

COVID-19 Mitigation Business Grant Application

If you need assistance completing the application for this grant program please contact our partners, the Small Business Center at Durham Tech at 919-536-7241.

Business Name:

Address:

City:

State:

Zip Code:

Business Owner/CEO/CAO:

Contact Name (if different from above):

Phone Number:

Email:

Number of Current Full-time Equivalent Employees:

APPLICATION REQUIREMENTS

Before continuing, please review the following application requirements and confirm below.

Minimum application requirements. Applicants must be a business or a social business (hereafter referred to as *business*) that has been in existence prior to July 1, 2020, are headquartered (including an in-home office) within the Carrboro Town limits and must retain at least the same number of full-time equivalent employees on payroll for a minimum of six-months. All grant award recipients will be required to enter into a Grant Agreement.

ARPA and State law funding requirements. These funds are provided to the Town of Carrboro as a part of the American Rescue Plan Act. The American Rescue Plan Act requires that businesses receiving these funds must adequately demonstrate and document how these funds will be used by their business to mitigate the negative economic impacts from COVID-19. Additionally, they must be used in compliance with the U.S. Treasury's Interim Final Rules and Guidance on Coronavirus State and Local Fiscal Recovery Funds. Applicants that do not demonstrate a negative economic impact from the pandemic and how funds received will mitigate the negative economic impact, will not be considered for funding. In addition, all funding must be consistent with State statutory authorization and the North Carolina Constitution.

By checking this box, I confirm this business meets the minimum requirements of this program.

Grant Uses

Grant awards may be used for multiple grant activity categories, but the total maximum grant award cannot exceed \$10,000. No more than one grant may be awarded to any one business entity. Please use the attached budget form to identify the grant use category, what projects will be completed, a short description, and the amount of the request.

- Back rent and utilities – examples include overdue gas, water, electric, or internet utilities, overdue building or facility rents, or overdue property taxes.
- COVID-19 loan repayment – examples include private loans issued after April 1, 2020, business credit card debt acquired after April 1, 2020, loans issued by the Town, County, or State after April 1, 2020 (Federally issued PPP and EIDL loan repayment is not permitted).
- Capital improvements to adapt business to a post-COVID-19 environment – examples include equipment, enhance cleaning efforts, barriers or partitions, changes to enable social distancing, building improvements, or outdoor dining enhancements.
- Training new under- or un-skilled employees – examples include the salary for an employee trainer to train new under- or un-skilled employees, or courses for training seminars for new under- or un-skilled employees related to the business type.
- Marketing and advertising – examples include social media, print, radio, or television advertising, providing rewards for loyalty programs, or purchasing promotional marketing materials.

Negative Economic Impact Narrative

Please explain the negative economic impact COVID-19 has had on your business and how the grant funds will mitigate or resolve these impacts. Provide ample relevant documents in support of your case (such as bank statements, tax returns, financial statements, quarterly employment filings, etc).

Additional Information

Please check the box and provide additional supporting documentation where applicable. Evidence may be requested if not provided with the application.

- Tourism Sector Business (restaurant, bar, brewery, hotel/motel, or entertainment venue)
- Average year-over-year revenue loss of 30 percent or greater for any 6-month period from April 2020 to April 2021 (please submit financial statement for the appropriate period)
- BIPOC Business
- Woman Business
- A Certified Living Wage Employer (Orange County Living Wage or Durham Living Wage Project, please submit a copy of your certification)
- Locally owned business (owner resides in Alamance, Caswell, Chatham, Durham, Orange, or Person County, NC, please submit copy of driver's license with DOB and license number marked out)
- Businesses with 2 or fewer locations
- This small business or non-profit is owned by, employs, or serves low to moderate income (see definition in the policy to determine exact income limits) citizens.

If checked, please provide a short narrative explaining the reasons you checked this box. Supporting documentation may be requested if there are additional questions by the review committee.

Application Submission Statement

By submitting this application and signing below, I agree that I am authorized to submit this application on behalf of the business listed in this application, that all of the information submitted in and with this application is truthful and accurate to the best of my knowledge, that **there is no intention at this time to close the business for a period of at least 2 years after the award has been granted and that all full-time equivalent employees will be retained on payroll for a minimum period of 6-months**, and that the grant requests made in this application meet the minimum application requirements to the best of my knowledge.

Additionally, I understand that a Final Report shall be submitted, and all award funds expended no later than 18 months after the award being made and that failure to alter or change the approved activities the funds are spend on without prior approval may result in the entire grant award being withdrawn and be required to be repaid to the Town.

I also agree to abide by the COVID-19 Mitigation Business Grant Policy and state and Federal guidelines and requirements, which regulates the administration of this grant.

Business Owner/CEO/COO/CAO

Date

