Statement.

This application asks for business tax returns, lease information, and other financial records. Under state law, financial and commercial information submitted when applying for City economic development programs is **exempt from public disclosure** (RCW 42.56.270(4)). Bank and other financial account numbers are also exempt (RCW 42.56.230(5)). Other information, such as your business name, contact information, and address, may be released if requested.

**Public Disclosure Acknowledgement: I acknowledge that my information may be distributed as part of a public disclosure request except for financial and commercial information and account numbers that are exempt under state law.** *

- ○ I agree
- ○ I do not agree

**Data Use Acknowledgement** *

- ○ I agree
- ○ I do not agree

**Acknowledgement required to continue**

Thank you for your interest in the Seattle Grocery Store Technical Assistance Program. To apply, you must agree to both the Public Disclosure Acknowledgement and the Data Use Acknowledgement. As a City of Seattle program, application materials may be subject to public disclosure under the Washington State Public Records Act. We are unable to accept applications without these agreements.

To change your answer, select **Back** to return to the previous page. You can also start a new application at any time.

If you have questions or concerns about how your application information will be used or shared, please contact Eduardo Rojas at Eduardo.Rojas@seattle.gov or (206) 561-5181. We're happy to talk it through before you decide.

## Section 1. Eligibility check

These questions confirm your store qualifies.

**1.1 Is your store located inside Seattle city limits?** *

- ○ Yes
- ○ No

**1.2 Is your business independently owned and for-profit? (Not a franchise, a location of a national chain, a publicly traded company or a nonprofit.)** *

- ○ Yes
- ○ No

**1.3 How many grocery store locations do you operate?** *

- ○ 1
- ○ 2
- ○ 3 or more

**1.4 Does your store regularly sell all four of these: fresh or frozen fruits or vegetables; fresh or frozen meat, poultry or fish; dairy products; and bread, grains or cereal? ***

- ○ Yes
- ○ No, my store primarily sells fresh fruits and vegetables
- ○ No, my store does not regularly sell all four categories

**1.5 How long has your store been open? ***

- ○ Less than 3 years
- ○ 3 to 9 years
- ○ 10 years or more

**1.6 Can you stay at your current location through December 31, 2029? ***

- ○ Yes, my lease runs through December 31, 2029, or later
- ○ Yes, landlord agreed in writing to renew or extend through 2029, or I have an option to extend
- ○ Yes, I or an affiliated company own the property
- ○ No

**1.7 What were your total annual sales last year? ***

- ○ Under $5 million
- ○ $5 million to $10 million
- ○ $10 million to $15 million
- ○ Over $15 million

**1.8 How many full-time employees do you have? ***

- ○ Fewer than 50
- ○ 50 or more

**1.9 Do you have a current Seattle business license and Washington State business license? ***

- ○ Yes
- ○ No

**1.10 Is your business up to date on its Seattle Business & Occupation (B&O) taxes? If not, can all outstanding taxes be paid within two months of selection? ***

- ○ Yes
- ○ No
- ○ Not sure

**1.11 Can you provide your 2024 and 2025 business tax returns? ***

- ○ Yes
- ○ No

We use your 2024 and 2025 business tax returns to understand your store's financial stability. Under state law, tax returns submitted with this application are exempt from public disclosure (RCW 42.56.270(4)). If you don't have one or both returns, or have questions about what to submit, please contact Ashley Page at apage@igainc.com or (773) 742-7417.

## Section 2. Business and Contact Information

**2.1 Business legal name ***

**2.2 Store name (doing business as), if different**

**2.3 / 2.4 Store street address ***

Street Address

Street Address Line 2

City | State / Province | Postal / Zip Code

**2.5 Washington UBI number (Find your UBI at the Washington State Department of Revenue): ***

Your company's Unified Business Identifier (UBI) is a nine-digit number that registers your company with state agencies and lets you do business in Washington.

**2.6 Seattle business license number ***

**2.7 Owner name(s) ***

**2.8 Primary contact name and title ***

**2.9 Preferred language** *

**2.10 Program and advisor meetings are held in English. Would you like an interpreter in your preferred language?** *

- ○ Yes
- ○ No

**2.11 Email** *

example@example.com

**2.12 Phone** *

Please enter a valid phone number.

**2.13 How did you hear about this program?** *

- ○ City of Seattle
- ○ Fresh Bucks Program
- ○ Community organization
- ○ IGA
- ○ Another business owner
- ○ Other

## Section 3. Store Profile

**3.1 Year the store opened** *

**3.2 Number of employees (full-time and part-time)** *

**3.3 Approximate profit margin last year** *

- ○ Loss
- ○ 0 to 2%
- ○ 2% to 5%
- ○ More than 5%
- ○ Not sure

**3.4 Years of grocery experience (primary owner)** *

**3.5 Approximate store size (square feet)** *

**3.6 Primary wholesalers, suppliers, or providers** *

**3.7 Approximate number of different products you carry** *

- ○ Under 1,000
- ○ 1,000 to 5,000
- ○ 5,000 to 10,000
- ○ More than 10,000
- ○ Not sure

**3.8 What types of food does your store sell? (Check all that apply)** *

- ☐ Fresh fruits and vegetables
- ☐ Fresh meat, poultry, or seafood
- ☐ Dairy products (milk, cheese, yogurt, eggs)
- ☐ Bread, grains, and cereals (rice, pasta tortillas, cereal)
- ☐ Frozen foods
- ☐ Bakery (baked in store)
- ☐ Deli, hot food, or prepared meals
- ☐ Café or coffee
- ☐ Halal products
- ☐ Kosher products
- ☐ International or culturally specific foods
- ☐ Other

**3.8a If you offer international or culturally specific foods, which cuisines, regions or cultures do they represent? Please be as specific as you can (for example: Mexican, Vietnamese, Ethiopian, Filipino, Italian, Korean, Soul food).**

**3.9 Does your store sell any of these other items or services? (Check all that apply) ***

- ☐ General merchandise (household goods, personal care, cleaning supplies)
- ☐ Beer or wine
- ☐ Liquor
- ☐ Tobacco or vape products
- ☐ Lottery
- ☐ Gas
- ☐ Money Transfer
- ☐ None of these

**3.10 About how much of your store's total sales come from the items and services in 3.9? ***

- ○ Less than 25%
- ○ 25% to 50%
- ○ 50% to 75%
- ○ More than 75%
- ○ Not sure

**3.11 In what languages can your staff help customers? ***

**3.12 Does the store accept SNAP (EBT)? ***

- ○ Yes
- ○ No

**3.13 Is your store a Fresh Bucks retailer? ***

- ○ Yes
- ○ No
- ○ Not sure

**3.14 If you do not accept SNAP or participate in Fresh Bucks, would you like help exploring participation? ***

- ○ Yes
- ○ No
- ○ Not sure

## Section 4. Challenges and Program Goals

Please answer in your own words. Up to 250 words for each question. You may answer in the language you are most comfortable with. We will evaluate your store's needs and potential to benefit from this program, not your writing quality. Short answers and bullet points are welcome.

**4.1 Who relies on your store, and what role does it play in your neighborhood? Tell us who your customers are and what they would have trouble finding nearby if your store closed. Consider the foods and products you carry, your prices, languages spoken, services you offer, and how your store supports community connections, cultural needs, or daily life in the neighborhood. ***

**4.2 What would you most like to improve through this program, and how would that help your business and customers? You may describe equipment needs or other improvements. You do not need a finished project idea or cost estimate. ***

After completing a business plan, selected participants will be eligible for up to $29,000 in funding for essential improvements. Improvements are subject to OED approval and may include:

- Building improvements (interior or exterior)
- Equipment
- Technology (such as POS or inventory management systems)
- Merchandising (such as signage or marketing)

Larger projects are welcome. Program funding is capped at $29,000, so if your project costs more, you will need to show how you will cover the remaining cost (for example, savings, a loan, or another grant) before funds are released. All funded projects must be completed by December 31, 2027. Your advisor can help you plan your project's budget and timeline as part of your business plan.

**4.3 What are the two or three biggest challenges affecting your store's ability to stay open or serve customers? Examples might include operating costs, equipment, sales, purchasing, staffing, or rent/lease issues. ***

**4.4 Who from your store will take part in the program, and how will you make time to participate? Tell us who will take part (owner, manager, family member, or other staff) and how you will cover the store while they attend. If you expect challenges with scheduling, language, or staffing, let us know. ***

Participants will be expected to:

- Attend monthly sessions for 12 months, about 3 to 5 hours per month. Some sessions will take place during regular business hours (9 a.m. to 5 p.m.).
- Work with an advisor to review your store's finances and operations and create a business plan.
- Lead your store in putting the business plan into action, including staff training and changes to operations.
- Manage your funded improvement project through completion. Depending on the project, this may include choosing the right equipment or vendor, getting quotes, hiring contractors, getting permits, and scheduling installation or work.

## Section 5. Program Commitment

If selected, you agree to take part fully for all of 2027. Stores that do not provide requested information, use the training courses or attend scheduled meetings may be removed from the program. Participation takes about 3 to 5 hours a month.

**5.1 I or an authorized store manager can host 6 store visits and join a monthly call with IGA, each engagement lasting approximately 1 to 1.5 hours.** *

☐ I acknowledge

**5.2 I will complete a short monthly report and check-in. I understand I receive $500 for each month I complete them.** *

☐ I acknowledge

**5.3 I or my staff will use the IGA training courses in my training plan.** *

☐ I acknowledge

**5.4 I will share accurate business and financial information so IGA can prepare my business plan.** *

☐ I acknowledge

**5.5 I understand improvement funds of up to $29,000 are for approved equipment and store improvements only, and cannot pay for inventory, wages, debt, rent, fines or taxes.** *

☐ I acknowledge

**5.6 I will attend City of Seattle workshops when possible.** *

☐ I acknowledge

## Section 6. Documents

Upload clear copies (PDF, photo or scan). Who sees these documents: Only the IGA and City staff who score applications. Tax returns are used to confirm your store's annual sales and basic business stability. Sharing financial challenges does not disqualify your store.

**6.1a Total annual sales in 2024 (gross sales from your tax return)** *

**6.2a Total annual sales in 2025 (gross sales from your tax return)** *

**6.3 Is there anything about your 2024 or 2025 tax returns you would like us to understand? Many small businesses have years that don't reflect how the business normally runs. If your returns show anything unusual, you're welcome to explain it here. Examples might include a drop in sales, a loss year, a one-time expense, a change in ownership, construction or road work nearby, a lease change, a family or health emergency, or a change in how you file taxes. Short answers are fine.**

Upload one of the following:

a. Your current lease, if it runs through December 31, 2029, or later.

b. If your lease ends sooner: your lease, plus a signed letter from your landlord agreeing to renew or extend it through at least December 31, 2029, or a lease option to extend through that date.

c. If you or a related company own the property: proof of ownership (for example, a King County property record, deed or property tax statement), plus a signed letter saying you plan to operate at this location through at least December 31, 2029. If a related company with a different name owns the property, also include a document showing common ownership, such as a lease between the companies or Washington Secretary of State business records.

If you have questions about what to submit, please contact Ashley Page at apage@igainc.com or (773) 742-7417 before submitting your application.

## Section 7. Demographic Information

These questions help the City understand who the program serves. They are required but provide an option to opt out ("Prefer not to say"). They will not be used to score your application.

**7.1 Race or ethnicity (select all that apply)** *

- ☐ Asian
- ☐ Black or African American
- ☐ Native American or Alaskan Native
- ☐ Native Hawaiian or Pacific Islander
- ☐ Middle Eastern or North African
- ☐ Hispanic or Latino/a/x
- ☐ White
- ☐ Prefer not to say
- ☐ Other

### 7.2 Gender *

- ○ Female
- ○ Male
- ○ Nonbinary
- ○ Prefer not to say
- ○ Other

## Section 8. Applicant Declarations and Signature

### 8.1 DECLARATION: *

☐ I hereby declare that I am an authorized representative and/or owner of the business or organization, and I hold the legal authority to make business decisions.

### 8.2 DECLARATION: *

☐ I hereby declare that, to the best of my knowledge, the provided information in this application is true and accurate.

### 8.3 Name *

First Name

Last Name

### 8.4 Title *

### 8.5 Date *

Month

Day

Year

### Signature *

First Name

Last Name