



Economic Development Authority  
Administration Office, Room 218  
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The Patrick County Board of Supervisors and the Economic Development Authority would like to make all citizens aware of the newly formed Patrick County Small Business Relief Fund. This grant program has been created to help businesses that have been negatively affected by the COVID-19 pandemic. The first round of applications are due on **September 30, 2020**, with grant funds being made available to small businesses of 50 or fewer employees. The Board of Supervisors has allocated \$300,000 to this program with funding being provided from the Coronavirus Relief Fund under section 601(a) of the Social Security Act, as added by section 5001 of the CARES Act.

All businesses are encouraged to review eligibility requirements set forth in the application and contact the Patrick County EDA with questions.

### **Eligibility Requirements**

To be considered for the grant, a business must meet all the following requirements:

- The applicant must be a for-profit business physically located in Patrick County.
- Business must have been negatively impacted or interrupted as a result of the COVID-19 pandemic. Examples of negative impacts include revenue loss, reduced sales, closure or suspended operation, and/or employment decline.
- Business must have been open to the public and demonstrate active sales as of March 1, 2020.
- Businesses within the Town of Stuart, must have an active business license as of March 1, 2020.
- Business must be current on all local taxes, licenses, permits, and any associated fees.
- Had 50 or fewer employees as of March 1, 2020.
- Is not a franchised business.
- Home based businesses are eligible.

### **Ineligible applicants and expenses include, without limitation:**

- Individuals
- Non-profit organizations
- Sponsorship for conferences, golf tournaments, or other fund raising events
- Construction for buildings and/or remodeling projects not specifically related to the prevention and spread of COVID-19
- Capital campaigns
- Tax payments

### **Important Dates:** *(REV 8/24/20 – Application deadline extended)*

- Applications Open: August 18, 2020
- Application Deadline: September 30, 2020 by 5:00 PM

**The following expenses are eligible:**

- Payroll support, including paid sick, medical, or family leave, and costs related to the continuation of group health care benefits during those periods of leave.
- Employee salaries.
- Mortgage payments, rent, and utilities.
- Interest payments for any business loans from national or state-chartered banking, savings and loan institutions, or credit unions, that were incurred before or during the emergency.
- Eligible personal protective equipment, cleaning and disinfecting materials, or other working capital needed to address COVID-19 response.
- Inventory losses associated with lack of sales due to the pandemic.
- Insurance expenses related to increased coverage costs.

**The following expenses are ineligible:**

- Paying dividends and bonuses
- Disbursements to owners except when directly related to performance of pandemic related services
- Repayment of stockholder/principal loans
- Expansion of facilities or acquisition of fixed assets not directly related to COVID-19 response
- Repair or replacement of physical damage
- Refinancing debt
- Pre-paying or paying off loans
- Relocation expenses
- Anything being reimbursed by other federal or state funds.

**Recommended Documentation:**

For Business and Ownership Verification:

- a. All businesses will be cross-referenced with the State Corporation Commission - Clerk's Information System (<https://cis.scc.virginia.gov/>); therefore, please check that the Business Name & ID are correct on the application. *REV 8/24/20 – Sole Proprietorships or other businesses not registered with SCC may submit alternative documentation to prove existence.*
- b. A Commonwealth of VA Substitute W-9 form will be required for distribution of funds. A W-9 form is attached to this application or can be found at:

[https://www.doa.virginia.gov/reference/CVG/W9\\_COVSubstitute.pdf](https://www.doa.virginia.gov/reference/CVG/W9_COVSubstitute.pdf)

For Expenditure Claims:

- a. EMPLOYEES: The grant amount will be based on the number of full-time-equivalent (FTE) employees for the business. The Employer's Quarterly Tax Report (FC-20) for the first quarter (January – March) of 2020 must be submitted. Submission of additional FC-20 reports for 2019 & 2020 are recommended if they show significant jobs loss numbers.

*REV 8/20/20 - The business must be able to demonstrate hours worked by each employee. Internal or third party quarterly Payroll reports are recommend with sensitive information being redacted. A Business Owner will be counted as 1.0 FTE in the event that Payroll documentation cannot be provided or Business Owner receives no compensation.*

- b. LOSS of REVENUE: The Applicant can show proof of reduction in revenue. Documentation of sales tax filings or transient occupancy tax filings for 2019 & 2020 are encouraged. Profit and Loss statements for 2019 & 2020 comparing similar time periods (ideally April – June) will be accepted. Applicants showing more than 20% reduction in revenue will not require additional documentation.
- c. LOSS OF NET INCOME: The Applicant can show proof of reduced income. Profit and Loss statements for 2019 & 2020 comparing similar time periods (ideally April – June) will be accepted. Applicants showing more than 20% reduction in net income will not require additional documentation.
- d. COVID-19 REIMBURSEMENT: The Applicant can be reimbursed for expenses incurred during the declaration of the pandemic. All reimbursable expenses must have occurred after March 1, 2020 and a cleared check or receipt of paid invoice must be included with the application. Eligible reimbursements include:
  - a. Payroll checks or paystubs
  - b. Personal protection equipment (PPE)
  - c. Cleaning supplies
  - d. Telework equipment (including laptops)
  - e. Professional cleaning services
  - f. Rent or lease agreements
  - g. Utility bills
  - h. Mortgage statements
  - i. Other costs to substantiate eligible COVID-19 expenses incurred to continue operations or re-open a small business

**Patrick County  
Small Business Relief Fund  
Grant Application**

**I. APPLICANT IDENTIFICATION AND CONTACT INFORMATION**

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

Sole Proprietorship    Partnership    Limited Liability Corporation    Corporation    Other: \_\_\_\_\_  
\_\_\_\_\_

Virginia SCC Entity ID / Business License No.: \_\_\_\_\_

Number of Full-Time- Equivalent (FTE) Employees as of March 1<sup>st</sup>, 2020: \_\_\_\_\_

Physical Address of Business: \_\_\_\_\_

Mailing Address (If Different): \_\_\_\_\_

Owner/Operator's Name: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone: (Mobile) \_\_\_\_\_ (Day) \_\_\_\_\_ (Night) \_\_\_\_\_

**Check to confirm that you have completed the IRS form W-9 included with the application packet to submit with your application. Your completed W-9 will be maintained separately from the application to protect against disclosure of your FEIN or SSN. It is required to determine whether an IRS form 1099 will be required if your company receives a grant.**

**II. BUSINESS DESCRIPTION:**

Short description of your business:

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

**III. GRANT AMOUNT**

\_\_\_\_\_ FTE Employees \* \$800 per FTE = \$ \_\_\_\_\_ (Maximum of \$8,000)

**IV. COVID-19 IMPACTS TO YOUR BUSINESS**

- Business closure
- Reduced hours of operation
- Employee layoffs
- Revenue decline
- Increased operating costs (e.g. employee paid leave)
- Access to capital to address increased costs
- Inability to respond to home-delivery requests
- Interrupted supply/delivery
- Employee absenteeism
- Inability to serve customers
- Decreased customers
- Other: \_\_\_\_\_

**HOW HAS COVID-19 NEGATIVELY IMPACTED YOUR BUSINESS?**

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**V. OTHER**

Describe any specific significant financial losses that COVID-19 has caused you. Include amount of loss and any supporting documentation.

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**Other grant applications**

Has your business applied for grant or loan support for COVID-19 impacts from any sources (federal, state, local, or private)?

Yes \_\_\_\_\_ No \_\_\_\_\_

Examples: Payroll Protection Program or EIDL through Small Business Administration. Provide a detailed list of funding received or applied for, and attach additional pages as needed

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**VI. INTENDED USE OF GRANT FUNDING:**

How do you intend to use grant funding if awarded to you?

- Reimburse costs of business interruption
- Reimburse expenses related to COVID-19
- Pay delinquent bills
- Pay current bills
- Restore employees
- Implementation of new practices
- Remodeling or construction to decrease risk of spread of COVID-19, if so, please provide a description below
- Purchase of PPE and/or sanitizing products
- Other, please describe: \_\_\_\_\_

If you would use the funds to reimburse expenses previously incurred, please provide receipts and itemize your reimbursement request.

## TERMS AND CONDITIONS

1. The submission of an application for the Grant constitutes an unconditional agreement to, and acceptance of these Terms and Conditions. The Applicant is responsible to ensure his or her familiarity with these Terms and Conditions.
2. By submitting this Application, Applicant gives permission and waives confidentiality of tax information concerning Applicant's tax payment status so that the County Treasurer may verify to the Grant Review Committee (Committee), Patrick County (County), and the Economic Development Authority (EDA) of Patrick County any tax payment status of Applicant.
3. The funds requested in this application are necessary to continue the ongoing operations of the applicant. Funds will be used by Applicant between August 10, 2020 and December 30, 2020, for the purposes as described in the application.
4. Applicant plans to maintain its existing operations in Patrick County for at least six months after the receipt of grant funds. If Applicant moves its business outside of Patrick County or otherwise ceases its operations in Patrick County within the six months after the receipt of grant funds, the Applicant shall return to the EDA the full amount of the grant funds awarded to Applicant within 30 days of written NOTICE from the EDA.
5. Applicant agrees that information submitted will be subject to the requirements of the Virginia Freedom of Information Act, which may require public disclosure. If Applicant wishes any information to be considered for exception as proprietary information, Applicant must clearly identify such documents or information. Applicant's request will be honored to the extent permitted by law.
6. Applicant agrees, if requested, to submit to an audit to confirm that grant funds awarded to Applicant, if any, were used as stated in the application.
7. Applicant agrees to reimburse the EDA, in full, within 30 days of written NOTICE from the EDA if all commitments made in this application are not met.
8. Applicant acknowledges that the Grant Review Committee has established criteria for qualified Applicants and applications, and that Applicants and applications that do not satisfy the criteria shall not be considered. Applicant agrees that the determination of whether an Applicant or application satisfies the criteria is solely in the discretion of the Committee and that all such decisions are final and are not subject to appeal.
9. Applicant agrees that the determination of whether Applicant receives a grant award is solely in the discretion of the County of Patrick and the Economic Development Authority of Patrick County and that all grant decisions are final and are not subject to appeal.
10. In consideration of the time, expertise, and other resources provided by the County, the Grant Review Committee, and the EDA, the Applicant, to the full extent permitted by law, by submitting an application voluntarily releases the County, the Committee, the EDA, and all individuals who comprise the foregoing from any and all claims, losses, damages, injuries, fines, penalties, costs (including court costs and attorney's fees, charges, liability, or exposure), however caused, resulting from arising out of or in any way connected with this application and shall hold them harmless from any claims, losses, damages, injuries, fines, penalties, costs (including court costs and attorney's fees, charges, liability, or exposure), however caused, resulting from arising out of or in any way connected with this application.



**Application Certification**

The undersigned certifies, to the best of his or her knowledge and belief that:

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant or Federal loan, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant or loan.
2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant or loan, the undersigned shall complete and submit Standard Form - LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into.

Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure. I hereby submit this application and I fully understand that any false statement on this application may subject the applicant to criminal prosecution. I also understand that additional information may be required to complete the application. By signing this application

I am authorizing the County of Patrick, on a confidential basis, to obtain any information it deems necessary to verify the information on this application as well as information needed to make a determination of grant eligibility.

I affirm that all the information given herein is true and accurate to the best of my knowledge.

I acknowledge that I will be required to submit receipts for funds expended and to submit to an inspection of the premises to confirm grant funds were expended as stated in this application.

Applicant(s)

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

Authorized Signer: \_\_\_\_\_

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