



CLARK COUNTY
OHIO

COMMUNITY & ECONOMIC DEVELOPMENT

Clark County Small Businesses & Non-Profit CARES Grant

Application

Please fill out this application in its entirety. Failure to provide completed application materials may result in a denial of your request.

Legal Business Name (Include dba in parenthesis):

Majority Business Owner's Name:

Business Street Address (No PO Box)

Address Cont.

City:

State:

Zip Code:

Majority Business Owner's Phone:

Majority Business Owner's email:

Year Business Was Founded:

Number of full time employees as of March 15, 2020:

Average monthly revenue prior to the COVID-19 pandemic:

Average monthly revenue during the COVID-19 pandemic:

Business type:

Sole Proprietorship

Partnership

Corporation

Is your business:

Minority-Owned

Woman-Owned

Both

Neither



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Please provide a brief description of your business, and some of the products or services you offer:

Federal Tax ID- 9-digit number:

DUNS- 6-digit number:

NAICS 6-digit number:

Other Sources of Funding & Offsetting Expenses:

Has your business requested funding, including grants and loans of any kind, from other sources (SBA Loans, the Paycheck Protection Program, local jurisdiction grants or loans, etc.) **OR** has your business been approved for a COVID-19 related business interruption insurance claim since March 1, 2020 relating to a financial hardship resulting from COVID-19?

Yes

No

If "yes", please list all other funding sources applied to, the corresponding amounts, and the status of those applications



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Grant Use, Allowable Business Expenses (Salaries and Benefits for Employees, Rent, Mortgage, Utilities, and Business Insurance)

Please summarize your current situation and how the COVID-19 Pandemic has impacted your business (impact to revenue, laying off employees, business closures, etc.)

Please list your COVID-19 related business expenses (masks, gloves, partitions, hand sanitizer stations, etc.)
Provide receipts/invoices



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DISCLOSURES:

Is the organization, business, or a listed owner delinquent on any federal, state, or local taxes or assessments; direct or guaranteed loans; leases; contracts; grants; child support payments; or any other obligations?

Yes

No

If yes, explain:

Does the organization, business, or a listed owner have any outstanding judgements, tax liens, pending bankruptcy proceedings, pending lawsuits against them, or criminal proceedings?

Yes

No

If yes, explain:

Does the owner, owner's spouse, or household member work for, or serve in any official capacity for Clark County, or a Clark County Municipality?

Yes

No

If yes, explain:

Does your organization or business have less than \$5,000,000 in gross revenue?

Yes

No



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List of reimbursable expenditures. Provide documentation (receipts / invoices)

Expenditures:

Employee Salaries / Benefits:

Mortgage/Rents:

Business Insurance:

Electricity:

Gas:

Water:

Sewer:

Business Internet:

Business Phone:

Personal Protective Equipment or Other

COVID-19- Directly Related Costs:

TOTALS:



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Disclaimer:

Application for the Clark County Small Business CARES Grant DOES NOT GUARANTEE award of funding. The total amount awarded will be based on funds available. It is the sole responsibility of the Applicant to determine or seek independent advice to determine tax implications to the Applicant and its Owners. Please confirm your understanding of the these disclaimers by initialing and dating in the box below:

Certification:

By typing/signing your full name in the box below, you are certifying that all of the information provided in this application and attached materials is true, and accurate. You are also agreeing to assist in the verification of the information provided in this application, and provide additional information, if requested.

Additionally, by typing/signing your full name in the box below, you are agreeing that your business has not received any Paycheck Protection Program (PPP) assistance for the items that you are requesting reimbursement for, and that you have not received any other federal, state, or local financial assistance relating to these particular expenses.

Misuse of grant funds will result in criminal and/or civil action being taken against you. By typing/signing your full name in the box below, you hereby understand that you may be liable to repay these funds if an investigation determines misuse.

Please ensure you attach all required documents to your application. If submitting via email, please send all documents in one email.

Please email or drop off your application to the following:

J. Alex Dietz- Economic Development Coordinator

Clark County Community and Economic Development

3130 E. Main St Suite 1-A

Springfield, OH 45505

jdietz@clarkcountyohio.gov

937-521-2185