

Legal name of business: _____

DBA (If applicable): _____

Mailing Street Address: _____

Mailing City: _____

Mailing State: _____ Mailing Zip _____

Primary physical address in Prince William County

Street Address: _____

City _____ State _____ Zip _____

Magisterial District: Brentsville

Coles Gainesville

Neabsco Occoquan

Potomac Woodbridge

(If you are unsure which magisterial district your business is located, you can search here: <https://gisweb.pwcgov.org/webapps/quickinfo/> Input your business address into the search, then select General Voting Information. Your magisterial district will be listed in the "Local Election" field.)

Primary Contact

FirstName: _____

LastName: _____

Phone Number: _____

eMail: _____

Business Name: _____

How did you hear about the Small Business Relief

Micro-Grant program:

Search Engine

Twitter

Facebook

LinkedIn

Friend's social media post

Radio

TV

Word of mouth

OTHER: _____

Prince William County business license account number

(if applicable): _____

Prince William County business tangible property

account number (if-

applicable): _____

Is this business current on its Prince William County tax obligations?

Yes

No

What best describes the organization/business type?

Sole Proprietor

Franchise

Partnership

LLC

Other: _____

Corporation

Is your business for-profit?

Yes

No

Provide your Taxpayer Identification Number (TIN)

[Choose ONE of the TIN options and then provide number]:

- Employer Identification Number
- Social Security Number (if Sole Proprietor)
- Individual Taxpayer Identification Number

TIN: _____

How many locations does your business have? _____

How many locations are in Prince William County? _____

What year was the business established in Prince William County? _____

How many employees did you have in Prince William County as of February 28, 2020?

Full-time: _____ Part-time: _____

Furloughed with benefits: _____

How many employees do you have in Prince William County as of May 30, 2020?

Full-time: _____ Part-time: _____

Furloughed with benefits: _____

Total Employees as of February 29, 2020? _____

Business Name: _____

Total employees as of May 30, 2020 ? _____

If you have fewer employees as of May 30, 2020, was this due to:

- Lay-offs
- Temporary Furloughs
- Other: _____

Primary Business Function:

- Arts, Entertainment, recreation
- Childcare, education, instruction
- Construction, engineering, design services
- Distribution, logistics, warehousing
- Finance, insurance, real-estate
- Health and Medical services
- Hotel and Accommodations
- Information Technology, broadcasting, publishing
- Manufacturing
- Personal services (barbers, beauty/nail salons, fitness, dry- cleaning, etc)
- Private household services
- Professional, technical, business services
- Repair and maintenance services
- Restaurant, food services
- Retail
- Social Services
- Transportation
- Other: _____

Please describe the impact of COVID-19 on your business and include any physical or business operation alterations you have made or will need to make for your business to remain viable:

Is your business [check all that apply]:

- Woman-owned Business
- Minority-owned Business
- Service-Disabled Veteran Business
- SWaM Certified Business
- Not Applicable
- Prefer not to answer

What is the current status of your business?

- Open with normal operations
- Open with limited capacity
- Operating virtually
- Delivery/Take out only
- Closed temporarily

If closed or limited capacity, check all that apply:

- State mandate
- Supply chain disruption
- Health and safety concerns
- Workforce availability
- Not enough customer-demand to sustain operations
- Other: _____

Business Name: _____

Did you apply for the SBA's EIDL or PPP loan & grant funds?

- EIDL PPP
- Both Neither

If yes to either, how much: _____

Were you awarded funding?

- Yes No

If yes to either, how have you used the funds? (check all that apply)

- Rent Debt
- Utilities Operating-expenses

Other: _____

How much grant funding are you seeking through this application?

- \$7,500 (for businesses with 3-20 employees)
- \$10,000 (for businesses with 21-50 employees)

How will you spend the funds?

Is the primary location of the business owned or rented?

- Own outright
- Own with mortgage
- Rent

Have you requested or received a rent-reduction or mortgage-deferral at your place of business?

- Yes
- No

What would you need for your business to re-open or resume full operations? (check all that are applicable to your organization)

- State-authorization to re-open
- Rehiring employees
- Creating new marketing campaign
- Working capital
- Revising business plan to new circumstances
- Opening of adjacent businesses
- Resumption of essential supply-chain
- Relaxing of social distance guidelines since successful operation necessitates crowds
- Other: _____

Please email a photo/attachment of your:

- Business Recovery Plan
- Business License
- Small Business Relief Financial Form
- 2018 & 2019 Business Tangible Property Returns
- 2018 & 2019 Business License Application Forms
- IRS Form W-9
- IRS

Business Name: _____

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 for ensuring his or her familiarity with the Terms and Conditions.
2. By submitting an application, the Applicant certifies that it is not under any agreement or restriction that prohibits or restricts its ability to disclose or submit the materials included in the application or otherwise to apply for the Grant.
3. Applicants acknowledge and agree that information (excluding proprietary financial and employee information) submitted by Applicants will be used in the promotion of the Grant and will be displayed on public webpage(s) showcasing selected businesses.
4. The Applicant acknowledges and agrees that the information provided herein may be subject to disclosure, including under the Virginia Freedom of Information Act, Va. Code §§ 2.2-3700, et seq.
5. The Applicant gives permission and waives the confidentiality of any confidential tax information concerning the Applicants tax payment status, licensing status and business revenue information, so that the Prince William County Department of Finance and the Prince William Department of Economic Development may verify the tax payment status, licensing status and business revenues of the Applicant.
6. The Applicant hereby acknowledges and certifies that the information and representations set forth by the Applicant in the application are true and accurate in all respects as of the date of the submission of the application. The Applicant acknowledges that Prince William County and the Industrial Development Authority of Prince William County will make evaluations and awards of Grant proceeds in reliance on the information provided by the Applicant, and that the information and representations set forth by the Applicant are material to the award of the Grant.
7. The Applicant hereby acknowledges that Prince William County and the Industrial Development Authority of Prince William County have established certain criteria for qualified Applicants and applications, and that Applicants and applications that do not satisfy the established criteria shall not be considered. The criteria for qualified Applicants and applications are set out below. Applicant acknowledges and agrees that the determination of whether an Applicant or application satisfies the criteria for qualified Applicants and applications is solely in the discretion of Prince William County and the Industrial Development Authority of Prince William County. The Applicant acknowledges that all grant award decisions are final and are not subject to appeal.
8. The Applicant acknowledges and agrees that in the event the Applicant is awarded a Grant, the Applicant will use the Grant proceeds for the following limited purposes:
 1. Ongoing expenses of the Applicant, such as payroll, rent, insurance or other operating expenses; or
 2. Adaptive costs, such as the purchase of e-commerce equipment/website creation and/or upgrade of an online sales site
 3. If the Applicant uses the Grant proceeds for another purpose, then upon sixty (60) days' notice by the County, the Applicant shall return the full amount of the Grant funds awarded to the Industrial Development Authority of Prince William County

Business Name: _____

9. The Applicant acknowledges and agrees that if the Applicant is awarded a Grant, and if within 90 days of the award the Applicant Terminates the business then, upon sixty (60) days' notice by the County, the Applicant shall return the full amount of the Grant funds awarded to the Prince William County Industrial Development Authority.
10. The Applicant acknowledges and agrees that if the Applicant is awarded a Grant, and if within one year of the award the Applicant moves its principal place of business outside of Prince William County then, upon sixty (60) days' notice by the County, the Applicant shall return the full amount of the Grant funds awarded to the Industrial Development Authority of Prince William County.
11. The Applicant agrees to report in writing to the Prince William County Department of Economic Development, in a form to be provided by the County, every six months for first year on the current status of their business including information on existing employees and revenues.
12. The Applicant agrees to have a monthly update call with representatives of the Prince William County Department of Economic Development or its authorized representatives.
13. The Applicant acknowledges that Grant recipients may be selected from qualified applications through a lottery process. Applications may be preferred in the lottery pursuant to certain criteria. The lottery process and the preference are set forth below.
14. The Applicant acknowledges that the information and representations in the application may be verified by Prince William County and/or the Prince William County Industrial Development Authority. The verification may occur prior or after the lottery. If an application contains inaccurate or incomplete information, or misrepresentations, the application may be rejected. An application rejected prior to a lottery award will not be placed in the lottery. If an application rejected after a Grant is awarded by lottery, but the funds are not disbursed, the Grant funds will not be disbursed and the Grant will be null and void. If an application is rejected after a Grant is awarded by lottery, and the funds are disbursed, then upon sixty (60) days' notice by the County, the Applicant shall return the full amount of the Grant funds awarded to the Industrial Development Authority of Prince William County and the Grant will be null and void.
15. In consideration of the time, expertise and other resources provided by Prince William County and the Industrial Development Authority of Prince William County, the Applicant, to the full extent permitted by law, by submitting an application voluntarily releases Prince William County and the Industrial Development Authority of Prince William County from any and all claims, actions, damages, costs or liabilities of any kind relating to or arising from or in connection with the awarding, advertising, receipt, and/or use or misuse of any Grant or participation in any Prince William Small Business Relief Grant related activities.
16. The Applicant covenants to save, defend, hold harmless and indemnify the County, and all of its officers, departments, agencies, agent, and employees (Collectively the "County") from and against 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.

Business Name: _____

Authorized Signature

I certify that I have read and understand and am authorized to complete and submit this application on behalf of the Applicant. I verify that the statements contained herein are true, accurate, and complete.

I acknowledge that false and inaccurate statements made on the application are grounds for immediate rejection of the application.

First Name: _____

Last Name: _____

Email: _____@_____

Signature: _____

I agree to sign and create a legally binding contract between the other party, and myself, or the entity I am authorized to represent

*****NOTE: You must also complete the attached Small Business Relief Financial Form*****

Email completed and signed application with attachments to Mweatherly@pwcgov.org or drop off a hard copy with attachments at Department of Economic Development 13575 Heathcote Blvd Suite 240, Gainesville between 9 a.m. and 5 p.m., on Monday and Tuesday (June 8-9).

Business Name: _____

Prince William Small Business Relief Micro-Grant

Page 1: General Information

Your Name		Please enter information directly
Business Name		
Business License PWC Account Number		
PWC Business Tangible Property Account Number		
Email		
Physical Address		
City		
Zip Code		
Number of Employees		

Financial Summary

Average Wage (Payroll ÷ Employees)	\$ -	Please enter information directly
Monthly Rent	\$ -	
Monthly Utility	\$ -	
Monthly Insurance	\$ -	

COVID REVENUE IMPACT INDICATORS

Is business seasonal?		Please enter information directly
Does Business have gross receipts less than \$1,000,000?		
Has your business experienced more than a 25% revenue loss?		

Prince William Small Business Relief Micro-Grant

Business Name

Instructions: Please enter the 12-month revenue, expenses, and taxable income totals for fiscal years ending in 2018 & 2019. Enter 1-month revenue, expenses, and taxable income totals for January to April of 2020. Only complete highlighted boxes only.

Page 2: Financial Analysis

		Fiscal Year	Fiscal Year	By Month (Actuals) in 2020			
		2018	2019	January	February	March	April
Income Statement	Revenue and Income by Year						
	Revenue	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	Less Total Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	Taxable Income	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Financial Position	Calculation of Revenue Loss (FOR GRANT REVIEWERS- DO NOT FILL)						
	Change in revenue from previous period		\$ -		\$ -	\$ -	\$ -
	Percent change from previous period						
	Percent change from previous year rev./month						
	Average/mo:		\$0				

Prince William Small Business Relief Micro-Grant

Business Name

Instructions: Please fill in the highlighted yellow boxes only.

Page 3: GRANT USE OF FUNDS

What Operations will be covered with Small Business Relief Micro Grant?

Expense	Description	Estimated Cost
Rent or		
Payroll		
Benefits		
Utilities		
Marketing		
Vendor		
Equipment		
Supplies		
Other		
Other		
Grant Total (should total \$7,500 or \$10,000)		