## Hawaii SBIR & STTR Matching Grant Program Application - Phase 0

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Page 1

## Hawaii Small Business Innovation Research (HSBIR) Grant Program Application - Phase 0

Administered by INNOVATE Hawaii / Hawaii Technology Development Corporation

All items with * are required.		
Company Name *		
President/Authorized Official Prefix *	First Name	Last Name *
Title *		
Email *  ex:myname@example.com  Email		
ex:myname@example.com Email		
ex:myname@example.com Email Business Phone *	Cell	
ex:myname@example.com Email	Cell ###-#####	
ex:myname@example.com Email Business Phone * ###-###-###		
ex:myname@example.com Email Business Phone *		
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ex:myname@example.com Email  Business Phone * ###-###-###  Business Address *		
ex:myname@example.com Email  Business Phone * ###-###-###  Business Address *		

City		
Postal /Zin Codo		
Postal/Zip Code Designated Contact (If D	ifferent From above)	
<u> </u>		
Prefix	First Name	Last Name
Email		
ex:myname@example.co	m	
, ,		
HI House District	HI Senate Distric	t
ex:23	ex:23	
# Of Hawaii Employees *	Non-Hawaii Employees *	Annual Revenue *
ex:20	ex:5	ex:5,000,000
Fed ID # *	D-U-N-S#	NAICS Code *
I CU ID II		
ex:123456789	ex:123456789	ex:543289
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ex:123456789 D-U-N-S (Dun & Bradstre U-N-S number we will co	et) number will be required be ntact you to assist in getting a	efore grant awarded. If you do not have a E a number at no cost.

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**Contact Information** 

## Hawaii SBIR & STTR Matching Grant Program Application - Phase 0

☐ Save my progress and resume later | Resume a previously saved form Page 2 2a. SBIR/STTR Grant Information -Project Title \* Federal Agency \* In lay terms describe the technology you are developing. What is it? A product, application, vaccine etc. 100 words max \* Why is this technology important? What problem are you solving? \* 2b. SBIR/STTR Grant Justification -List economic benefits to the company including new markets, new products etc. Forecast company growth and economic impact for 5 years **New Employees** New Jobs > \$80k salary Jobs Saved ex:3 ex:3 ex:20 **Increased Sales** Cost savings Other Investment ex:5,000,000 ex:250,000 ex:750,000

Complete this section for Phase 0	application
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Contact Information	

## Hawaii SBIR & STTR Matching Grant Program Application - Phase 0

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ssuming Phase I aw	vard success, what	is your vision	for Phase II and beyo	ond? *	
ow have you engag	ed a grant writer fo	r help develop	ing your Phase I prop	oosal? *	
Identify Crant D	roposal Writor/C	oncultant			
Identify Grant Pi	roposal Writer/Co	onsultant <b>–</b>			
Amount paid \$		7			
Name					
Name	Prefix		First Name	Last Name	
	Prefix		First Name	Last Name	
Name Company	Prefix		First Name	Last Name	
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Company  Street Address  Street Address Lin	5		First Name	Last Name	

Area Code	Phone Number
Email	
ex:myname@example.com	
Upload Federal Phase I application, Pr	oof of Phase I submission, and Invoice from grant writer
•	
Attachments	
Choose File No file chosen	Address of Asset
	<u>Additional Attachments</u>
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age 4						
st any pre	vious SBIR/STTR	and Hawaii SBIR	awards in chart be	elow.		
						Current
					HSBIR	Commercializatio
	Year	Phase	Amount	Agency	Amount	Stage Status
			npliance Express a	and do you have	a current Certifica	ate of Vendor
☐ Yes						
Vendor		rder to submit y	Hawaii Complian our application.	-		
Upload y	our current Certif	icate of Vendor Co	ompliance *			
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Upload y	our company lette	erhead or blank in	voice showing the	following: impri	inted company na	ıme, remittance
			on this document v		<del>-</del>	
	ode. The informat	ion must match e	xactly what is sho	wn on this SBIR/	STTR Grant applic	cation. *
vendor c						

INNOVATE Hawaii provid project prototype:	es manufacturing	assistance. Pleas	se indicate what type of service	s you need to achieve
☐ Exporting	R&D/Engine	ering	☐ Mechanical Design	☐ Electrical Design
Software/Firmware Design	☐ Feasibility St	udy	☐ Market research	☐ Prototyping assistance
3D printing	Pre-producti		ng  Production Manufacturi (high volume)	ing 🗌 Packaging
<ul><li>Distribution</li></ul>	☐ IP Protection		Licensing	Other
What other resources are	e needed for your t	echnology's deve	elopment?	
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INNOVATE Hawaii and the Hawaii Technology Development Corpor SBIR/STTR Matching Grant Program. We look forward to awarding move forward with your technology.	
By submission of this application you agree that all information proyou will be subject to all of the eligibility requirements of the grant participate in the HTDC Annual Economic Impact Survey and the I Survey for a period of 5 years.	t. You also agree to
Authorized Rep 0 0	
Prefix First Name	
O Last Name	
Title	
0	
Company	
0	
Important —	
The Authorized Representative listed above must complete an electroni will review the application. Once you hit the submit button, you will be	
Previous Page Submit	
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Contact Information	