



Main Street Duncan, Inc.

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## **SMOKE DETECTOR GRANT APPLICATION**

**NAME OF BUSINESS:** \_\_\_\_\_

**CONTACT PERSON:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**SQUARE FOOTAGE OF BUILDING:** \_\_\_\_\_

**CIRCLE ONE:**            **RENTER**                    **PROPERTY OWNER**                    **NO ANSWER**

**HOW LONG HAVE YOU BEEN IN BUSINESS?** \_\_\_\_\_

**HOW LONG HAVE YOU BEEN IN YOUR CURRENT LOCATION?** \_\_\_\_\_

**BRIEFLY EXPLAIN WHERE THE SMOKE DETECTORS WILL BE PLACED:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**HOW MANY SMOKE DETECTORS ARE YOU REQUESTING?** \_\_\_\_\_

**ARE YOU WILLING TO WRITE A LETTER OF ACKNOWLEDGEMENT TO MAIN STREET DUNCAN WITHIN 30 DAYS OF ACCEPTING THE DISINFECTANT CLEANER IF YOU RECEIVE THE GRANT? (CIRCLE ONE)    YES            NO**

**LETTER WILL BE MAILED TO: PO BOX 112 DUNCAN, OK 73534**

**APPLICANTS SUBMITTING INCOMPLETE DOCUMENTATION WILL NOT BE ELIGIBLE FOR THE GRANT; ONLY ONE SUBMISSION IS ALLOWED DURING THE FISCAL YEAR OF JULY 1<sup>ST</sup> TO JUNE 30<sup>TH</sup> PER BUSINESS/ORGANIZATION. GRANT WILL BE DISBURSED ON A FIRST COME FIRST SERVE BASIS AFTER THE APPROVAL OF THE ECONOMICS COMMITTEE AND/OR BOARD OF DIRECTORS.**