



City of Wapakoneta CARES Small Business Grant Program

[Background](#)

As a recipient of CARES Act funding, the City of Wapakoneta is offering grants for small businesses that have been impacted by COVID-19. **Small businesses or a Non-Profit 501c3 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. There is no cap on the amount that can be requested, however you must ensure that you do not resubmit expenses already claimed under the first round of (County) cares act funds.**

[How it Works](#)

Under this program, the City will provide emergency grants to small businesses or non-profit 501c3 negatively affected by the COVID-19 outbreak. Existing small businesses, as defined by the Small Business Administration, are eligible to apply for funds, which will be used to pay for normal business expenses that have been made more difficult due to declining revenues or unanticipated costs caused by the COVID-19 outbreak.

[Eligibility Checklist](#)

1. Business is physically located within the boundaries of the City of Wapakoneta, Ohio
2. Business has been operating before January 1, 2020
3. Business can demonstrate ongoing business operations as of February 29, 2020
4. Business is a Small Business having less than fifty (50) full-time employees and annual gross receipts must be less than \$2,000,000.00.
5. Business has suffered economic damages from business interruption caused by COVID-19 since March 1, 2020.
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.

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

Eligible Assistance

If the applicant has experienced expenses directly attributable to the COVID-19 crisis, the following may be eligible for grant assistance:

- Lease or Mortgage Assistance: if the applicant applies for lease or mortgage assistance, proof of a lease or commercial mortgage with the monthly amount due shall be provided by the applicant.
- Operational Expenses Assistance: Examples of operational expenses include, but are not limited to: advertising and marketing, supplies, maintenance and repairs, payroll, and utilities.
- Unforeseen Expenses: Examples of unforeseen expenses included, but are not limited to: The development of new solutions to problems presented during the COVID-19 crisis, and the purchase of safety supplies such as masks, hand sanitizer, safety barriers, signage, and items to enforce physical distancing.

RESTRICTIONS

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

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

- Adult entertainment establishment
- Bank, savings and loan or credit union
- E-commerce only company
- Liquor/wine store
- Vaping store
- Tobacco store
- Cannabis dispensary
- Franchised business not locally owned and independently operated
- Any other criteria as determined by the Finance committee.

Process

The City has an applicant review process that is carried out through the City of Wapakoneta Finance Committee. Normally it takes approximately thirty (30) days to review applications, however considering the seriousness of the situation and projected need, the review process should take no more than two (2) weeks after all required submittal materials have been received. After review, and if approval is granted, checks will be mailed to the business which may take up to two (2) additional weeks. All approved recipients of grant funds will be subject to a review every 90 days following award of the grant and must provide itemized list with accompanying receipts of qualifying expenditures. **Applications MUST be returned in order to be considered.** Applications will be accepted starting **Sept. 21, 2020** and must be submitted **by Sept. 28, 2020, at 4:00 p.m.** All applications will be reviewed. Grants will be awarded until the grant funding is exhausted.

(The City of Wapakoneta will make every effort to expedite this process when possible.)

***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 Wapakoneta and the business maintains all proper licenses and permits.
- I have attached a completed IRS W-9 Form
- 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 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.

_____ X _____
Business Name Authorized Representative Title

Date

Wapakoneta CARES 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
_____ 501c3 Non-Profit

Nature of Business _____

Years Established _____

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

Number of Employees Before COVID-19? 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.

Please describe how the CARES Small Business Grant Program will be used to help your small business with direct COVID-19 response, or reopening or reconfiguring operations to meet public health requirements 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 or received for each.

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

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
- Jobs Hired or Retained (Since March 1, 2020)

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.

X _____
Signature

Date