

City of Portales Local Small Business COVID-19 Relief Program Application

OVERVIEW

The City of Portales in conjunction with Roosevelt County Community Development Corporation is sponsoring a second Local Small Business COVID-19 Relief Program to assist local businesses which have been negatively impacted by the COVID-19 pandemic. This program is funded through Economic Development gross receipts tax collections by the City. Total grant funds available are \$200,000, and awards will be made based upon funds availability and business eligibility. Eligible businesses which apply may only receive a conditional grant for a portion of their request depending upon the number of and dollar amount of requests. This assistance is only intended to provide businesses with immediate, short-term cash flow assistance for the days from March 17, 2020 thru May 31, 2020. These funds will not be used to pay debts incurred prior to the March 17th public health order.

Applications are available on the City of Portales's website at Portalesnm.gov. Applications will only be accepted electronically. Completed applications and required documentation must be submitted in full to Covid19Relief@portalesnm.gov no later than 12:00 pm (Noon) Wednesday June , June 24, 2020.* Conditional Grant award notifications will be made beginning July 3, 2020.

***Applicants may be contacted before conditional grant award decisions are made if City staff require clarification of the items addressed in the application. However, applicants should strive to submit a complete application, as incomplete applications will be disqualified. Legibility, clarity and completeness are essential.**

Eligibility**

- Business must have experienced business disruption due to COVID-19 pandemic;
- Business must be registered with the City of Portales and located in the City limits of Portales;
- Business must have fewer than 50 employees; (Full Time Equivalent)
- Business must have been in operation for 12 months prior to March 17, 2020***
- Business **must** submit a complete application
- Business owners must be willing to sign a public participation agreement with the City of Portales if selected to receive funding
- Businesses which received funding in the first round of the Local Small Business COVID-19 Relief Program may apply, however the total possible award is capped at \$25,000 combined for both rounds of funding and the second application must be for different expenditures than what was applied for in the first round.

****Businesses not meeting the above eligibility requirements may qualify for assistance through the Local Economic Development Act for a grant or low interest loan.**

*****Businesses may request an exemption by attaching a detailed request explaining why they believe this requirement should be waived. The City will review each request and make a determination based upon the merits of the reasons given.**

General Information

Business Name: _____

Type of Business: _____

Federal Employer ID Number: _____

Date Business Established: _____

Owner Information

Name (last name, first name): _____

Phone _____ Cell Phone _____

Email _____

Property owner

- Business Structure:
 - Sole Proprietorship
 - Partnership
 - LLC
 - Corporation

Mailing Address _____

Home Address _____

Business Address _____

Criteria

What is the total amount requested for the grant? _____

What is the intended use of funds to maintain/or re-open business operations (detail--payroll, minor infrastructure costs, utilities/rent, ppe) after the disaster? _____

Has the business received any other grants or relief funds since the disaster? _____

If so, what source and amount? _____

Number of employees in your business prior to March 17th, 2020? _____
(List number of employees not counting owner)

Number of employees currently employed in your business as of May 31st, 2020? _____
(List number of employees not counting owner)

Does your business have 50 or fewer employees? _____

Is your business a registered business with the City of Portales and located within the Portales City Limits? _____

Have you remained in operation, partial operation or completely shut down or closed? Please describe. _____

List revenues and expenditures for March-May below. Attach revenue and expense reports for those periods also.

Revenues March 2019	Revenues March 2020	Revenues April 2019	Revenues April 2020	Revenues May 2019	Revenues May 2020
Expenditures March 2019	Expenditures March 2020	Expenditures April 2019	Expenditures April 2020	Expenditures May 2019	Expenditures May 2020

What is the estimated total loss of revenues from March 17th to May 31st? _____

Describe how the funds will be utilized to maintain business operations or reopen after disaster. _____

Is the income from this business your primary source of income? _____

(Please attach additional sheets as needed)

Attachments needed

- Revenue and Expense Report March 2019
- Revenue and Expense Report April 2019
- Revenue and Expense Report May 2019
- Revenue and Expense Report March 2020
- Revenue and Expense Report April 2020
- Revenue and Expense Report May 2020
- Attach complete W-9 form
- Copy of your most recent business registration with the City of Portales

Certifications and Release (Circle Yes or No)

Yes No Any current or past bankruptcies within the last five years?

Yes No In the last five years have there been any violations of public health, safety, or environmental laws?

- I hereby give permission to the City of Portales and Roosevelt County Community Development Corporation to research the business/history, perform background checks, credit checks, contact the business financial institutions, insurance providers, and perform other related activities necessary for reasonable evaluation of this application.
- I understand that all information submitted to the City of Portales will be subject to the New Mexico Inspection of Public Records Act.
- I am aware that funds will not be disbursed until a contract or public participation agreement has been executed and appropriate terms have been met.

I certify that all representations, warranties, or statements made or furnished to the City are true and correct in all material respect. I understand that if any information provided engaged in deception and knowingly made a false statement that this is a criminal violation and may be prosecuted.

Print Name

Signature

Date