Small Business Covid-19 Grant Program

This Program has been provided to allow the City of Washington C.H. to assist small businesses throughout the City, with the financial hardship imposed by the COVID-19 pandemic, and to help pay the costs of business interruption required by closures and/or costs suffered to meet guidelines put forth by the Ohio Department of Health in reopening, due to the pandemic. This grant is made possible by the Coronavirus Aid, Relief, and Economic Security Act ("CARES Act"). Assistance is in the form of a grant. All eligibility requirements are in the attached program guidelines and <u>must be met</u> before authorization of funding will be granted. Grants will require repayment only if terms of grant agreement are not met.

1. Contact Information

Business Name			
Business Address			
City			
State			
Zip			
Business Owner's Name			
Business Owner's			İ
Address		 	
City	 	 	
State	 		
Zip		 	
Email Address	 		
Phone Number	 		
EIN or SS# (attach W-9)	 *****	 	
Type of Business (Sole			
Proprietorship, C, S-Corp,			
LLC, General Partnership, LP, LLP, Other)			
Years in Operation; Start			
Date			
Brief Description of	 		
Business			
Are you in Receivership			
or Bankruptcy?			
Are you current on all			
net profit income tax			
fillings? (Please attach from			
page of appropriate IRS			
form.)	 		
Have you submitted for other forms of			
assistance? If yes, please			
explain			
Сурган		 	

2. Employee Information

O. Manufa 16, 2020	
On March 16, 2020,	
how many people did	
your business employ	
(including yourself)?	
How many of those	
employees worked 20 or	
more hours per week?	
Did you issue W-2s for	
the submitted	
employees?	
Have you laid off any	
employees? If yes, how	
many?	
Did you receive a loan	
through the Paycheck	
Protection Program	
(PPP)? If yes, attach	
сору	
Are you current on all	
employee payroll tax	
filings and payments?	

3. Eligible Expenditures (from March 17 – May 31, 2020)

All eligible expenditures must be accompanied by supporting documentation.

Description	COVID-19 Support Reason	Cost
Mortgage/Rent		
Utilities (excluding water and sewer)		
Vehicle/Equipment		
Leases		
Payroll		
Payroll Taxes		
Employee Benefits		
Telework Capabilities		
Cost of PPE, Sanitation		
Supplies, etc.		
Cost of Protective		
Barriers		
All/Any Other		
Expenditures		
	Grand Total of submitted Expenditures	\$

4. Estimated Adverse Impact	
Please provide a brief explanation of what adverse e business:	conomic impacts COVID-19 has/had on this
5. Verification of Reduction of Sales	
Between March 17, 2020 and May 31, 2020, did this sales, greater than 25%, over – same timeframe – of	<u>-</u>
Certifications	
Under penalties of perjury, I declare that I have subrance knowledge and belief, it is true, correct, and complete	
Owner Signature	Date