



Millard County Small Business Economic Recovery Grant UPDATED October 2020

Millard County is pleased to provide small business grants in an effort to assist businesses through the COVID-19 hardship. Small businesses are critical to the success of our County's economy. The funds originate from the CARES Act fund approved by Congress and passed through the Utah Governor's Office of Management and Budget.

To qualify, a business must have experienced a significant impact as a result of the Public Health Order on April 2, 2020 (or subsequent health orders). The business must have a business presence in Millard County that was financially impacted due to a health order associated with the COVID pandemic.

Grant Eligibility Requirements (ALL must apply):

- 1. Entity must be a registered business in Millard County with an active business license as of April 1, 2020. Exception for a home business that does not require a business license and faith-based organizations.
- 2. Entity must be a For-profit or Non-profit business in good standing with the Utah Division of Corporations
- 3. Business must be current on property taxes through April 1, 2020, if the business owns property.
- 4. Business must have incurred a business loss from April 1 through November 15, 2020 as a result of interruption caused by required closure as the result of the public health order, closed voluntarily to promote social distancing measures or decreased customer demand as a result of the COVID-19 public health emergency.
- 5. Business must operate with less than 500 employees.
- 6. Business is not a publicly traded company. Exception given for a franchise owner with a business that is locally owned.

Grant Funding Preferences

The selection committee will review the submitted applications to determine recipients and grant amount. The following preferences will be a factor, but not limited to, in the determinations and are listed in order of priority.

- 1. Business experienced interruption caused by a required closure (examples: dine-in restaurants, health club, gymnastics or dance studio)
- 2. Business experienced interruption caused by decreased customer demand as a result of the COVID-19 public health emergency (example: hotel)
- 3. Business experienced interruption caused by voluntary closure or partial closure to promote social distancing measures (example: retail store)
- 4. Business made efforts to comply with the public health orders from the State of Utah and Central Utah Public Health Department.
- 5. Priority will be given to businesses with higher business losses attributed to the public health orders. 6. Preference will be given to a business that has not received other recovery grant funding.
- 7. Preference will be given to a business with a storefront versus a home based business.





Grant Request: \$1,000 to \$10,000 or more depending on need. Be specific in your request and how funds will be used if awarded.

Grant Submission Deadline: Friday, November 15, 2020; 5pm MST

Documentation is required to show business expenses incurred from April 1 through June 30, 2020 in the amount of at least the request of the grant. Grants must be used to reimburse for regular business expenses such as utilities, rent, payroll, payroll taxes, employee health benefits, insurance, improvements to building to encourage social distancing, PPE, etc.

Applicant will submit a W-9 form. The grant award will likely be taxable and reported as income by the awarding entity. Applications will be accepted by email to bsmith@co.millard.ut.us or by mail to:

Millard County Auditor's Office 50 South Main Fillmore UT 84631

Grant awards will be from \$1,000 to \$10,000 or more based on the preferences listed in the application; number of applications received and grant funding available.





MILLARD COUNTY SMALL BUSINESS ECONOMIC RECOVERY GRANT

APPLICATION - Grant 2020						
The Small Business Economic Recovery Grants are intended to assist businesses that have been negatively affected by the COVID-19 epidemic. Businesses may apply for their losses to be covered by these grants, and all awards are only to be used for incurred expenses. Applications will be processed by the <i>Economic Development</i> Office of Millard County. Funds will be awarded at the discretion of the selection committee until the funds are depleted.						
I request a total of \$ in grant funding to cover business costs incurred as a result of business interruption caused by health orders (between \$1,000 and \$10,000 or more).						
The following documentation must accompany this application:						
 Receipts of business expenses in the amount at least totaling the amount of grant requested. Receipts must include business expenses incurred from April 1 to September 30, 2020 such as utilities, rent, employee health benefits, insurance, improvements to building to encourage social distancing, PPE, etc. W-9 form for applying entity 						
ENTITY INFORMATION						
Business Legal Name:						
Business Trade Name (DBA): Business Address:						
	State:		ZIP:			
City: Mailing Address (If different):	State.		ZIF.			
City: State:			ZIP:			
EIN / SSN:	State.		ZII .			
LIIV / JJIV.						
PRINCIPAL CONTACT INFORMATION						
First Name:		Last Name:				
Title:		Email:				
Work Phone:		Mobile:				
 I own a registered business in Millard County with a business license as of April 1, 2020. My business license is with (check one): Millard County City or Town within Millard County (Please write): I am exempt from a business license with my home business and I am in good standing with Utah Division of Corporations Non-for-profit entity 						
☐ Faith-based organization						



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2.	At my business location (check two): □ I operate my business out of a storefront □ I operate a home business □ I am the property owner where my business is located and I am current on my property taxes through April 1, 2020 □ I lease or rent
3.	I incurred a business loss from April 1 through September 30, 2020 as a result of (check all that apply): My business experienced interruption caused by required closure as the result of the public health order My business was closed voluntarily to promote social distancing measures My business was affected by decreased customer demand as a result of the COVID-19 public health emergency
4.	I operate a small business with the following number of employees in Millard County: As of April 1, 2020: full-time employees (including owner) part-time employees As of September 30, 2020: full-time employees (including owner) part-time employees
5.	My business is: ☐ A franchise owner with a business that is locally owned
	A franchise owner with a business that is locally owned
6.	Date Business Established:
7.	My business experienced an economic loss from April 1 to September 30, 2020.
	a. Estimated gross business revenue from April 1 to September 30, 2019 \$
	b. Estimated gross business revenue from April 1 to September 30, 2020
	c. Estimated economic loss as a result of COVID crisis and public health orders ('a' minus 'b'): \$
	Businesses that do not show a revenue loss during this time (comparing 2019 to 2020) are not eligible for this recovery grant. Exception for a first-year business or explained hardship.



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Grant amount received \$ 9. Comments or other hardship considerations for the selection committee to review:	of the disaster Check all that Economic Infunds (adva Payroll Prof State busin BEAR recov	plied for and received the following compensation from other sources as a result 2020. These amounts do not include loans, only grant awards. pply: fury Disaster Loan (EIDL) funds. Amount received in grant face) \$ ection Program (PPP) / SBA. Grant amount received (forgiven) \$ est recovery grant. Grant amount received \$ for grant by Millard County. Grant amount received \$ for GOVID recovery. Name of grant Grant amount received \$	- -
		Grant amount received \$	_
	9. Comments or	ther hardship considerations for the selection committee to review:	
10. If grant is awarded, explain what grant funds would be used for: (Required)	10. If grant is awa	ded, explain what grant funds would be used for: (Required)	

Acceptance of the Grant Agreement by Business Owner

I authorize the *Millard County* or its designee to verify the information provided in this application and the accompanying documentation of my business expenses and income. I agree that an audit may be performed to verify the information and representations set forth herein. I have read and agreed to be bound by this grant agreement for accepting Coronavirus Relief Fund monies from Millard County. I affirm that the documentation provided is correct and the figures set forth herein are actual business expenses and income incurred from April 1,2020 to September 30, 2020. I agree to retain documentation related to this application and to any uses of the funds, including but not limited to invoices, sales receipts, payroll expenditures, income and bank statements, for a period of not less than 3 years. I have read and understand the eligibility requirements for accepting this Small Business



Name:

Signature:

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Economic Recovery Grant funded through Coronavirus relief fund monies from Millard County. I am authorized to submit this application and accept this grant on behalf of the business named in this application. Funds provided through this agreement and applications are considered government financial assistance. If audit findings determine that any funds were obtained or expended by the recipient in violation of this program or application I agree to make full repayment of those funds.

financial assistance. If audit findings determine that any funds were obtained or expended by the recipient in violation of this program or application I agree to make full repayment of those funds.

Knowingly and willfully providing false information for the purpose of obtaining these public funds is a violation of law and could subject you to fines, imprisonment, or both.

I declare under criminal penalty under the law of Utah that the foregoing is true and correct.

Signed on the ______ day of ______, 2020.

I have included the following documentation:

Receipts of business expenses in the amount at least totaling the amount of grant requested W-9 form

Signature of applicant:

Name: Title:

Approval of Grant Award

Entity:

Grant award amount:

Title:

Date: