CRETE NEBRASKA Community in Motion NEBRASKA ECONOMIC DEVELOPMENT CERTIFIED COMMUNITY

To LB840 Applicant:

CONGRATULATIONS on taking the first step to being awarded additional funds to help your business or event in Crete. The funds available for Economic Development, resulting from the citizen-approved sales tax increase that took effect April 1, 2011, are available first come to businesses, events and projects that meet the requirements of Crete's written Economic Development Plan, which can be found online at www.crete.ne.gov/vnews/display.v/ART/58fa7907ccebf. A written copy is also available from the City of Crete Economic Development Director.

Please review the Economic Development Plan and confirm that your project or business is eligible. Applications may be recommended for funding in full or in part or may be denied based upon the review of the Board. Final decisions regarding funding will be made by the City Council but according to the terms of the Plan, in no event may the City Council fund any Application not previously reviewed and approved by the citizen Board.

In this packet you will find an Application for Funds, a US Citizenship Attestation Form and a Check List of required items. As you will see, the Application is detailed and requires significant information and additional verification documents. If you need assistance with the application please contact any Economic Development Advisory Board member. *If you have questions, please call the Economic Development Office, at 402-826-4312 or email the City Administrator, tom.ourada@crete.ne.gov*

Please note that the first portion of the application will be open to the public and may be provided to the City Council for final funding review. The balance of the application and all supporting documentation including personal financial information is confidential and will only be shared with members of the Economic Advisory Board for purposes of considering your application. All confidential records will be maintained in the office of the Economic Development Board and will be kept separately and not be available for review by the public. Any questions or concerns regarding this process shall be directed to the City Administrator.

All Applicants will be required to attend a public hearing for presentation regarding their request for funding. Public hearings will be held at least quarterly and may be held more frequently at the request of the Board. All Applications presented within the three months preceding a Public Hearing will be set for presentation and consideration at the same meeting. The Board may make a recommendation for funding at the public hearing, or may vote to table an application for further information, but in no event shall an application be tabled more than once so that all decisions will be made not more than three months after the initial public hearing regarding an application. There is no guarantee that a determination will be made less than three months after submission so all applicants are urged to make timely requests for funding if projects or events have set timelines.

Mail or deliver completed application with all supporting documentation and forms to:
Economic Development Program Director
City of Crete City Hall
243 E. 13th Street, P.O. Box 86
Crete, NE 68333

We look forward to working with you through the application process.
Equal Opportunity and Fair Housing Provider and Employer

CRETE NEBRASKA Community in Motion NEBRASKA ECONOMIC DEVELOPMENT CERTIFIED COMMUNITY

ECONOMIC DEVELOPMENT PROGRAM
APPLICATION FOR FUNDS

Please Type or Print Clearly and Answer Each Question *(If Question Does Not Apply – Mark N/A):*

Please Note: The Information Contained in this portion of the document is Public Information and will **NOT** be Considered Confidential.

A. APPLICANT INFORMATION:

Name of Entity Applying for Assistance: Diamante Beauty Salon LLC

Business Address: 145 Boswell Av. Crete Ne 68333
(City) (State) (Zip Code)

Contact Person: (402) 306-9144 Maria Murillo Telephone Number: _____

Fax Number: _____ Email Address: alframar69@icloud.com

Federal Tax ID Number: 85-1129129

Type of Entity: ☐ Start-Up ☐ Buyout ☒ Existing

If Existing, Number of Years in Business in Crete: 7 years

Business Classification: (Please Choose One)

☐ Retail	☐ Manufacturing	☐ Research & Development
☐ Headquarter	☐ Telecommunications	☐ Tourism
☐ Warehouse/Distribution	☐ Government	☐ Other

Business Type: (Please Choose One)

☐ Proprietorship	☐ Corporation	☐ Partnership
☒ LLC	☐ Governmental Entity	☐ Other

Does the Company have a Parent or Subsidiaries? ☐ Yes ☒ No

If Yes, Please List Name: _____
Address: _____
(City) (State) (Zip Code)

B. **PROJECT INFORMATION:**

Please provide a Brief Project Summary Description:

The requested funding will be used to purchase 5 client waiting room chairs, two professional hydraulic styling chairs, a professional shampoo backwash station, a wall-mounted styling station, salon storage cabinetry, professional LED lighting, an infrared hair processor dryer, eyelash extention lighting, two automatic dustpan vacuum ~~lighting~~ systems, product display shelving, a hairstylist rolling cart, a commercian entrance floor mat, and waiting area furniture.

Use of Funds	Total Project Cost	Econ Dev Funds Requested
Land or Building Acquisition	$	$
Renovation/Rehabilitation	$	$
New Construction	$	$
Machinery / Equipment Acquisition ✓	$	$
Business / Employee Recruitment Activities	$	$
Technology Costs	$	$
Small Business Development	$	$
Working Capital (Includes Inventory)	$	$
Job Training	$	$
Other	$	$
Total Project Cost	$ 0.00	
	Total LB840 Funds Requested:	$ 0.00

C. FUNDING SOURCES AND EQUITY INJECTION:

If Borrowing, Name of Lender: _____

Loan Amount: _____ Loan Term (Years): _____

Amount Injected Into the Project by Business/Partners/Owners:

_____

Other Funding Source(s) and Amount(s): _____

Ownership Identification: Please List all Officers, Directors, Partners, Owners, Co-owners and Stockholders.

Full Name	Title	Ownership Percentage
Maria Murillo C.	Owner	100%

Which type of assistance is the entity applying for?

☑ Grant ☐ Loan Guarantee If so, Lender? _____ ☐ Other

Explain: _____

What is the general purpose of the request (must be an allowed LB840/Economic Dev. Plan Project)?

☐ New Development ☐ New Business Startup ☐ Building Renovation ☐ Public Works

☐ Professional/Employee Recruitment ☐ Promotion/Tourism ☐ Job Training

☐ Working Capital ☐ Low - Moderate Income Housing ☐ Workforce Housing

☐ Technology ☐ Plan Management ☐ Technical Assistance ☐ Equity Investment

Does the business qualify to receive any incentives from the State of Nebraska? ☐ Yes ☑ No ☐ DK

Has the business applied for any incentives from the State of Nebraska? ☐ Yes ☐ No

If yes, please explain: _____

Employee Information: (FTE = Full-Time Equivalent = 2,080 Hours/Per Year)

Number of Existing Full-Time Equivalent Employees: 1

Number of Full-Time Equivalent Positions to Be Created: 1

Will all of the Full-Time Equivalent Positions be Physically Located within the City of Crete, their Two- Mile Extraterritorial Jurisdiction or on Land Held in the Name of the City of Crete?
☑ Yes ☐ No

If no, please explain: _____

Does the Company Employ Any Seasonal Employees? ☐ Yes ☑ No

If Yes, How Many: _____
(Seasonal employees must work for at least three continuous months and the position must reoccur annually)

Costom Rug 2 x $38.9 each
Room divider Curtains 2 x $76.71 each
Modern LED lights (ceiling) 3 x $133 each
small coffe table $20
Selfs 2x $46 each
hair dryer $169
2 hair dryers $180 each
5 seat waiting room $379
2 Studio lights x $90 each
Salon Station $165
Salon storage station $76
Backwash chair with sink $190
2 Automatic Vacuum $230 each
Rolling Cart trolley $43
lash light for eyelash extentions $80
2 Salon Chairs from Minerva Beauty
- Catera Styling Chair $539 each

Total $ 3,167.80
Amazon

Salon Chairs 1'080
Plumber 200

$4,447.80

Business Plan

Diamante Beauty Salon LLC

Since opening in 2018, Diamante Beauty Salon LLC has been committed to providing high-quality beauty services in Crete, Nebraska. As a locally owned small business, my goal is to create a welcoming environment where every client feels valued while receiving professional, personalized care.

Diamante Beauty Salon offers a wide range of services including haircuts, hair coloring, balayage, highlights, hair styling, makeup, eyelash extensions, and permanent makeup. I continuously invest in education and new techniques to provide modern, high-quality services that meet the needs of my clients.

To continue growing and remain competitive, I am seeking funding to modernize my salon with updated professional equipment and furnishings. These improvements will allow me to provide a more comfortable experience for clients, improve efficiency during appointments, and create a safer, more functional workspace.

The requested funding will be used to purchase professional salon equipment, including new client waiting room chairs, professional styling chairs, a shampoo backwash station, styling stations, salon storage, professional lighting, an infrared hair processor dryer, a BaBylissPRO professional hair dryer, eyelash extension lighting, automatic dustpan vacuum systems, retail product display shelving, and other furnishings that will enhance both the appearance and functionality of the salon.

These upgrades will help reduce service time, improve service quality, increase client comfort, and strengthen the long-term success of my business. They will also help Diamante Beauty Salon continue serving the Crete community while attracting new clients and supporting future business growth.

Receiving this funding would allow me to make meaningful improvements that would otherwise take several years to accomplish. My goal is to continue building a successful, professional salon that provides excellent service while contributing to the local economy and serving my community for many years to come.
Thank you for your consideration and for supporting small businesses like mine.

Sincerely,

Maria Murillo C.

Maria Murillo
Owner, Diamante Beauty Salon LLC

CRETE NEBRASKA Community in Motion NEBRASKA ECONOMIC DEVELOPMENT CERTIFIED COMMUNITY

C. PROJECT LOCATION:

Within the Crete City Limits?	☑ Yes	☐ No
Within the Crete Two-Mile Jurisdiction?	☐ Yes	☐ No
Land Owned by the City of Crete?	☐ Yes	☐ No
Not Located in Crete but for area benefit?	☐ Yes	☐ No

If Not in City Jurisdiction, please explain local benefit:

_____

_____

D. **ATTACHMENTS:** - Please Include the Attachments that Apply to Your Entity – ***See checklist Page 5.***

Please Note: The Information provided pursuant to this Section **Will** be Deemed Confidential and will not be Available for Public Disclosure.

- Business Plan: Brief Description of the Business
- Resumes of all Owners/Co-Owners/Directors/Partners/Stockholders
- For Existing Businesses – Three (3) Yearly Financial Statements
- For Existing Businesses – Current Financial Statements (Less Than Sixty (60) Days Old)
- For Existing Businesses - List of Current Obligations (Include Company Names and Amounts)
- For Start-Up Businesses – Current Business Plan
- For Start-Up Businesses – Three Year Projections
- Tax Returns – Previous Three (3) Years – Personal Tax Returns May be Required for Proprietorship
- Letter from Lending Institution if applicable
- If a Corporation, LLC or Other Legal Entity - Copy of Organizational Documents (Articles, Bylaws)
- Please Note that Other Financial Documents May Be Required

E.APPLICANT SIGNATURE:

I certify that the information contained in this application and all attachments are correct to the best of my knowledge. By signing below, I authorize the City of Crete or their contracted representative to check my credit and the credit of all who are listed within this application. I understand that I must update my credit information if my financial situation changes.

María Alanís C. — Applicant's Signature

Nov - 27 - 2025 — Date

Nestlé PURINA BUNGE Smithfield Good food. Responsibly. DOANE UNIVERSITY Bryan Health

Checklist for Local Economic Development Program Application

For a qualifying business to be considered for direct or indirect financial assistance under the Crete Local Economic Development Program an applicant must provide to the City Administrator or Program Administrator:

- ❑ A completed and signed application with all required support documents including, but not limited to:
  - ❑ A detailed description summary of the proposed project which clearly states what assistance the business is requesting from the program, including evidence that the project qualifies for assistance under the Local Option Municipal Economic Development Act and is consistent with the goals of the Crete Local Economic Development Program.
  - ❑ Use of Funds – Total project costs and financing requirement; include copies of any preliminary bids (if applicable/available).
  - ❑ A review of key management and employees and their experience as related to the proposed project.

- ❑ Start Up Business
  - ❑ Current Business Plan for the project and the company, including employment and financial projections;
  - ❑ Three (3) Years Financial Projections
  - ❑ Past three years personal tax returns

- ❑ Existing Business:
  - ❑ Most Current Business Plan
  - ❑ Three (3) Yearly Financial Statements: Profit & Loss Statements, Cash Flows and Income Statements covering the last three years of business operation, or if a new business, personal income statements.
  - ❑ List of Current Obligations (include company Names and Amounts)
  - ❑ Past three years personal tax returns

- ❑ Letter from Lending Institution(s) (if applicable): Evidence of private financing commitments for investors or lenders.

- ❑ If a Corporation, LLC or Other Legal Entity - Copy of Organizational Documents (Articles, ByLaws)

- ❑ Resume(s) of all owners/co-owners/directors/partners/stockholders: Necessary entity or personal financial information about the Applicant(s), including name, address, past experience, work history, and related information.

- ❑ Other information or financial documentation as requested.

Questions: Contact City Administrator, Tom Ourada, at 402-826-4313 or email tom.ourada@crete.ne.gov. **Return** application and supporting documentation to City Administrator, at City Hall, 243 E. 13th Street, Crete, NE 68333

United States Citizenship Attestation Form

For the purpose of complying with Neb. Rev. Stat. §§ 4-108 through 4-114, I attest as follows:

☑ I am a citizen of the United States.

— OR —

☐ I am a qualified alien under the federal Immigration and Nationality Act, my immigration status and alien number are as follows: _____, and I agree to provide a copy of my USCIS documentation upon request.

I hereby attest that my response and the information provided on this form and any related application for public benefits are true, complete, and accurate and I understand that this information may be used to verify my lawful presence in the United States.

PRINT NAME Maria Murillo Cardenas

(first, middle, last)

SIGNATURE Maria Murillo C.

DATE 11-27-2025

1/19/2010

DOWNLOAD/SAVE PRINT

LB 840 APPLICATION PROCESS

Next Step In Process

If application is denied, the applicant has the ability to appeal to the advisory board at a public meeting



