

## Eat Local, Eat Greenacres Application Form

The City of Greenacres recognizes the economic and social role of restaurants in the community and is shining a spotlight on its amazing dining options by featuring them on social media for free.

To be featured please fill this form and send back to <a href="mailto:econdev@greenacresfl.gov">econdev@greenacresfl.gov</a> to be contacted by City staff.

Contact Name:	Contact Position:
Contact Email:	Contact Phone #:
	Year Business Opened:
Restaurant Address:	
Website:	Facebook:
Туре:	Specialty:
Please provide a short description of your business and tell us what makes it unique:	
What is your most popular dish/drink?	
What do you enjoy about being part of the Greenacres Community?	
Do you have a current Business Tax Recei	pt? □ Yes □ No
Has your business passed all health inspec	ctions within the last year? ☐ Yes ☐ No
By signing and sending this form you certify that you are the owner or authorized agent and acknowledge that application to participate does not guarantee selection or participation.	
Authorized Signature	Date: