Cowley County CDBG-CV Grant Application

Businesses in Cowley County who are facing financial difficulties due to the COVID-19 pandemic are eligible to receive assistance through Cowley County CDBG-CV Grant Funds. This is a grant for those that experienced or are facing impending income losses or other stresses due to the COVID-19 pandemic through reimbursement of qualified expenses. The purpose of the program is to help local businesses retain jobs of low-to-moderate income families.

Eligibility: Any for-profit business in operation prior to December 31, 2019, that is retaining jobs and benefiting 51% or more low-to-moderate income (LMI) families, and not owned by an elected official of this county.

Use of grant funds: Reimbursement for operational relief, including payroll, utilities, rent, inventory (limited to 60 days), and other eligible monthly expenditures. Costs cannot be incurred prior to 03/1/2020. Grants cannot be used to pay back loans or for lost revenue.

Amount of award is based on the number of retained employees to a maximum of:

- -1-5 Employees: up to \$4,000 based on need for the business and retained employees.
- -6-50 Employees: Up to \$12,000 based on the need of a business and retained employees.

PLEASE NOTE THESE AWARDS ARE SUBJECT TO AVAILABILITY OF FUNDS

Application: The Application and forms are available on the website to download or a copy can be mailed upon request. We will continue to accept applications until all funds are exhausted, please submit by uploading to the website, mail, or drop off to the address below:

www.cowleycounty.org/CDBG-CVgrant
Kerri Falletti
Cowley First - Cowley County Economic Development
311 E 9th, P.O. Box 462
Winfield, KS 67156

The application will be considered for eligibility and review once the following information is submitted:

- 1. Application Form completed and signed
- 2. <u>Employee Certification Forms</u> for each of the retained employees -note the number of employee certifications submitted must equal the total number of jobs retained on page 1 of the application –(make copies as needed, do not include owners)
- 3. <u>Current Payroll Report</u> including name, title, hire date, hours worked, rate of pay, pay period (weekly, biweekly, Monthly), and indicate current employees from date of application -signed and dated by owner
- 4. <u>Itemized expense report</u> listing request for reimbursable expenses, and list uses of PPP and EIDL.
- 5. <u>Narrative Letter</u> (signed and dated by business owners) from business explaining that the effects of COVID-19 has shut down or will shut down the business if funding is not secured.

Once Approved:

-If approved, the business will be required to supply a detailed Expense Report with invoices, receipts and proof of payment for funds seeking to be reimbursed. Please note the invoices must be dated 3-1-2020 or later including check number and paid date written on each invoice.

Questions please contact:

Kerri Falletti at kfalletti@cowleycounty.org or 620-221-9951 or 620-442-3094

Other duplication of benefits

Agency	Program Name			
SBA	Payment Protection Program Loans			
SBA	Economic Injury Disaster Loans			
SBA	Express Bridge Loans			
S BA	Debt Relief Program			
FEMA	Disaster Relief Fund			
FEMA	Public Assistance Program			
FEMA	Emergency Food and Shelter Program (EFSP)			
Treasury	The Coronavirus Relief Fund			
Treasury	Unemployment Insurance Provisions			
IRS	Economic Impact Payments			
USDA	Commodity Assistance Program			
USDA	Child Nutrition Programs			
USDA	Supplemental Nutrition for Women, Infants and Children (WIC)			
USDA	Nutrition Assistance Block Grant to Territories			
USDA	Disaster Household Distribution			
USDA	Summer Food Service Program			
USDA	The Emergency Food Assistance Program			
USDA	Pandemic EBT			
USDA	Supplemental Nutrition Assistance Program Emergency Allotments			
HHS	Community Living Allocation			
Labor	<u>Dislocated Worker Grants</u>			

CBDG-CV Business Grant Application	CBDG-CV	Business	Grant A	oplicatio	n
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Date:	

Due to the Cowley County Economic Development Office by noon on October 2, 2020

COMPANY INFORMATION]	•			•		
Legal Name of Business:			Т	Type of Business:			
Primary Contact Person:			I	Mobile Phone:			
Email:			Е	Business Ph	one:		
Website:			S	Social Media	a:		
Home Address of Owner:			١	Number of 0	Owners:		
Project Site Address:				Duns #:			
Business Structure (LLC, Sole Proprietorship, Inc):				Is the business located in the same city as the mailing address above? Yes No			
Date Business Established:	•	.,,,,		Does the applying business have a related operating or			
				nolding com		Yes No	
Gross Revenue for previous 2	12 months:						
Cost of Goods sold for previo	us 12 month	s:					
Voluntary Demographics	GENDER	VETER	RAN	RACE/ETH	INICITY:		
	Male	Ye	S	White			
	Female	ile No		Black/African American			
				Asian			
			American Indian/Alaskan Native				
				Native Hawaiian/Other Pacific Islander			
				American Indian/Alaskan Native & White			
				Asian & White			
				Black/African American & White			
			American Indian/Alaskan Native & Black/African				
			American				
			Other Multi Racial				
				Hispanic			
				Non-Hispanic			
Total Working Capital Need:	(Total from exp	ense report)					
		County/City		Main	Street	Network Kansas/HIRE	
List any all other funding you are		Chamb	er of	PPP		Community Foundation	
currently seeking, including but not		Comm	erce				
limited to, bank loans, SBA loans, grant		E-Com	munity	EIDL		Banker/Financing	
funding, etc. – reference list duplication		Amour	Amount of PPP:				
of benefits list in application packet		Amour	Amount of EIDL:				
Other:							
Jobs Retained: Full-time: Part-time:							
Will full or part-time jobs be retained as a result of the funds? Yes No							
Does the business owner have a tax liability in areas with Yes No							
Cowley County, the Kansas Department of Revenue or the IRS?							

Please attach Narrative Letter describing how COVID-19 is	Please attach dated and signed letter
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negatively impacting the business (e.g. weekly sales	
average drop for restaurants, occupancy rate drop for	
hotels, etc.)	
Please provide a description of the services provided by	
your business:	
,	
Describe how the use of the CDBG grant fund enhances	
the ability of the business to survive.	
the damey of the business to survive.	
What types of working capital will the funds be used for	
(e.g. utilities, payroll, inventory)?	
(e.g. delitees, payron, inventory):	
Please list any other business resource partners that the	
business is working with, if any, (e.g. small business	
development centers, economic development	
organization, industry or trade services).	

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1. Are you or an	1. Are you or an immediate family member of an employee of Cowley County?				No
2. Business revenue decrease month of April 2020 compared to month of April 2019.					
Less than 10%	10 to 25%	25 to 50%	50 to 75%	75 to 90%	>90%
3. How did you respond to reduce the negative impact of Covid-19?					
4. Were you der	nied for PPP or EIDL fu	unds?		Yes	No
If yes, by how much	\$	and why?			

- 1. Program requirements:
 - Must be located in Cowley County
 - Must have been in business as of December 31, 2019
 - Must have store front physical location
 - Chain establishments with two or more locations are not eligible
 - Eligible businesses, such as:
 - 1. Food Service restaurants, diners, etc.
 - 2. Retail clothing, housewares, gifts, appliances, etc.
 - 3. Wellness & Personal Grooming hair and nail salons, massage therapy, etc.
 - 4. Repair Service home repair, appliance repair, vehicle repair/service, etc.
 - 5. Hospitality motel, hotel, lodging, etc.
 - 6. Professional Service accountants, law offices, real estate agencies, etc.
 - This is a one-time payment. Eligible reimbursable expenses paid for with these funds are not required to be paid back.
 - Businesses with delinquent property, income or sales taxes are not eligible.
 - If a business received PPP funding, funds may not be used for payroll and proof of forgiveness will be required.

Yes - I hereby certify that this business will provide detailed invoices/receipts for all expenses paid using these grant funds.

I understand that if it is found that any of this information was provided falsely, all funds will have to be immediately repaid, and my business will be disqualified from any further funding through this program.

I hereby certify that all information in this application, LMI Certification worksheets, and RETAINED certification letters submitted for the CDBG-CV Grant application are complete and accurate to the best of my knowledge.

Certified by: _			
	Business owner		
Date:			
Date		_	