

CENTERVILLE COVID-19 BUSINESS RELIEF GRANT PROGRAM

In an effort to provide additional resources to companies dealing with revenue losses due to the COVID-19 pandemic, the City of Centerville authorized the Business Relief Program. This program is intended to assist for-profit companies with expenses directly resulting from business interruption or arising from the decrease in gross revenue in connection with the COVID-19 pandemic.

Eligible Recipients:

- For profit companies located in the City of Centerville (Applicant must be the business owner/operator)
- Must have 50 or fewer employees or 1099 contractors
- Must be in business at least 12 months and have positive revenue pre-pandemic
- Must have a Federal Taxpayer Identification Number

Eligible Expenses:

- Rent/Mortgage Payments (excludes businesses located in or operated from personal residence)
- Machinery/Equipment Payments
- Utility Expenses
- Salaries, wages, and/or compensation (if not receiving assistance from State/County/ Federal Program)
- Personal Protective Equipment (PPE)
 or expenses related to compliance with
 Responsible Restart Ohio to meet
 social distancing requirements

Ineligible Expenses:

- Any expenses reimbursed through business interruption insurance or other federal aid received in connection with the COVID-19 pandemic.
- New Purchases
- New Debt

Form of Assistance Available:

 Grants up to \$2,500 to be used for reimbursement of Eligible Expenses, as defined above. Documentation of eligible expenses must be submitted with grant application.

Application Process and Review:

The Centerville Community Improvement Corporation (CCIC) will accept and review applications for the Business Relief Program on behalf of the City of Centerville. Applications will be evaluated on a first come-first serve basis. In the event requests exceed available funds, priority will be given to applicants based upon the following criteria:

- Need for assistance
- Likelihood that grant funds will allow business to retain jobs in Centerville
- Overall impact of the grant on qualifying business

Please note, the COVID-19 Business Relief Program is not an entitlement program, and as such, funding through this program is not guaranteed. The actions of the CCIC Board of Directors on matters related to the allocation of these funds are final.



CENTERVILLE COMMUNITY IMPROVEMENT CORPORATION (CCIC) COVID-19 BUSINESS RELIEF PROGRAM

Applicants seeking COVID-19 Business Relief Program assistance through the Centerville Community Improvement Corporation (CCIC) must submit the following form and supplemental attachments for consideration. All applicable information as requested in this form must be provided, and the applicant is responsible for the accuracy of the information submitted.

Business Relief Program Request: \$_____

Section A: General Information

Applicant Information: Please provide the legal name, address and other contact information of the applicant for this request.

Applicant Business Name:
Contact Name:
Applicant Mailing Address:
City/State/Zip:
Email Address:
Website:
Daytime Phone Number:
Federal Tax ID:
CENTERVILLE LOCATION: Please specify the street address of the applicant business.
Address:
TIME IN BUSINESS: How long has the company that will benefit from the Business Relief Program been in existence at this location?
YearsMonths
COMPANY OFFICERS/PRINCIPALS: Please provide the names of all owners, principals and/or primary officers of the company.
Name and title:
Name and title:
Name and title:

CURRENT EMPLOYMENT AND PAYROLL: For each of the categories listed below, please specify the number of employees currently employed by the applicant and the total annual payroll.

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Full-time Permanent	Full-time Payroll	
Part-time Permanent	Part-time Payroll	
Temporary/Contract	Temporary Payroll	
Seasonal	Seasonal Payroll	
	TOTAL PAYROLL	
DELINQUENCIES AND JUDGMENTS		
Does the applicant, or affiliated company to benefit fr the incentive program, owe any delinquent taxes to the State of Ohio or a political subdivision?		NO
Does the applicant, or affiliated company to benefit fr the incentive program, owe any money to the State o State agency for the administration or enforcement o environmental laws?	ra YES	NO
Does the applicant, or affiliated company to benefit fr the incentive program, owe any other moneys to the a state agency or a political subdivision of the State th past due, whether the amounts owed are being conte in a court of law or not?	State, YES	NO
Are there any current or pending lawsuits involving ei the principals or the company?	ther YES	NO
NEED FOR ASSISTANCE: Applicants must de decrease in gross revenue due to COVID-19 March 1 - May 31, 2020. Please provide a su your business and provide supporting final	9 when comparing March 1 - ummary of the impacts of th	- May 31, 2019 to e pandemic on

OTHER ASSISTANCE: Please describe any other assistance you have received to provide relief to your business (i.e. rent reductions, utility waivers, SBA or PPP funding, etc.). Please note expenses reimbursed through business interruption insurance or other federal aid are not eligible for the Business Relief Program.			
Section B: Eligible Expenses			
For each of the categories listed below, please estimate the amount to be expended by the applicant related to the COVID-19 pandemic.			
Rent/Mortgage Payments			
Machinery/Equipment Payments			
Utility Payments			
Salaries/Wages (not covered by PPP)			
PPE/Restart Ohio Upgrades			
TOTAL EXPENSES			
USE OF FUNDS: Please indicate the eligible costs for which Business Relief Program funds will be used. Grant funds are provided on a reimbursement basis. Businesses must submit appropriate documentation related to expenses with the application.			
Section C: List of Attachments			
Current Bank Statement			
2019 Federal Tax Returns			
Financial Records/Bank Statements demonstrating decreased revenue from March 1 – May 31, 2019 compared to March 1 - May 31, 2020			
Completed W-9			
Documentation of Eligible Expenses			

Section D: Requirements and Certifications

The undersigned, duly authorized Officers of the Applicant, hereby certify that the statements made in the foregoing application and in all attachments submitted in connection with this application are true and correct to the best information and belief of the undersigned and are submitted as a basis for determining approval of Business Relief Program assistance.

I/we certify that the requirements listed below will be met:

- A. I/we agree to notify the City of Centerville immediately of any project modification.
- B. The Applicant agrees to supply additional information upon request.
- C. This grant is to be used for COVID-19 business related expenses only.
- D. I/we have not nor do we intend to be involved in illegal activity under federal, state, or local laws. Nor do I/we have any criminal proceedings pending against me/us.
- E. I/we do not anticipate receiving business interruption insurance or other federal aid for reimbursement of Business Relief Program eligible expenses.
- F. The Applicant agrees to allow the Centerville Finance Department to share relevant income tax witholding information with the Development Department as part of the Business Relief Program application review process.
- G. The Applicant agrees that the City of Centerville may share information publicly regarding grant recipients.
- H. Unspent and/or improperly grant proceeds are to be repaid by the grant recipient to the City of Centerville.

Signature of Applicant	Applicant Name (Printed)	Title
Signature of Applicant	Applicant Name (Printed)	Title
Signature of Applicant	Applicant Name (Printed)	Title

Submit completed application to:

Community Improvement Corporation City of Centerville Development Department 100 W. Spring Valley Rd. Centerville, OH 45458 EconDev@centervilleohio.gov