

# Hood River County COVID-19 Emergency Business Grant Application



Governor Kate Brown has allocated \$55 million of the State of Oregon's federal CARES Act funds for the purpose of providing financial assistance to small businesses and 501(c)3 nonprofits adversely affected by economic conditions as a direct result of the COVID-19 pandemic. These funds have been distributed to Oregon counties to develop business grant programs. Businesses may use the proceeds for any business-related operating expenses.

Businesses that have previously received funding through the State of Oregon COVID-19 Emergency Business Grant program or the PPP or EIDL federal programs are eligible to receive additional funding and should complete and submit this application.

This application is for a business that meets all of the following eligibility requirements:

- The business is headquartered in Oregon and has its principal operations in Hood River County, Oregon.
- If part of a chain, the business must be an individually owned franchise.
- If required by Oregon law to be registered with the Oregon Secretary of State to do business in Oregon, the business is so registered. If you are a sole proprietor and not required to have a business registration, we will require proof of business income, such as a Schedule C from your tax return, prior to considering an application complete.
- The business is either for-profit or an entity tax-exempt under section 501(c)(3) of the Internal Revenue Code.
- Between March 2020 and November 2020, the business experienced revenue losses or incurred necessary expenditures due to the COVID-19 public health emergency.
- Limited to businesses that were in operation as of February 2020 or earlier.

The following businesses are **ineligible** to apply for or receive funding under the Program:

- Passive real estate holding companies and other entities holding passive investments.
- Non-profit entities that do not have federal 501(c)(3) status.
- Businesses that are delinquent on federal, state or local taxes that were due on or before the date of application.
- Businesses that do not comply with all federal, state and local laws and regulations.
- Businesses that have closed and do not intend to reopen.

## Prioritization

Applications will be prioritized based on the following:

- Businesses that were prohibited by Executive Order from all operations in March or November 18 December 2.
- Businesses required to significantly modify operations per Executive Order, such as restaurants and non-urgent medical care providers.
- Businesses that identify as minority-owned, women-owned, or service-disabled veteran-owned.

- Businesses that have not received prior grants from the Business Oregon funded business grant program or the Statewide Business and Cultural Support Programs.
- Businesses that can show a 25% or greater decline in sales. NOTE: Businesses that experience a decline in revenues for reasons other than those caused by the COVID-19 pandemic (e.g. seasonal or cyclical businesses cycles) are not eligible for this priority criteria.
- Nonprofits whose primary purpose is to provide food assistance or housing support who are addressing immediate needs related to COVID-19 impacts.

### **Awards**

Awards to eligible businesses will be made as a grant. Prioritization of awards will be based on criteria listed above. Minimum award amounts will be based on the highest quarterly number of full-time equivalent (FTE) employees in 2020. Businesses with over 5 employees must provide an Oregon Employment Department Form 132 for any quarter in 2020 as verification. If the business cannot provide Form 132, they will still be eligible for an award of \$5,000.

# of FTE	Eligible award amount
0 - 5	\$5,000
6 - 25	\$1,000 per FTE (rounded to the nearest 0.5 FTE)
26 - 50	\$25,000

If there are not enough funds to meet the demand, after the noted prioritization criteria are administered, applications will be funded in order of complete submission. If there are additional funds available, award amounts may be increased based on a per FTE calculation to support complete distribution.

## **Eligible Uses**

Grants must be used to support business-related expenses and cannot be used for personal purposes. Funds awarded to businesses will be subject to income tax.

Business information, ownership information and demographic information will be reported to the State for all applications submitted, reviewed, approved and/or denied.

## **Submitting Your Application**

Applications can be completed, signed and submitted online.

If you cannot complete the online application or you need to submit supporting documents (i.e., Schedule C, financial documents), you can email them to <a href="mailto:bizgrants@mcedd.org">bizgrants@mcedd.org</a>. You can also drop materials off or mail to the MCEDD office (802 Chenowith Loop, The Dalles, OR 97058.

## Applications must be received by December 20th.

Applications may be submitted for up to three days after this date and will be put on the waiting list and processed if there is additional funding capacity available.

# **Section 1: Business Information**

		В	usiness Type	
Business Name			Sole Prop.	Partnership
D : 0 !!			Corporation	LLC
Business Owner Name			501(c)(3)	S Corp
Email Address				
Telephone				
Physical Address	Mailing Address, if different			
City	State	Zip Code	County	
Employer Identification Number (Federal EIN) or Social Security Number (SSN)  If you are a sole proprietor and not required to have a business registration, we will require proof of business income, such as a Schedule C from your tax return, prior to considering an application complete. Please email the documentation to bizgrants@mcedd.org and include your business name in the subject.				
# of FTE	Calculate # of FTE  Skip if you do not have Oregon Employment Department Form 132 or have 5 or less employees.  Total hours reported on any one Oregon Employment Department Form 132 in 2020 divided by 455 = FTE			
		Please subn	nit OED Form 132 along	with your application
		When did yo	ou start your business?	List month and year
NAICS or Business Activity Code (as listed on your most recent federal tax filing or look up here: <a href="https://www.census.gov/eos/www/naics/">https://www.census.gov/eos/www/naics/</a> )  Description of product(s) or service(s) offered:				
Has your business received	federal CARES Act fur	nding through t	he SBA's PPP or EIDL p	program?
Yes		No		

## Section 2: Business Details Company Principals & Demographics

Name Title % Ownership Ethnicity: Race: Gender: Hispanic/Latino American Indian or Alaskan Native **Female** Black Non-Hispanic/Latino Male Prefer not to answer Native Hawaiian or Pacific Islander Other Sub-continent Asian Prefer not to answer White Other Prefer not to answer Name Title % Ownership Ethnicity: Race: Gender: American Indian or Alaskan Native Hispanic/Latino Female Black Non-Hispanic/Latino Male Native Hawaiian or Pacific Islander Prefer not to answer Other Sub-continent Asian Prefer not to answer White Other Prefer not to answer Name Title % Ownership Race: Ethnicity: Gender: American Indian or Alaskan Native Hispanic/Latino Female Black Non-Hispanic/Latino Male Native Hawaiian or Pacific Islander Prefer not to answer Other Sub-continent Asian Prefer not to answer White Other Prefer not to answer Name Title % Ownership Race: Gender: Ethnicity: American Indian or Alaskan Native Female Hispanic/Latino Black Male Non-Hispanic/Latino Native Hawaiian or Pacific Islander Other Prefer not to answer Sub-continent Asian Prefer not to answer White Other

Prefer not to answer

## Section 3: Prioritization

Businesses will receive priority for the following (check all that apply to your business):

My business was prohibited from <u>all</u> operations in March as directed by Executive Order 20-12 and/or as directed by the two-week statewide "freeze" from November 18 -December 2 (Executive Order 20-65).

My business was required to significantly modify operations as outlined in Executive Order 20-07, Executive Order 20-10, and/or the two-week statewide "freeze" (Executive Order 20-65) that, for example prohibited on-premises consumption of food or drink, but allowed take-out or delivery service and that limited elective and non-urgent procedures that utilize PPE to urgent procedures only.

My business is minority-owned, woman-owned, or service-disabled veteran-owned.

My business has not received a prior grant from the State of Oregon COVID-19 Emergency Business Grant Program (these funds would most likely have come from MCEDD, Business Oregon, or a statewide entity listed here) or the Statewide Business and Cultural Support Programs.

My organization is a nonprofit whose primary purpose is to provide food assistance or housing support and we are addressing immediate needs related to COVID-19 impacts.

OPTIONAL - Businesses that can show a 25% or greater decline in sales will receive priority consideration. NOTE: Businesses that experience a decline in revenues for reasons other than those caused by the COVID-19 pandemic (e.g. seasonal or cyclical businesses cycles are not eligible for this priority criteria.

Please provide documentation for a one-month period between March 1, 2020 and November 30, 2020, and for the corresponding period in 2019, documenting a 25% or more reduction in sales (e.g. April 2020 and April 2019). Documentation may include one of the following:

- -Profit and Loss Statements (like periods in 2019 and 2020)
- -Income Statements (like periods in 2019 and 2020)
- -Sales Reports (like periods in 2019 and 2020)
- -Bank Records (like periods in 2019 and 2020) (E.g. bank statements, online banking reports, etc.)

Please email documentation to bizgrants@mcedd.org. Please include your business name in the subject line.

NOTE: your business type must be noted in the Executive Orders listed in order to receive the priority consideration in the first two items above.

## Section 4: Certifications and Representations

The information in this application, including all attachments and the following certifications, are complete, current and accurate.

This application presents fairly the conditions of the eligibility of the undersigned and by signing below the applicant attests to meeting the following eligibity criteria:

- The business is headquartered in Oregon and has its principal operations in Hood River County, Oregon.
- If required by Oregon law to be registered with the Oregon Secretary of State to do business in Oregon, the business is so registered.
- The business is either for-profit or an entity tax-exempt under section 501(c)(3) of the Internal Revenue Code and has been in operation since February 2020 or earlier.
- During March 2020-November 2020, the business incurred necessary expenditures due to the COVID-19 public health emergency.
- The business has accurately reported the number of FTE employed.
- The business has disclosed prior grants received from the State of Oregon's COVID-19 Emergency Business Grant Program (these funds would have come from MCEDD, Business Oregon, or a statewide entity) or the Statewide Business and Cultural Support Program.
- The business is current on all federal, state and local taxes as of the date of application.
- The business is compliant with all federal, state and local laws.
- The business agrees to provide business, financial and ownership information necessary to determine and verify eligibility.
- The business will only use these proceeds to support business-related expenses and that proceeds will not be used for personal purposes.
- The business is open or plans to reopen for business.

By signing below, you are **certifying the truth and accuracy of your answers under penalty of law**. Making a material misrepresentation about the business and its operations to qualify for an award will be a provision of default and could result in penalties and forfeiture of funds if awarded. Failure to comply with the eligible use of proceeds could also result in penalties and forfeiture of funds. Additionally, you may be asked to provide supporting documentation to provide evidence for any information in this application. If you do not submit this information, you will not be considered for an award.

Should it be determined a misrepresentation exists creating a default, the award may be forfeited and subject to repayment. Failure to repay or cure a default will result in any and all collection actions permissible by law, including through third party collection services or the Oregon Department of Revenue. The applicant agrees to allow Hood River County to pursue such collection actions.

Please initial acknowledgment of certifications:

#### General Certification

I certify that all information contained in this application, including all attachments and certifications, is valid and accurate. I further certify that:

- 1. The application has been reviewed and approved by the authorized owner(s), managers with appropriately delegated authority, and/or in accordance with the organization's articles of incorporation, articles of organization or bylaws, and
- 2.I am authorized to submit on behalf of the applicant business within authority granted in the applicant's articles of incorporation, articles of organization or bylaws. (e.g., President, Secretary, Chief Executive Officer, Board Chair, etc.) or I have been granted this permission by the organization and can provide that documentation if requested.

Signature	Date
Printed Name	Printed Title

#### Reminders:

- -You must initial the certifications at the bottom of page 6.
- -You must sign and date this page.
- -If you are a sole proprietor with no business registration, you must submit a Schedule C.
- -If you have more than 5 FTE, you must submit OED Form 132.
- -If you would like priority consideration for having a 25% or greater decline in sales, you must submit additional documentation as noted on page 5.