

City of Gold Bar

EST. 1910

107 - 5th Street, Gold Bar, WA 98251



City of Gold Bar 2020 Small Business Relief Grant Application

Notice of Available Funding

The City of Gold Bar is accepting applications for the Small Business Relief Grant provided under the Interagency Agreement between the City and the Washington State Department of Commerce Coronavirus Aid, Relief, and Economic Security Act (CARES Act). Funding is intended to support business sustainability through the COVID-19 public health emergency. The City designates specific funding from the CARES Act to assist businesses with expenses incurred between March 1, 2020 and October 15, 2020.

Checklist

This checklist is provided as a tool to assist you in the completion of your application and to verify your information prior to submitting your application. Late and/or incomplete applications will not be accepted. If you have questions regarding your application, please contact the City of Gold Bar at 360-793-1101.

The following statements must be met in order to be considered for funding. Please initial each statement that applies to your business.

Storefront or primary office space physically located within the city limits of Gold Bar.

Applicant business is current on all state and local business licensing requirements, or was so on March 23, 2020 (date the Stay Home/Stay Healthy Order was issued).

Applicant Business has experienced a 25% or greater decrease in revenue, directly attributable to COVID-19.

Certification

By signing this application, I understand and affirm that: (initial each statement after reading)

If awarded, requested funds will be used only for purposes described in this application. I understand the use of funds are subject to audit by the Washington State Auditor.

If awarded, the Applicant Business will provide a Certificate of Liability and a copy of their Business License.

Grants awards will be determined by the City of Gold Bar in its sole discretion. Applications may be awarded for the full or partial amount requested, or declined. There will be no appeal process for the final disposition of grant awards.

Small Business Relief Grant funds are to provide funds for expenses incurred due to the COVID-19 public health emergency between March 1, 2020 and October 15, 2020. The Applicant Business cannot obligate any Small Business Relief Grant funds to expenses incurred or anticipated outside that date range.

___ The City of Gold Bar will only issue funds for those costs actually incurred by the Applicant Business, and only after receipt of documentation detailing the approved expenses and a signed Request for Payment form.

___ I certify that I have the legal authority of the Applicant Business represented in this application to submit this request for funding on its behalf, and I further certify that the information submitted in this application is true and correct to the best of my knowledge. I understand that the City of Gold Bar will rely on the accuracy of the submittals and certifications made in conjunction with this application. Any misrepresentation or inaccurate information may result in a required repayment of grant funds by the Applicant Business.

___ I understand that if I receive funds under this grant, I may be responsible for the taxable impact of these funds. I understand that it would be in my interest to speak with a tax professional to determine the appropriate tax implications for my business.

Print Name

Title

Signature

Date

Application Packet

Submission Deadline:
August 31st, 2020
4:00 pm

Applications must be mailed or delivered to:

City of Gold Bar
Attn: City Treasurer
107 5th Street
Gold Bar, WA 98251
Clerk.treasurer@cityofgoldbar.us

Completed applications must be received by the date and time specified. Postmarks will not be accepted. If mailing, be sure to allow enough time for delivery.

Applicant Business Contact Information

Legal Name of Business:

Doing Business As (DBA) Name, if applicable:

Unified Business Identifier (UBI) Number:

Non-profit designation, if applicable:

Business Street Address:

Business Mailing Address:

Date Applicant Business Established in Gold Bar:

Applicant Name:

Applicant Title:

Applicant Mailing Address (if different from above):

Applicant Phone Number:

Applicant E-mail:

Briefly describe the Applicant Business and its products/services:

Please check all that apply. Questions are for informational and statistical purposes only.

Business qualifies as a minority-owned business

Business qualifies as a veteran-owned business

Business qualifies as a woman-owned business

Business qualifies as a LGBTQ-owned business

None of the above

Applicant Business is a Sole Proprietorship: Yes No

Total Employee Compensation Hours, January 2020:

Total Employee Compensation Hours, May 2020:

COVID-19 Impacts

Briefly describe how the Applicant Business has been impacted by the COVID-19 pandemic:

Date the impact began:

Briefly describe the anticipated duration and long-term effect of the above-described impact:

The goal of the Small Business Relief Grant is to provide assistance to as many businesses as possible within the limited framework of relief funds provided to the City. What is the minimum grant amount that would assist the Applicant Business to remain solvent?

Is the Applicant Business currently closed due to the Governor's Proclamation?

In what phase of the Safe Start Washington Plan did the Applicant Business reopen?

Phase 1 *Phase 2* *Phase 3* *Phase 4*

What is the likelihood of the Applicant Business closing permanently *if awarded a grant*?

High *Medium* *Low*

COVID-19 Funding Assistance

Briefly describe how the Applicant Business will use grant funds, if awarded:

Has the Applicant Business applied for other Federal, State, or local funding related to COVID-19?

If yes, briefly describe the source(s) and amount(s) applied for, and any awards received:

If yes, briefly describe how the Applicant Business will use these grant funds, if awarded, differently:

Briefly describe how a grant, if awarded, will assist the Applicant Business to remain solvent:

Is there any additional comments or information the Applicant Business would like to provide?

Please attach any relevant documentation supporting the claims made in this application.