



City of Elyria ARP Small Business Grant Program

Background

As a recipient of American Rescue Plan (ARP) funding, the City of Elyria is offering grant for small businesses that have been impacted by COVID-19. **Small businesses experiencing increased expenses and/or reduced revenue as a result of direct COVID-19 response, or for reopening or reconfiguring operations to meet public health requirements are eligible to apply for up to \$50,000 in grant relief.**

How it Works

Under this program, the City will provide grants to businesses that are reopening or reconfiguring operations in response to COVID-19 or costs incurred as direct response to economic hardship resulting from the public health crisis. Existing small businesses, as defined by the Small Business Administration, are eligible to apply for funds in an amount not to exceed \$50,000. Funds can be used for documented COVID-related expenses as approved by the Elyria Economic Development Committee.

Funding is available on a limited basis, and completed applications are due by December 1, 2021.

Eligibility Checklist

1. Business is physically located within the boundaries of the City of Elyria, Ohio
2. Business is a Small Business as defined by the US Small Business Administration. For assistance in determining your company's eligibility please visit <https://www.sba.gov/size-standards/>
3. Only expenses that were or will be incurred from March 3, 2021 to December 30, 2022 are eligible for consideration.
4. All grant requests must be accompanied by documentation demonstrating economic harm as a result of the COVID-19 public health emergency and to the extent to which funds would respond or address it.
5. All expenses incurred or anticipated must be documented by receipts and/or quotes from vendors. Additional documentation may be required to process the application.
6. Business does not have any current unpaid code enforcement liens.
7. Business is not operating in violation in any State, Federal, or local laws.
8. Business cannot be currently debarred or suspended.

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Grant funds are for commercial purposes only. Funds generally cannot be used for construction or expansion related costs.

RESTRICTIONS

The City of Elyria reserves the right to determine eligibility on a case by case basis.

Ineligible circumstances and businesses include, but are not limited to:

- Businesses that did not experience a negative impact from the public health emergency or effectively document how the funding will respond or address the impact.
- Pornographic, adult entertainment, gaming
- Check cashing, payday loan operations
- Businesses and individuals who are not current with all federal, state and local taxes

Process

The City has an applicant review process that is carried out through the Elyria Economic Development Committee. Completed applications are due by December 1, 2021. The EEDC will review applications after the December 1st deadline. After review, and if approval is granted, checks will be mailed to the business which may take up to two (2) additional weeks.

All the information submitted for review must be signed and dated. **Applications MUST be returned to covidbusiness@cityofelyria.org in order to be considered.**

Please call Community Development at 440.326.1541 or email questions to covidbusiness@cityofelyria.org.

*Disclaimer: This grant program and any specific grants are contingent upon the availability of funds. If at any time this funding source is depleted, this grant program and any commitments to fund specific grants may become null and void.

Required Application Submittals and Eligibility Certifications

By checking each box below, the undersigned hereby certifies that the statement is true and/or that the required submittals are provided in conjunction with the application.

- ☐ I confirm that my business is located within the City of Elyria and the business maintains all proper licenses and permits.
- ☐ I have attached a completed IRS W-9 Form and DUNS Number.
- ☐ I have provided documentation to help verify the economic hardship suffered as a result of COVID-19, including financial statements and other data as applicable.
- ☐ I have provided documentation to help verify how the use of American Rescue Plan funds will respond or address economic harm resulting from Covid-19.
- ☐ I agree to document and report the economic impact to the business as a result of this grant, including but not limited to, jobs retained, job hired, increased sales, participation in other relief programs.
- ☐ I confirm that the business is current with all local, state, and federal taxes.
- ☐ I certify that the business has complied with its bylaws or other governing documents to obtain approval for the undersigned to submit this application and execute a grant agreement on behalf of the applicant.
- ☐ I certify that the above information, to the best of my knowledge, is accurate and true. I understand that the City will rely on the accuracy of submittals and certifications made in conjunction with this application. Any misrepresentation of inaccurate information may be treated as a default concerning any grant made.
- ☐ **I have provided a budget table sheet itemizing each individual expense for which I am seeking reimbursement. (Please see below for sample budget table.)**
- ☐ **I have provided substantiating documentation for associated costs outlined in the budget sheet including but not limited to receipts, cost estimates, payroll, rental agreements, utility bills, etc.**

Business Name

Authorized Representative

Title

Elyria American Rescue Plan Small Business Grant Application

Ownership Information

Name: _____

Address: _____

Phone: _____

Email: _____

Business Information

Business Name: _____

Business Address: _____

Business Phone: _____

Telephone: _____

Email: _____

Tax ID: _____

Duns: _____

Business Organization Type:

_____ Sole Proprietor _____ Limited Liability Corp. _____ Corporation _____ Partnership

Nature of Business _____

Years Established _____

Own or Lease? _____ Monthly Rent? _____ Lease Expiration? _____

Number of Employees Before COVID-19? Full Time _____ Part Time _____

Current Number of Employees Full Time _____ Part Time _____

Grant Request Amount **(Must be accompanied by receipts and/or cost estimates and any other relevant documentation):** _____

Please provide a brief narrative of the impact of COVID-19 has had on your business. (Attach supporting documentation.)

Please describe how the ARP Small Business Grant Program will be used to address harm caused to your business related to the pandemic.

Have you applied or do you plan on applying for additional COVID-19 relief funding? If so, list and include the amount requested/expected for each.

Please describe the economic and/or community benefits your business provides for the City of Elyria.

Miscellaneous Information

Is the business an endorser, guarantor, or co-maker for any obligation not listed in the financial statements? If YES, please provide details.

Does the business or applicant have any outstanding judgments, tax liens, or pending lawsuits against them? If YES, please provide details.

Is the applicant currently suspended or debarred from contracting with the Federal government or receiving Federal grants or loans?

_____ YES _____ NO

Application Checklist

Please be sure that all of the following are included in your application.

- ☐ Business Application
- ☐ Business Financial Statements (Profit & Loss Statement and Balance Sheet)
- ☐ Most Recent Business Federal Tax Return
- ☐ Organizational Papers (Articles, dba papers, etc.)
- ☐ Budget Sheet
- ☐ Supporting documents for budget sheet

Certification

The undersigned certifies that, to the best of his or her knowledge and belief, all information contained in this application and in the accompanying statements and documents is true, complete, and correct. The undersigned agrees to notify the City immediately of any material changes in this information. The undersigned authorizes the City to contact any bank and trade creditors it deems necessary without further notice, including, but not limited to, Dunn & Bradstreet reports or information from Credit Data.

Signature

Date

ARP Small Business Program Budget Sheet

Specific Cost Item/description	ARP Amount Requested
TOTAL	