

# Athens County Small Business Relief Fund

Administered by Athens County Economic Development Council

The Athens County Small Business Relief Fund program is to alleviate sudden and severe economic dislocation resulting from the COVID-19 pandemic business closures mandated by the State of Ohio, and aims to provide monetary relief from business interruptions or additional precautions required to reopen. An eligible business that is interested in participating in this program must fill out the application to determine if it meets all of the eligibility criteria. Each grant will be awarded on a reimbursement basis for funds expensed on eligible items incurred beginning March 01, 2020. Grants up to of \$5,000 will be awarded in the first round of funding. Businesses may be eligible to apply for an additional award up to \$5,000 in a second round of funding. The business must submit an itemized list of expenditures along with all supporting documentation showing payments of eligible expenses (paid invoices, receipts, canceled checks or bank statements) upfront.

To qualify, applications should meet the following criteria:

1. Businesses must have been impacted by the state-mandated closures that began March 15<sup>th</sup> due to the COVID-19 pandemic. Impacts may include loss of employees or revenue. Business must include percent of revenue loss on application.
2. Businesses must be located in Athens County and had to be in operation prior to February 15, 2020.
3. Businesses must have more than two (2) FTE employees excluding 20% owners but fewer than twenty-five (25) FTE employees as of March 15, 2020. (Full time equivalents defined as employees working a minimum of 35 hours/week).
4. Annual gross receipts of the business *preferred* to be less than \$2,000,000.
5. Ineligible businesses include tobacco, cannabis and/or vaping businesses, tattoo parlors, sexually-oriented businesses, bank, savings and loan or credit unions, E-commerce only companies, liquor and wine stores, franchised businesses not locally owned and independently operated. Additional ineligible organizations include places of worship and non-profits.
6. Businesses must not be presently debarred, suspended, proposed for disbarment, declared ineligible, or voluntarily excluded from participation in transactions by USDOL or the State of Ohio. Below are three websites that may be helpful in checking tax, environmental compliance, and debarment status.  
Federal Debarment Site: <http://www.sam.gov>  
Ohio Department of Taxation: <http://www.tax.ohio.gov>  
Business Filing Search: <http://www.sos.state.oh.us>
7. Businesses must not have any outstanding tax liability for over six months to the state of Ohio. Business are required to disclose any known outstanding tax liabilities with Ohio and other states when submitting their application. Existing out-of-state violations may be considered by the scoring committee when determining eligibility to receive funds.
8. Businesses must not have any outstanding civil, criminal or administrative fines or penalties owed to or pending in the state of Ohio.
9. Businesses must be licensed to operator in the state of Ohio. If a business does not have to meet licensing requirements due to an exemption, the business is responsible for providing proof of the exemption with their application.

Eligible Expenses:

Grant Funds provided by Athens County's Small Business Relief Program can only be used to pay the following:

1. Expenses related to the costs of business interruption caused by required closures.
2. Expenses that the business faces due to its uncertainty as to its ability to pay due to the pandemic.

\*Requests must be for business funds already spent on qualified expenses that have not been paid for with other government funds such as EIDL or PPP. Proof of each expense is required upfront.

Examples of eligible expenses include but are not limited to:

- Payroll expenses including salaries, wages or compensation paid to employees or 1099 workers.
- Lease or mortgage assistance (proof of a lease or commercial mortgage with the monthly amount due shall be provided by applicant).
- Operational expenses including utilities, maintenance and repairs, and materials and supplies related to interruption of the business caused by required closures.
- Unemployment costs and other employee leave costs directly related to COVID-19.
- Personal Protective Equipment or other COVID-19 related costs such as expenses related to compliance with Responsible RestartOhio.

Ineligible Expenses:

Examples of ineligible expenses include but are not limited to:

- Cost of vehicle or equipment leased or purchased after March 01, 2020, except if the purchase of equipment is to comply with Responsible RestartOhio.
- Personal, non-business expenses of the business or its owner(s).
- Construction costs.
- Any tax, license or fee obligations payable to any governmental entity.

Application Process:

The Application is available online at <http://athenscountyohedc.com/countycity-overview/response-to-covid-19/> and is available beginning Tuesday, October 20, 2020 at 12:00pm. **Applications and supporting documents must be emailed to [mollie@athenscountyohedc.com](mailto:mollie@athenscountyohedc.com) and must be submitted by Friday, October 30th at 3:00pm.**

All application will be reviewed by the Grant Review Committee and will be awarded by the Athens County Commissioners based on the grant review scoring rubric and until the grant funding is exhausted.

Please have all supporting documents, including W-9, 2019 Tax Return, 2019 Profit & Loss Statement and 2020 YTD Profit & Loss statement available to include as part of the application. Prior to the final approval of a grant application, additional information or documentation may be requested.

### Grant Review & Scoring Rubric:

A committee will review each application and determine to which businesses funding should be awarded. Applications will be based on the following criteria:

- Business determined to have filed a complete application with any additional information or documentation requested.
- Business determined to be a qualifying business and meets the established eligibility guidelines.
- Business substantiated the most critical need for grant assistance based on loss of revenue and/or loss of employees.
- Business determined that the awarded grant will have a direct impact on sustaining the company.
- Business has clearly demonstrated its ability to create economic and/or community benefit to Athens County.
- Amount of other financial assistance received by applicant from other COVID-19 financial assistance programs listed in application.
- Business is in good standing with local, state and federal jurisdictions with regards to taxes and business licensing.
- Any other criteria as determined by the review committee.

### Grant Reporting Requirements:

Grant agreements between each business awarded funds and the Athens County Commissioners will be executed. Additionally, the business will be required to submit at least one monitoring report explaining how funds were used.

Please send all completed applications and/or any questions to [mollie@athenscountyohedc.com](mailto:mollie@athenscountyohedc.com)

# ATHENS COUNTY CARES COVID-19 Small Business Grant Program

Contact Name:

First

Last

Phone:

Email:

Business Name:

Business Address:

Street Address

Address Line 2

City

State

ZIP/Postal Code

Type of Business:

Provide a description of your business (i.e. dine-in restaurant, hair salon, etc.)

Business Type:

EIN#

% Interest Owned:

Years in Business:

Years at Present Address:

**Average Gross Receipts:**

Please provide annual receipts prior to Covid-19 Pandemic (round to the nearest \$1,000)

**Current FTEs, excluding 20% owners**

**Do you own or lease a building?**

Own     Lease     Neither

**Monthly Mortgage or Rent Payment:**

**Lease Expiration Date:**

**COVID-19 Impact:**

Please provide a brief narrative of the impact COVID-19 has had on your business. Limited to 300 characters.

0-300 max characters

**% of Revenue Loss due to COVID-19:**

**Other COVID-19 Financial Assistance Sought:**

Select any other financial assistance you have applied for.

- PPP – Payroll Protection Program Loan
- SBA/EIDL – Small Business Administration Disaster Loan
- Program – Other
- None

**Personal Funds Invested:**

Amount of personal funds invested in business to date – if any. If no funds invested, please enter "0".

**Other COVID-19 Financial Assistance Obtained**

If you were successful in obtaining any COVID-19 Financial Assistance, please list the program, amount received and for what expenses funding was used. (i.e. PPP Loan \$50,000).

**Plans to Sustain Your Business:**

Although there is great uncertainty, Athens County hopes that businesses receiving grant funds will successfully persevere through the COVID-19 Pandemic. Briefly describe how you plan to sustain your business. Limited to 300 characters.

0 to 300 characters

**Economic and/or Community Benefit**

Describe the economic and/or community benefits your business creates for Athens County. Limited to 300 characters.

0 to 300 characters

**Grant Funds Requested:**

\*Maximum request of \$15,000\*

**How Will The Grant Funds Be Used:**

Select all that apply.

- Rent/Mortgage Payment
- Operational Expenses (ex: utilities, insurance, maintenance, repairs)
- Payroll Expenses
- PPE or Other Supplies

**Certifications:**

- I certify that my business is located within Athens County and the business maintains all proper licenses and permits for operations.
- I certify that the business has 25 or fewer employees or 1099 workers, as of March 15, 2020.
- I certify that my revenue has declined, as a result of COVID-19. Since March 15, 2020
- I agree to document and report the economic impact to the business, including how funds are used.
- I certify that the business is current with all federal, state, county and local taxes and fees.
- I certify that the business is in good standing with all applicable government regulations.
- I certify that the undersigned has the approval to submit this application and execute a grant agreement on behalf of the applicant.
- I certify that any grant funds received will not be used for the same expenditures as any other COVID-19 funding assistance received.

**Required Application Submittal and Eligibility Certification**

**Required Documentation Checklist**

- W-9 Form
- 2019 Tax Returns
- 2019 Profit & Loss
- 2020 Year-To-Date Profit & Loss

**Final Certification**

I certify that the above information, to the best of my knowledge is accurate and true. I understand that the County will rely on the accuracy of the submittals and certifications made in this application. Any misrepresentation is a criminal offense under section 1001 of Title 18 of the United States Code.

**Final Certification Electronic Signature**

By typing your name, you are electronically signing this application.

**Signature**

**Date**