

## **CITY OF ATTICA EMERGENCY RELIEF LOAN PROGRAM**

### **Goal:**

The purpose of this economic development program is to provide financial relief to small, for-profit businesses directly affected by the COVID-19 pandemic and the resulting Executive Orders from the State and Federal governments and local Emergency Ordinances.

### **Eligibility:**

- Must be physically located in the corporate limits of the City of Attica.
- Must be able to demonstrate that it was significantly impacted by the pandemic.
- Must have 5 or fewer employees.
- Must have been in operation for at least 6 months.
- Must have no current property tax liens or legal judgments.
- May not be part of a national or regional chain.
- Application must be submitted by the business owner.

### **Loan Program Guidelines:**

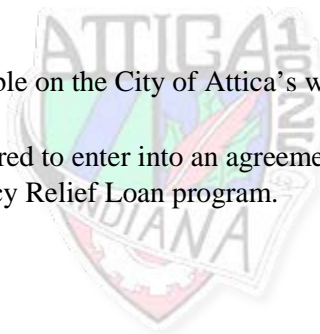
- Maximum forgivable loan amount: \$2,000
- Maximum reimbursed to the business per month: \$1,000
- Interest: 0%
- Forgivable loans can be used for rent or mortgage payments, utilities, insurance, property taxes or other approved business-related expenses.
- Business-related expenses incurred after March 16, 2020 are eligible for reimbursement.
- The application window will be open beginning Monday, April 27 and will close Wednesday, July 1, 2020.
- Applications may be submitted at the City Hall.
- In addition to the application, business owners must submit:
  - W-9
  - Profit and Loss Statements for 2019 and Q1 of 2020

### **Repayment:**

If a business ceases operation or relocates its principal operations outside the City of Attica with one year after the execution of the loan agreement, repayment will be required.

### **Other Terms:**

- Online applications are available on the City of Attica's website and the City of Attica's Main Street Website.
- Approved applicants are required to enter into an agreement with the City of Attica to participate in the City of Attica Emergency Relief Loan program.



**APPLICATION FOR COVID-19 RELIEF PROGRAM**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Title: \_\_\_\_\_

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

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

Contact Name: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

Monthly Rent/Mortgage: \_\_\_\_\_ Monthly Utilities: \_\_\_\_\_

No. of Full Time Employees: \_\_\_\_\_ No. of Part Time Employees: \_\_\_\_\_

No. of Business Locations: \_\_\_\_\_ Is the business part of a national or regional chain? (Yes / No)

How long has your business operated at its current location? \_\_\_\_\_

**Please attach additional pages as needed to answer the following questions.**

Please give a brief statement of how your business has been impacted by COVID-19 (e.g. complete closure, partial shutdown to meet COVID-19 guidelines):

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What additional expenses has your business incurred as the result of the COVID-19 pandemic? (E.g. maintaining employees on payroll, purchasing additional gloves, offering free delivery which incurred employee and mileage costs, etc.)

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Are you applying for or have you received other funding (grants or loans such as the Paycheck Protection Program)? Please explain. \_\_\_\_\_

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Please give a brief statement of how relief funds will be used to benefit your business and/or your employees: \_\_\_\_\_

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How much money are you requesting from the City of Attica COVID-19 Emergency Relief Fund? Please consider short-term needs first.

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How soon would you need the loan?    \_\_\_ in 2 weeks    \_\_\_ in 1 month    \_\_\_ in 2 months

By submission of this application, the applicant hereby agrees the for-profit business meets all of the following requirements:

- The business is physically located within the corporate limits of the City of Attica.
- The business has 5 or fewer employees.
- The business has been in operation since September 16, 2019.
- The business has no current property tax liens or legal judgments against it.
- Funds provided by this program will not be used for salary or wages.
- I agree to document and report the results that come from my receipt of City of Attica relief funds.
- I have attached 2019 W-9 and a profit and loss statements for 2019 and for Q1 of 2020 to this application.
- I, the undersigned, have the authority to submit this application on behalf of the business.

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

*After completing the application, please keep a copy for your records. Attach a copy of the application, 2019 W-9 and profit and loss statements for 2019 and Q1 of 2020. Please drop these materials in the utility dropbox outside the Attica City Hall, 305 E. Main St.*

