

City of Rio Rancho

Community Development Block Grant – CDBG-CV

Small Business/Micro-Enterprise Assistance Program Application

Please provide information as accurately as possible and provide documentation requested. Applications will be reviewed by City of Rio Rancho staff to determine eligibility. Funds will be disbursed by mail once all required supporting documents are received and the Small Business Assistance Program Agreement has been executed. Applications are due by June 15, 2020 at 5:00pm and the target date for funding is July 15, 2020. Applications will be reviewed and scored based on City of Rio Rancho funding priorities and the national objectives established by HUD. Those applicants that receive the highest scores will be prioritized for funding (See attached scoring criteria). Applicants that have not received funding from other COVID-19 focused assistance programs, including but not limited to the Economic Injury Disaster Loan or Paycheck Protection Program will be prioritized. In the event that the funding requests exceed the amount available for funding, grant recipients may be selected by lottery. All of the information submitted for our review must be signed and dated. Funds will not be disbursed until all documentation is received and the grant agreement has been executed. Please contact Susan Gonzales with questions or comments at 505-896-8766 or email at sgonzales@rrnm.gov. Please leave a detailed message at the phone number provided and someone will return your call. **Disclaimer: This performance grant program and any specific performance grants are contingent upon the availability of funds. If at any time this funding source is depleted, this performance grant program and any commitments to fund specific performance grants may become null and void.**

NAME OF APPLICANT: _____

HOME ADDRESS: _____

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

TYPE OF BUSINESS: _____ NUMBER OF YEARS IN BUSINESS _____

PHONE NUMBER: _____ CELL: _____

E-MAIL ADDRESS: _____

EIN #: _____ DUNS# _____

BUSINESS ORGANIZATION TYPE:

SOLE PROPRIETOR _____ LIMITED LIABILITY _____ CORPORATION _____ PARTNERSHIP _____

WOMEN OWNED BUSINESS ENTERPRISE YES _____ NO _____ MINORITY OWNED BUSINESS YES _____ NO _____

HAVE YOU RECEIVED OR APPLIED FOR THE SBA ECONOMIC INJURY DISASTER LOAN (EIDL) OR THE PAYCHECK PROTECTION PROGRAM (PPP): YES _____ NO _____

EXPLAIN: _____

OWNERSHIP/MANAGEMENT:

NAME: _____ % INTEREST OWNED _____ TITLE _____

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NAME: _____ % INTEREST OWNED _____ TITLE _____

PLEASE PROVIDE A BRIEF NARRATIVE OF THE IMPACT COVID-19 HAS HAD ON YOUR BUSINESS

AVERAGE GROSS ANNUAL RECEIPTS \$ _____

PLEASE PROVIDE YOUR ANNUAL INCOME FROM YOUR LAST TAX RETURN (LINE 37 ADJUSTED GROSS INCOME).

\$ _____ WE WILL REQUIRE YOUR TAX RETURN BE INCLUDED WITH YOUR SIGNED GRANT AGREEMENT. IF YOU FILE A BUSINESS TAX RETURN IN ADDITION TO YOUR PERSONAL TAX RETURN, PLEASE PROVIDE BOTH RETURNS FOR REVIEW.

DO YOU AS OWNER HAVE ANY INCOME OTHER THAN FROM THE BUSINESS? IF SO, PLEASE EXPLAIN

IF YOU QUALIFY AS A MICRO-ENTERPRISE, (INCOME BELOW 80% OF THE AREA MEDIAN INCOME AND 5 OR FEWER EMPLOYEES (STILL CURRENTLY EMPLOYED AND BEING PAID BY THE BUSINESS, DO NOT COUNT EMPLOYEES RECENTLY LAID OFF), PLEASE ANSWER THE FOLLOWING:

HOW MANY PEOPLE LIVE IN YOUR HOUSEHOLD INCLUDING YOU? _____

IS THERE OTHER INCOME FOR THE HOUSEHOLD – FROM SPOUSE, PARTNER, OTHER FAMILY, ETC.?

IF SO, WHAT IS YOUR TOTAL ANNUAL HOUSEHOLD INCOME? _____

MONTHLY RENT/MORTGAGE (FOR BUSINESS LOCATION) \$ _____

NUMBER OF EMPLOYEES: PRE COVID-19 (2/15/20) _____ FULL TIME _____ PART TIME _____

JOBS EXPECTED TO BE RETAINED AS A RESULT OF THIS LOAN/GRANT (PLEASE DESIGNATE FULL TIME OR PART TIME): FULL TIME _____ PART TIME _____

IF YOU REPORTED THAT YOU ARE STILL EMPLOYING STAFF, ARE THEY CURRENTLY RECEIVING A PAYCHECK? _____

AMOUNT OF LOAN/GRANT REQUEST: \$ _____

USE OF FUNDS: PLEASE DESCRIBE HOW THE CDBG CARES SBA LOAN/GRANT WILL BE USED TO HELP YOUR SMALL BUSINESS RETAIN EMPLOYEES AND KEEP YOUR BUSINESS OPERATING DURING THIS CHALLENGING TIME:

USE: _____ \$ _____

USE: _____ \$ _____

USE: _____ \$ _____

USE: _____ \$ _____

USE: _____ \$ _____

TOTAL \$ _____

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 on conjunction with the application.

_____ I confirm that my business is located within the City of Rio Rancho and the business maintains all proper licenses and permits for operation

_____ I certify that I am a US Citizen, Legal Permanent Resident, or a Qualified Alien as defined by PRWORA 1996 (attach documentation)

_____ I certify that my revenue has declined by 30% or more as a result of COVID-19 since February 15, 2020. **Attach balance sheet, profit loss statement or other financial documentation that demonstrates the required decline in revenue**

_____ I have attached a copy of the most recent personal tax returns for owners with 20% or more ownership interest

_____ I have attached copies of my personal and business bank statements for the last 2 months prior to this application

_____ I have attached a completed City of Rio Rancho Vendor Registration Form, IRS W-9 Form, and DUNS number

_____ I have provided documentation to help verify the economic hardship suffered as a result of COVID-19, including financial statements, bank statements, and other data as applicable.

_____ I have submitted copies of the Micro-Enterprise Verification Form and the Income Verification Form for Job Retention if applicable (Small Businesses)

_____ 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 performance 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 of Rio Rancho will rely on the accuracy of the submittals and certifications made in conjunction with this application. Any misrepresentation or inaccurate information may be treated as a default concerning any loan/grant made.

Business Name _____

Authorized Representative _____

Title _____ Date _____

