

CDBG-CV Application

Company Information	
Legal Name of Business: Click or tap here to enter text.	Type of Business: Click here to enter text.
Primary Contact Person: Click or tap here to enter text.	Mobile Number: Click here to enter text.
Email: Click or tap here to enter text.	Business Phone: Click here to enter text.
Website (if applicable): Click or tap here to enter text.	Social Media: Click or tap here to enter text.
Home Address of Owner: Click or tap here to enter text.	Number of Owners: Click or tap here to enter text.
Project Site Address: Click or tap here to enter text.	Duns #: Click or tap here to enter text.

Business Structure (LLC, Sole proprietorship, Incorporated): Click or tap here to enter text.	Is the business located in the same city as the mailing address above? <input type="checkbox"/> Yes <input type="checkbox"/> No
Date Business Established: Click or tap here to enter text.	Does the applying business have a related operating or holding company? <input type="checkbox"/> Yes <input type="checkbox"/> No
Gross Revenue for previous 12 months: Click or tap here to enter text.	
Cost of Goods sold for previous 12 months: Click or tap here to enter text.	

Voluntary Demographics
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Veteran: <input type="checkbox"/> Yes <input type="checkbox"/> No
Race/Ethnicity: Choose an item.

Total Working Capital Need (Application Amount):			
List any and all other funding you are currently seeing, including but not limited to bank loans, SBA loans, public or private loans, grant funding, etc.	<input type="checkbox"/> SBA	<input type="checkbox"/> City	<input type="checkbox"/> Network Kansas/HIRE
	<input type="checkbox"/> Chamber of Commerce	<input type="checkbox"/> Main Street	<input type="checkbox"/> Community Foundation
	<input type="checkbox"/> E-Community	<input type="checkbox"/> MCAC	<input type="checkbox"/> Banker/Financing
	<input type="checkbox"/> Click or tap here to enter text.		
Jobs Retained: Click or tap here to enter text. Fulltime Click or tap here to enter text. Part-Time			
Will full or part-time jobs be retained as a result of the funds? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown			
Does the business owner have a tax liability in arrears with the Kansas Department of Revenue or the IRS? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown			

<p>Please provide a description of the services provided by your business.</p>	<p>Click or tap here to enter text.</p>
<p>Please provide a short description of how COVID-19 is negatively impacting the business (e.g. weekly average sales drop for restaurants, occupancy rate for hotels, etc.)</p>	<p>Click or tap here to enter text.</p>
<p>Describe how the use of the CDBG grant fund enhances the ability of the business to survive.</p>	<p>Click or tap here to enter text.</p>
<p>What types of working capital will the funds be used for (e.g. utilities, payroll, inventory)?</p>	<p>Click or tap here to enter text.</p>
<p>Please list any other business resource partners that the business is working with, if any, (e.g. business development centers, economic development organization, industry or trade services).</p>	<p>Click or tap here to enter text.</p>

TIPS FOR COMPLETION

- 1) Make sure you fill out HOW MUCH working capital you are requesting (we ask you TWICE on purpose)
- 2) Include a job certification for EACH full-time AND part-time employee. Owners/LLC member(s) or corporation stockholder(s) do not need to be included. If you are a proprietorship without employees, include job certification(s) for business owner(s). Number of jobs retained on the application must equal the number of job certifications sent in.
- 3) Include "average weekly hours worked" on each job certification.
- 4) Separately, include a SIGNED LETTER on your letterhead stating how COVID-19 affected your business and why you need a working capital loan.

Name of Business: Click or tap here to enter text.

Did your business receive benefit from any of the programs listed below? PLEASE CHECK BOX(ES):

- SBA Payroll Protection Program (PPP) Loan/Grant
- SBA Economic Injury Disaster (EIDL) Loans
- SBA Express Bridge Loans
- SBA Debt Relief Program
- FEMA Disaster Relief Fund
- FEMA Public Assistance Program
- FEMA Emergency Food & Shelter Program
- TREASURY The Corona Virus Relief Fund
- TREASURY Unemployment Insurance Program
- IRS Economic Impact Payments
- USDA Commodity Assistance Programs
- USDA Supplemental Nutrition for Women, Infants, & Children
- USDA Nutrition Assistance Block Grant to Territories
- USDA Disaster Household Distribution
- USDA Summer Food Service Program
- USDA The Emergency Food Assistance Program
- USDA Pandemic EBT
- USDA Supplemental Nutrition Assistance Program Emergency Allotments
- HHS Community Living Allocation
- LABOR Dislocated Worker Grants

If you check any box above, list below **exactly** what those funds were used for and what TIME PERIOD those funds covered:

Click or tap here to enter text.

Please note that you cannot apply for any CV funding that **duplicates** the “activity” you used the above funds for. For example, say you used the Payroll Protection Program (PPP), your firm is ineligible for payroll assistance during that time period. If you used the Economic Injury Disaster Loan (EIDL) for inventory, your firm is ineligible for inventory from that period. **Time periods cannot overlap to be eligible.** CV Funds cannot be used to pay for existing debt.

Ineligible businesses:

- Home businesses such as Mary Kay, Avon, etc.
- Farmers and Ranchers
- Non-profit organizations
- Businesses that were not in existence prior to March 1, 2020

Dollar Amount of CV Funds You are Applying For:

Click or tap here to enter text.

Cost of Goods Sold for the same time period: Click or tap here to enter text.

Is this a microbusiness (CDBG-ED/ML, 1-5 employees)?

Yes

No

Is this a larger business (CDBG-ED 6 to 50 employees)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
How many jobs are being retained (must match job certifications)? Click or tap here to enter text.		
Dollar amount of CV funds you are applying for: Click or tap here to enter text.		
BE SURE ALL JOB CERTIFICATIONS YOU SEND HAVE "HOURS WORKED PER WEEK".		
Are you a county supervisor/commissioner?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you a county employee?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you a city commissioner?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you a city employee?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you related to any of the above?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please describe: Click or tap here to enter text.		
<p>IMPORTANT documentation instructions to follow:</p> <ul style="list-style-type: none"> —You may only apply and receive CV funds once. —Sole proprietorships are eligible, but can only claim costs for inventory, utilities and rent; NO proprietor draws or wages. Sole proprietor job certification MUST be submitted and qualify. —A DUNS number is a requirement. Go online to find yours. —City/county-owned utilities are NOT eligible (water, sewer, trash). City/county taxes are NOT eligible. —CV funds can NOT be used to pay existing debt. —Only 60 days of working capital in any category is eligible. Please provide all invoices/receipts for a CONSECUTIVE 60-day period that works for the requirements. A summary spreadsheet is helpful. Submit proof-of-payment (cancelled checks) showing invoices have been paid. If CV funds are needed to pay an invoice, PLEASE NOTIFY US IN ADVANCE. —Actual DATED INVOICES with invoice numbers showing what was purchased only. NO Quickbooks' printouts or financials allowed. —Summarize documentation with a spreadsheet that matches or exceeds the amount of funds you are applying for. If applying for payroll, be sure to attach payroll documentation. Payroll period CANNOT overlap SBA PPP or other federal payroll reimbursement funds received. If you are applying for other working capital needs (inventory, utilities, taxes, etc.), please provide receipts to document all costs. Only expenses after March 1, 2020 are eligible. <p>Only 60 days of invoices can be submitted.</p>		
Certified By:	Date: Click or tap here to enter text.	
Business Owners' Signature		