



## HARRISONBURG BUSINESS RECOVERY GRANT APPLICATION Round 2

Harrisonburg Economic Development  
409 S. Main Street  
Harrisonburg, VA 22801  
(540) 432-7701

The City of Harrisonburg, using funding from the federal CARES Act, launched the Harrisonburg Business Recovery Grant (HBRG) to assist businesses in responding to the impact of the COVID-19 crises. Harrisonburg Economic Development is administering the program, with the funds to be disbursed by the Harrisonburg Economic Development Authority. The HBRG offers grants of up to \$10,000, based on the employment total of the business.

Eligibility criteria for Round 2 has changed. New eligibility criteria are in red below. Businesses eligible for a Harrisonburg Business Recovery Grant must meet the following requirements:

- A for-profit business entity with a place of business located in the city of Harrisonburg
- Home based businesses located in the city of Harrisonburg
- Food trucks
- Non-profit organizations with a Harrisonburg storefront selling retail products
- Must have opened the business on or before May 1, 2020
- Had between 1 and 100 full time employees (or equivalent FTE) as of May 1, 2020
- Must have at least \$20,000, but no more than \$5 million, in annual (or projected annual) gross revenues
- Must be able to demonstrate at least a 10% loss in revenue that can be attributed to COVID-19 (comparing months, quarters or year-to-date)
- The business is locally owned and operated
- Locally owned franchises are eligible for each location located in Harrisonburg
- All taxes and fees to the city of Harrisonburg are current
- Businesses that have already been awarded funds through the Harrisonburg-Rockingham Business Resilience Grant or received a Disaster Impact Loan that was forgiven by the City of Harrisonburg are still eligible to apply, **however**, those qualifying businesses will receive a reduction based on the prior award amount. For example, if a business with 20 employees received a \$5,000 grant/forgiven loan, it would now receive a \$3,000 grant (instead of the full \$8,000).

## Ineligible Applicants

- Businesses that received a grant in Round 1
- Businesses that are not locally owned franchises and/or chains that are not headquartered in the city of Harrisonburg
- Independent contractors operating multilevel or network marketing businesses (such as Avon, Mary Kay, Pampered Chef, etc.)
- Independent contractors working on digital platforms (such as Airbnb, Fiverr, Uber, Lyft, Instacart, etc.)
- Banks
- Nonprofit organizations without a retail storefront
- Businesses engaged in speculation or investment in rental real estate

## Eligible Uses of Funds (for costs incurred March 1, 2020 – December 30, 2020)

- Employee compensation (including wages and benefits)
- Rent
- Utilities
- Inventory
- The purchase of PPE or physical improvements such as plexiglass barriers that improve the sanitary conditions of the business
- The purchase of equipment and supplies for disinfecting, sanitizing, and deep cleaning
- Other business-critical operating expenses as approved by City's Grant Review Team

## Maximum Grant Amounts

- Grant amounts range from \$4,000-\$10,000 per business, depending on the number of full-time equivalent employees (as of March 1, 2020 or May 1 for newer businesses)
  - 1-3 full-time equivalent employees: Up to \$4,000
  - 4-10 full-time equivalent employees: Up to \$6,000
  - 11-25 full-time equivalent employees: Up to \$8,000
  - 26-100 full-time equivalent employees: Up to \$10,000
- A full-time equivalent employee is based upon 35+ hours worked per week
  - (EXAMPLE TO HELP YOU CALCULATE: Four part-time employees working 18 hours each = 72 hours;  $72 \div 35 = 2.05$  full-time equivalent employees)
- The Grant Review Team will have flexibility on grant award amounts based on total number of eligible applications received. However, grant amounts will not exceed maximum levels detailed above.

## Application Review Process

Applications for the HBRG will be accepted beginning September 28<sup>th</sup> at 8:00am and ending on October 19<sup>th</sup> at 8:00am. At that time, all applications will be reviewed for completeness. All fully completed applications, submitted by eligible businesses, will be deemed qualified. If there are more qualified applications than funds, then preference will be given to industries that have been recognized as being the most impacted by COVID-19 including: hospitality and entertainment, retail trade, restaurant and food services, and personal service establishments (such as salons and barber shops).

Only fully completed applications will be considered. Please take time to fully complete all required fields of information and upload necessary supporting documentation. If you have questions or need assistance with your application, please contact us at (540) 432-7701.

Please email your completed grant application and supporting documents to Peirce Macgill at [peirce.macgill@harrisonburgva.gov](mailto:peirce.macgill@harrisonburgva.gov). You may also drop the grant application off in person to Harrisonburg Economic Development at 409 S. Main Street, Third Floor.

**To be considered, your completed application and required supporting documents must be received by Harrisonburg Economic Development by 8:00am on October 19<sup>th</sup>, 2020.**



## HARRISONBURG BUSINESS RECOVERY GRANT APPLICATION Round 2

### Section 1: Business Description

Business Name:

Business Address:

Business Contact:

Name:

Phone:

Email:

How long has the business been in the City of Harrisonburg?

Number of Full-Time Employees as of March 1 (or May 1 for newer businesses), 2020:

Number of Part-Time Employees as of March 1 (or May 1 for newer businesses), 2020:

Number of Full-Time Employees as of August 1, 2020:

Number of Part-Time Employees as of August 1, 2020:

2019 Annual Sales/Business Revenue:

Year to Date Annual Sales/Business Revenue:

Describe your business:

Describe your products/services:

Describe your target market: *(Who are your customers? Where are they located?)*

Explain how your business has been affected by the impact of COVID-19.

Outline the 10% or more revenue decrease due to COVID-19 by comparing one of the following choices:

- Month to month revenue change since February 2020
- Spring/summer 2019 revenue to spring/summer 2020 revenue
- January - September 2019 revenue to January - September 2020 revenue

List other financial assistance that you have received since March 1, 2020.

Please share other information that you would like selection committee to know about your business:

## Section 2: Grant Request Information

Grant Amount Requested?

*(calculate your maximum grant amount based on the number of full-time equivalent employees, see page 2 for an example calculation)*

How do you plan to use the grant funding?

How will these funds help your business move towards stability or sustainability?

## Section 3: Owner Information

Please circle all choices that apply to you:

Male  
Female

Person with disability  
Veteran  
Non-US Citizen

Hispanic or Latino  
Black or African American  
White or Caucasian  
Asian  
American Indian  
Other (please specify): \_\_\_\_\_

## Section 4: Certifications

I understand that I must submit all the documents required for my business to be considered for this grant. Failure to submit all the documents will be considered an incomplete application. Incomplete applications will not be reviewed.

Yes

No

By selecting 'Yes' below, I understand and confirm that these funds will be used for necessary expenditures incurred due to the public health emergency associated with COVID-19, as outlined in the 'Eligible Uses of Funds' section of this application.

Yes

No

I understand that, as part of the federal CARES Act, the grant money must be spent by December 30, 2020 on expenditures as outlined in the "Eligible Uses of Funds" section of this application. I will keep records documenting the expenditure of the grant money and will provide said documentation should it ever be requested.

Yes

No

### Certification Statement

I certify that the information above is correct to the best of my knowledge. I authorize Harrisonburg Economic Development to make inquiries as necessary to verify the accuracy of the statements made by me. I have read and understand the terms outlined above. I agree that my business name and grant award amount may be published as a result of submitting this application. I agree to indemnify and hold harmless the City of Harrisonburg, its officers, directors, employees, agents and volunteers from any and all claims, loss or other liability arising from or related to the services that Harrisonburg Economic Development provides before, during, and after the grant review and award process.

If awarded a Harrisonburg Business Recovery Grant, I acknowledge that I have been provided a Coronavirus Relief Fund (CRF) business assistance grant as allowed under the federal Coronavirus Aid, Relief, and Economic Security (CARES) Act. The CRF is considered federal

financial assistance and has been assigned a Catalog of Federal Domestic Assistance (CFDA) #20.019.

In compliance with federal guidelines for the Coronavirus Relief Fund (CRF), I certify that I will spend all grant funds by December 30, 2020. Funds expended will be used as outlined in the eligible uses of funds in the Harrisonburg Business Recovery Grant application. The grant funds will not be used for local tax payments. I understand that if I do not spend the grant funds by December 30, 2020, the City of Harrisonburg shall have the right to request repayment of the grant funds

I certify that I will maintain records documenting the expenditure of the grant funds and that all such records will be kept for five years from the date of the grant. I understand that the City of Harrisonburg shall have the right to request such records during the five years and shall have the right to request repayment of the grant funds in the event that I do not provide the requested documentation.

I further certify that the funds from the business assistance grant will not be used for expenditures that have previously been reimbursed from other federal assistance programs.

***Notice: Harrisonburg Economic Development is dedicated to maintaining the confidentiality of all private client information including proprietary business data, business plans, and tax ID numbers. As an organization receiving financial support from state and federal agencies, we may be required to document and share client information with public agencies as a condition of program funding. Such information will be treated as confidential by all parties and shared only to the extent required for program compliance and not for further distribution.***

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Owner or Authorized Representative Signature

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Date

## Required Documentation Check List

I have completed and submitted the following as part of my grant application:

- Copy of your Business License
- Monthly gross receipts history for the previous 18 months or sufficient documentation to prove the 10%+ reduction in revenue
  - You can provide Quickbook statements, monthly banks statements, etc.
- IRS form 941 or VEC-FC-20/21 (only for businesses with 10-100 employees)
  - For January-March 2020



- IRS form W-9 completed, signed and dated within the last 12 months
  - If you use your personal name to file business taxes, include your middle initial
  - On your W-9, please check your tax classification in Box 3
  - In Part 1-Taxpayer Identification Number, only fill in either Social Security Number or Employer Identification Number, depending on which you use to file your business taxes
  
- Copy of your driver's license or other form of ID

If your grant request is approved, additional documents may be required before the distribution of funds.