



## HARRISONBURG BUSINESS RECOVERY GRANT APPLICATION

Harrisonburg Economic Development  
409 S. Main Street  
Harrisonburg, VA 22801  
(540) 432-7701

The City of Harrisonburg, using funding from the federal CARES Act, launched the Harrisonburg Business Recovery Grant (HBRG) to assist businesses in responding to the impact of the COVID-19 crises. Harrisonburg Economic Development is administering the program, with the funds to be disbursed by the Harrisonburg Economic Development Authority. The HBRG offers grants of up to \$10,000, based on the employment total of the business.

Businesses eligible for a Harrisonburg Business Recovery Grant must meet the following requirements:

- Must be a for-profit business entity with a place of business located in the city of Harrisonburg
- Must have been in business on or before January 1, 2020
- Must have had between 1 and 100 full-time employees (or full-time equivalent) as of March 1, 2020
- Must have at least \$25,000, but no more than \$5 million, in annual gross revenues
- Must be able to demonstrate at least a 25% loss in revenue that can be attributed to COVID-19
- The business is locally owned and operated
  - Locally owned franchises are eligible for only one grant regardless of the number of locations in the city
- All taxes and fees to the city of Harrisonburg are current
- Businesses that have already been awarded funds through the Harrisonburg-Rockingham Business Resilience Grant or received a Disaster Impact Loan that was forgiven by the City of Harrisonburg are still eligible to apply, **however**, those qualifying businesses will receive a reduction based on the prior award amount. For example, if a business with 20 employees received a \$5,000 grant/forgiven loan, it would now receive a \$3,000 grant (instead of the full \$8,000).

### Ineligible Applicants

- Businesses that are not locally owned franchises and/or chains that are not headquartered in the city of Harrisonburg
- Independent contractors operating multilevel or network marketing businesses (such as Avon, Mary Kay, Pampered Chef, etc.)

- Independent contractors working on digital platforms (such as Airbnb, Fiverr, Uber, Lyft, Instacart, etc.)
- Home-based businesses
- Banks
- Nonprofit organizations
- Businesses engaged in speculation or investment in rental real estate

### Eligible Uses of Funds

- Employee compensation (including wages and benefits)
- Rent
- Utilities
- Inventory
- The purchase of PPE or physical improvements such as plexiglass barriers that improve the sanitary conditions of the business
- The purchase of equipment and supplies for disinfecting, sanitizing, and deep cleaning
- Other business-critical operating expenses as approved by City's Grant Review Team

### Maximum Grant Amounts

- Grant amounts range from \$4,000-\$10,000 per business, depending on the number of full-time equivalent employees (as of March 1, 2020)
  - 1-3 full-time equivalent employees: Up to \$4,000
  - 4-10 full-time equivalent employees: Up to \$6,000
  - 11-25 full-time equivalent employees: Up to \$8,000
  - 26-100 full-time equivalent employees: Up to \$10,000
- A full-time equivalent employee is based upon 35+ hours worked per week (FOR EXAMPLE: Two part-time employees working 18 hours each = 1 full-time employee)
- The Grant Review Team will have flexibility on grant award amounts based on total number of eligible applications received. However, grant amounts will not exceed maximum levels detailed above.

### Application Review Process

Applications for the HBRG will be accepted beginning August 13th at 8:00am and ending on August 27th at 5:00pm. At that time, all applications will be reviewed for completeness. All fully completed applications, submitted by eligible businesses, will be deemed qualified. If there are more qualified applications than funds, then preference will be given to industries that have been recognized as being the most impacted by COVID-19 including: hospitality and entertainment, retail trade, restaurant and food services, and personal service establishments (such as salons and barber shops).

Only fully completed applications will be considered. Please take time to fully complete all required fields of information and upload necessary supporting documentation. If you have questions or need assistance with your application, please contact us at (540) 432-7701.

Please email your completed grant application and supporting documents to Peirce Macgill at [peirce.macgill@harrisonburgva.gov](mailto:peirce.macgill@harrisonburgva.gov). You may also drop the grant application off in person to Harrisonburg Economic Development at 409 S. Main Street, Third Floor.

**To be considered, your completed application and required supporting documents must be received by Harrisonburg Economic Development by 5:00pm on August 27<sup>th</sup>, 2020.**



## **HARRISONBURG BUSINESS RECOVERY GRANT APPLICATION**

### **Section 1: Business Description**

Business Name:

Business Address:

Business Contact:

Name:

Phone:

Email:

How long has the business been located in the City of Harrisonburg?

Number of Full-Time Employees as of March 1, 2020:

Number of Part-Time Employees as of March 1, 2020:

Number of Full-Time Employees as of August 1, 2020:

Number of Part-Time Employees as of August 1, 2020:

2019 Annual Sales/Business Revenue:

Year to Date Annual Sales/Business Revenue:

Describe your business:

Describe your products/services:

Describe your target market: *(Who are your customers? Where are they located?)*

Explain how your business has been affected by the impact of COVID-19 and the decrease in revenue that your business has experienced.

List other financial assistance that you have received since March 1, 2020.

Please share other information that you would like selection committee to know about your business:

## Section 2: Grant Request Information

Grant Amount Requested (maximum grant amounts are based on the number of full-time equivalent employees):

How do you plan to use the grant funding?

How will these funds help your business move towards stability or sustainability?

## Section 3: Owner Information

Please circle all choices that apply to you:

Male  
Female

Person with disability  
Veteran  
Non-US Citizen

Hispanic or Latino  
Black or African American  
White or Caucasian  
Asian  
American Indian  
Other (please specify): \_\_\_\_\_

## Section 4: Certifications

I understand that I must submit all the documents required for my business to be considered for this grant. Failure to submit all the documents will be considered an incomplete application. Incomplete applications will not be reviewed.

☐ Yes

☐ No

By selecting 'Yes' below, I understand and confirm that these funds will be used for necessary expenditures incurred due to the public health emergency associated with COVID-19, as outlined in the 'Eligible Uses of Funds' section of this application.

☐ Yes

☐ No

#### Certification Statement

I certify that the information above is correct to the best of my knowledge. I authorize Harrisonburg Economic Development to make inquiries as necessary to verify the accuracy of the statements made by me. I have read and understand the terms outlined above. I agree that my business name and grant award amount may be published as a result of submitting this application. I agree to indemnify and hold harmless the City of Harrisonburg, its officers, directors, employees, agents and volunteers from any and all claims, loss or other liability arising from or related to the services that Harrisonburg Economic Development provides before, during, and after the grant review and award process.

***Notice:*** Harrisonburg Economic Development is dedicated to maintaining the confidentiality of all private client information including proprietary business data, business plans, and tax ID numbers. As an organization receiving financial support from state and federal agencies, we may be required to document and share client information with public agencies as a condition of program funding. Such information will be treated as confidential by all parties and shared only to the extent required for program compliance and not for further distribution.

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Owner or Authorized Representative Signature

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Date

#### **Required Documentation Check List**

I have completed and submitted the following as part of my grant application:

- ☐ Copy of your Business License
- ☐ Monthly gross receipts history for the previous 12 months
- ☐ IRS form 941 or VEC-FC-20/21 (only for businesses with 10-100 employees)
- ☐ IRS form W-9 completed and signed
- ☐ Copy of your driver's license or other form of ID

If your grant request is approved, additional documents may be required before the distribution of funds.



# CITY OF HARRISONBURG **ECONOMIC DEVELOPMENT**

409 SOUTH MAIN STREET, HARRISONBURG, VA 22801

OFFICE (540) 432-7701 • FAX (540) 432-7778

## **CERTIFICATION ON EXPENDITURES OF CARES ACT GRANT**

I certify that in compliance with the federal Coronavirus Aid, Relief, and Economic Security (CARES) Act, I will spend all grant funds provided by the City of Harrisonburg by December 31, 2020. I understand that if I do not spend the grant funds by December 31, 2020, the city will request repayment of the grant.

I further certify that I will maintain records documenting the expenditure of the grant funds provided by the City of Harrisonburg.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date