

# Richmond County & Town of Warsaw

## *COVID-19 Emergency Small Business Relief Program*



The COVID-19 Emergency Small Business Relief Program is a grant program that's purpose is to provide essential capital during the economic crisis that has resulted from the COVID-19 global pandemic. Grants will be awarded from a committee of both County and Town officials and is open to all small businesses located in Warsaw and Richmond County.

## Program Outline & Eligibility

### One Time Cash Grant Amounts Available: Up to \$5,000

(Grant applications will be accepted on a rolling basis throughout the summer and fall – first round of awards will be based on applications received by July 17, 2020)

### **GRANT ELIGIBILITY**

To be eligible for Emergency Small Business Relief Program grant funds, you must meet the following criteria:

- Be a business that is physically located and operates in Richmond County or the Town of Warsaw, for a minimum of six (6) months at time of grant submission.
  - Business shall be locally or regionally owned; national chain or franchises are not eligible to apply.
- Gross profit not to exceed \$2,000,000 annually.
- No less than 1 and no more than 20 full-time or FTE (Full-Time Equivalent) employees on payroll, or 40 total employees (Full and Part-Time) 2 part-time employees = one full-time employee

#### Grant Awards

1-5 Employees:	up to \$1,250
6-10 Employees:	up to \$2,500
11-15 Employees:	up to \$3,750
16-20 Employees:	up to \$5,000

Award amount based on \$250.00 per employee (\$750.00 min. / \$5,000 max.)

- Be in good tax standing with the Commonwealth of Virginia, Richmond County, and/or the Town of Warsaw.
- Have an up to date and active Business License (Town Only).
- Must be in good standing with all local, state, and federal codes.
- Must certify to negative impact of emergency.

**BUSINESS SECTION**

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Email: \_\_\_\_\_

Business Contact: \_\_\_\_\_

Business Owner: \_\_\_\_\_

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

How long has the business been located in Richmond County? \_\_\_\_\_

Organization Type: (Circle One)      Sole Proprietorship

Partnership      LLC      S Corp.      C. Corp.

EIN Number: \_\_\_\_\_

Current Number of Full Time Employees: \_\_\_\_\_

Current Number of Part Time Employees: \_\_\_\_\_

Describe your business, products, services and target market:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## ELIGIBILITY QUESTIONNAIRE

1. Have you received funding from the SBA (Economic Injury Disaster Loan) or PPP (Payroll Protection Program) funding? If so, how much?

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2. Did you remain open throughout the months of March – Current? If not, please explain why, for how long, and how many employees were furloughed (if applicable).

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3. Have you received any grant funds or incentives from the Town of Warsaw or Richmond County within the past two (2) years? If so, please explain:

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4. Do you certify that any grant funds received shall only be used for the following items, effective March 16<sup>th</sup>, 2020 - current:

- Payroll.
- Utilities, rent, or mortgage payments.
- Capital purchases of inventory or other items pertinent to the day-to-day functions and operations of the business.

PLEASE NOTE – These are reimbursement based and will require written proof of each.

**YES** or **NO** (*Please circle one*)

5. Are you a certified SWaM (Small, Women and Minority) business?  
**YES** or **NO** (*Please circle one*)

6. Do you certify that your establishment will be open and operational for normal business hours by no later than July 1<sup>st</sup>, 2020? **YES** or **NO** (*Please circle one*). If not, please explain why:

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7. Do you intend to rehire or maintain employees at levels equal to or greater than pre-COVID? If not, please explain:

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8. Do you certify that the goal of this grant is to retain and/or expand your employee base, and that businesses that have either retained or plan to re-hire staff to previous levels will rate at a higher level of need? **YES** or **NO** (*Please circle one*).

### **CERTIFICATION STATEMENT**

I certify that the information above is correct to the best of my knowledge. I authorize Richmond County Industrial Development Authority to make inquiries as necessary to verify the accuracy of the statements made by me. I agree to indemnify and hold harmless Richmond County Industrial Development Authority, its officers, directors, employees, agents and volunteers from any and all claims, loss or other liability arising from or related to the services that Richmond County Industrial Development Authority provides before, during, and after the grant funding review process.

***Notice:** Richmond County Industrial Development Authority 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 and non-profits 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.*

I hereby affirm that all the information included is true and correct to the best of my knowledge.

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Date

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**Documentation Check List**

In addition to this application, please submit the following as part of your application:

- Copy of your Town Business License (if located within town limits)
- IRS form W-9 for the business/ corporation
- Affidavit certifying gross profit (see attached)
- Copy of driver's license or other form of ID
- Copies of invoices for requested reimbursement

**AFFIDAVIT**

I, \_\_\_\_\_, owner of \_\_\_\_\_ have made application for the Richmond County & Town of Warsaw COVID-19 Emergency Small Business Relief Program and do hereby certify to following statements:

- The above-named locally or regionally owned business has operated in Richmond County/Town of Warsaw for a minimum of six (6) months
- Gross profits from the above-named business do not exceed \$2,000,000 annually
- The above-named business is in good standing with the Commonwealth of Virginia, Richmond County and/or the Town of Warsaw (if applicable).
- I am not aware of any violations of local, state and federal codes pursuant to the above-named business.

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_