



Grants & Community Development
 300 S. Church St. • P.O. Box 1845
 Jonesboro, Arkansas 72403-1845
 City: (870) 932-1052 • Dept. Fax: (870) 933-4626

**SMALL BUSINESS EMERGENCY GRANT
 COMMUNITY DEVELOPMENT BLOCK GRANT COVID-19
 (CDBG-CV)**

Proposal Deadline: August 18, 2020 by 4:00 p.m.

BUSINESS: _____

GRANT REQUEST: _____

FUND REQUEST \$ _____

NOTE

CDBG-CV (COVID-19) funds available for activities within the city limits of Jonesboro.

Please use the assembly checklist. Incomplete application packets or applications without adequate information provided will be eliminated immediately without exception.

Funding will be available when HUD releases funds to the City of Jonesboro.

FUNDING ELIGIBILITY

- Small business for-profit with 20 employees or fewer (must have at least 3 employees including owner). No startups
- Established small business for over 2 years with COJ Privilege License
- Must create or retain at least one part-time or one full-time permanent job
- **Must have a DUNS number and be registered with the System for Award Management (SAM) – To register: <https://www.sam.gov/SAM/>**
- Provide proof of business being affected by COVID-19

SMALL BUSINESS EMERGENCY GRANT OVERVIEW

The City of Jonesboro received an additional Community Development Block Grant Program (CDBG) allocation, the CDBG-CV. This allocation of \$362,524 is meant to support COVID-19 related response and prevention efforts as part of the Coronavirus Aid, Relief, and Economic Security Act (CARES Act). The City of Jonesboro is allocating funding for Small Business Emergency Grants with the goal of keeping local small businesses viable during the global pandemic. Grant assistance can be applied for payroll, personal protective equipment (PPE), rent and utility payments.

REQUIREMENTS

All grant awarded businesses are required to enter into an agreement with the City of Jonesboro and comply with HUD regulations Title 24 CFR Part 570, under Urgent Needs Guidelines, and other applicable local, state, and federal laws.

Applicant must comply with all the submission requirements and assembly checklist. Failure to do so will result in immediate disqualification – with no review or comment.

Eligibility

- Small business for-profit with 20 employees or less (must have at least 3 employees including owner).
- Established small business for over 2 year with COJ Privilege License.
- There is a \$1,000 minimum and a \$10,000 maximum funding request. Amount varies according to individual business needs during the pandemic.
- Must result in the creation or retention of at least one part-time or one full-time permanent employment for LMI persons. This is the activity.
 - Job Creation: recipient must document that at least 51% of the jobs will be held by, or will be available to, LMI persons. For further LMI determination, the employee can reside in LMI census tract where at least 70% of its residents are LMI.
 - Job Retention: funded activities that retain jobs, there must be sufficient information documenting that the jobs would have been lost without the grant assistance and that at least one of the following applies to at least 51 percent of the jobs:
 - The job is held by a LMI person;
 - The job can reasonably be expected to turn over within the following two years and steps will be taken to ensure that the job will be filled by, or made available to, a LMI person.
 - A person was previously employed in this position but had to be laid off or furloughed due to the pandemic.

- Provide proof of business being affected by COVID-19 (following state emergency declaration) with year-to-date profit and loss statement supported by documentation of annual revenue stream.
 - Show loss of income from March 11 – current date with business bank statements.
 - Show furloughs or laid off employees.
 - Proof of PPE purchases or such expenses.
- If business applied or received other grants, loans, or any assistance for COVID-19 relief, the business must provide proof of funding and cannot apply for the same assistance.
- Employee annual gross income cannot exceed \$33,150 per HUD Income Limits.

Illegibility

- Businesses not registered to SAM.gov.
- Businesses with less than three (3) employees. No startups.
- Homebased businesses may not request for utility and rental/mortgage payments assistance. Limited to PPEs and Payroll assistance only.
- Business with political and religious affiliation and endorsement.

Application requirements

- Include typed proposal with narratives to respond to all questions provided.
- Complete application and signed statements.
- Copies of documents showing proof of eligibility (listed above, i.e., SAM registration).
- Job description for position to be created or retained, include pay rate and work hours.
- Copies of last two business and personal (2018 & 2019) tax returns and bank statements since February 2020.
- Copies of business license, W-9 form, and employee W-4 form for job created or retained; include state identification of business owner.

Other requirements to follow if grant is awarded

Other required specification based on business and fund requested will apply.

- Subrecipient (grant recipient) must abide by the Subrecipient Agreement.
- Job created or retained must remain filled for at least 12 months from time grant was awarded.

- At least 51 percent of employees must be LMI (below 80% of Jonesboro Median Income).
- Subrecipient must use equal opportunity hiring practices. Evidence of outreach efforts to fill vacancies with minorities and females must be kept on file.
- Subrecipient must provide, to the greatest extent feasible, opportunities for job training and employment to LMI persons in connection with projects in their neighborhoods.
- Subrecipient must write and implement job descriptions (for positions related to the Agreement) and employee/volunteer hiring policy. Resumes, applications and documents must be kept on file.
- Subrecipient must submit timesheets, paystubs and proof of payment for the job created or retained.
- Payments can be made as Advance or Reimbursement Payments. Report must be submitted to have payments processed (form will be provided). All payment requests must include copy of receipt, bill, or invoice and proof of purchase or payment (i.e., bank or credit card statement).

APPLICATION

City of Jonesboro CDBG Objective

National CDBG Objective:
Benefiting Low-and-Moderate-Income (LMI)

National Benefit Objective: (refer to Requirements for details)

Job Creation Job Retention

Grant Request Amount \$ _____ **Business Capital (debt, equity) \$** _____

Business Information

Name: _____
Legal Name of Business

Address: _____
Street Address *Suite #*

_____ _____ _____
City *State* *Zip Code*

Phone: _____
Direct Line *Email*

Contact Person: _____
Name *Title*

DUNS Number: _____ Registered with SAM? Yes No

EIN Number: _____ Business Start Date: _____

Business legal entity: Corporation Limited Liability Company (LLC)
 Sole Proprietorship Other _____

Prior to COVID-19
Number of employees (including owner (s)):
Full-time: _____ Part-time: _____

Current - during COVID-19
Number of employees (including owner (s)):
Full-time: _____ Part-time: _____

Prior to COVID-19
Monthly Expenses \$ _____
Monthly Revenue \$ _____

Current - during COVID-19
Monthly Expenses \$ _____
Monthly Revenue \$ _____

Fixed Monthly Expenses (grand total from below) \$ _____
Rent/Mortgage \$ _____ Payroll \$ _____ Utilities (average)\$ _____

Did you receive any business assistance (grants / loans) in 2019? Yes No
If so, what type of assistance, amount (\$), and date received? _____

Have you applied / received any business assistance (grants / loans) for COVID-19 relief? Yes No

If so, what type of assistance, amount (\$), and date received? _____
_____.

Have you declared/filed bankruptcy: Personal: Yes No Business: Yes No

If yes, was the bankruptcy dismissed or discharged? _____ Date: _____

Do you have any lawsuits or legal proceedings against yourself or your business?

If so, what type of assistance, amount (\$), and date received? _____
_____.

Brief Business

Description: _____
(A detailed description will be attached as Proposal Narrative)

_____.

Title of permanent LMI job created or retained? _____ Full-time Part-time

Pay Rate: _____ Work Hours: _____ Total Hours (per week): _____

Brief Job

Description: _____
(A detailed description will be attached as Proposal Narrative)
_____.

PROPOSAL NARRATIVES

As part of the application, applicant must submit a proposal narrative answering the questions below. Proposal must be typed and in separate sheet of paper.

Business

1. Business background: Include the years of operation, date of inception, purpose of the business, and type of company. Describe the services or products provided, the company's capabilities, the number and demographics of clientele and employees, and license to operate (if applicable).
Briefly discuss the following:
 - a. Reason for opening business
 - b. Impact or benefit to the community
 - c. Financial history: goals and accomplishments (business sustainability)
 - d. Projection of business growth in 1 - 5 years (i.e., impact on working capital needs, labor, equipment, business location, etc.)
2. Explain how your business has been affected financially or otherwise by Coronavirus pandemic restrictions. Associate expenses and/or loss of revenue to the grant request (i.e., payroll, rent, utilities, and PPE).
3. Is your business currently open and running? Discuss any modifications your business underwent under COVID-19.
4. Identify business personnel and specify who (employees) carry out the activities, location, period, frequency, and delivery of services/product.
5. Briefly discuss the job description. According to the job to be created or retained for the purpose of the grant.
6. Provide a concise description of how your business complies with Affirmative Action—Equal Employment Opportunity (EEO), Americans with Disabilities Act (ADA), Arkansas Labor Standards, and **Center for Disease Control and Prevention (CDC) COVID-19 Guidelines?** How do you aid in decreasing the barriers faced by minority and women-owned businesses?

Budget

1. Specify cost associated with the grant request. Each item must include a brief description explaining the item (item, cost, need, usage, benefit, etc.).
 - a. Payroll (one designated employee/job description)
 - b. Overhead cost (i.e. building/office rent, utilities, and PPE purchases)
2. Identify your business capital: personal funds, loans, other government and/or private funds. Specify business revenue and income. How much money you can borrow if needed?
3. Provide a timeline indicating when funds requested will be expended. Grant may cover related expenses incurred after March 11, 2020.

CONFLICT OF INTEREST STATEMENT

Federal law (24 CFR 570.611) prohibits persons who exercise or who have exercised any functions or responsibilities with respect to the Community Development Block Grant or who are in the position to participate in a decision making process or to gain inside information with regard to such activities, may obtain a financial interest or benefit from an assisted activity either for themselves or those whom they have family or business ties, during their tenure or for one year thereafter.

If your business has a conflict, please fill out A. Otherwise, go to B.

A. Please provide the names of entity's owner, partner, or board members that are currently serving on the CDBG Citizens Advisory Committee, a City employee or immediate family of a City employee, and/or on the City Council this includes prior service for one year: _____

I hereby verify the entity understands that City of Jonesboro must request in writing and HUD may grant an exception to the provisions under 24 CFR 570.611(d). The funds requested will not be guaranteed for the proposed project unless HUD grants an exception.

Name: _____ Title: _____

Signature: _____ Date: _____

B. I hereby certify to the best of my knowledge and belief that no staff member, member of the Board of Director's, nor officer of _____ (business) is currently, nor has been within one year of the date of this application, employed by the City of Jonesboro, a member of the CDBG Citizens Advisory Committee, nor a member of the Jonesboro City Council.

I further attest that no staff member, member of the Board of Director's, nor officer of the applicant entity, is a business partner or immediate family of a City employee, a member of the Citizens Advisory Committee, or a member of the Jonesboro City Council.

Funds requested will not be used to pay the salaries of any of the applicant business's staff who is or has been within one year of the date of this application a City employee, a member of the Citizens Advisory Committee, or a member of the Jonesboro City Council. Nor will the applicant business award a subcontract to any such individual.

Name: _____ Title: _____

Signature: _____ Date: _____

ANTI-LOBBYING STATEMENT

Federal law (24 CFR Part 87 & 2 CFR Part 200.450) prohibit the use of any federally appropriated funds to influence or attempt to influence elected officials in connection with any Federal contracts, grant, loan, or cooperative agreement. The Subrecipient is prohibited from using funds provided herein or personnel employed in the administration of the program for political activities, sectarian or inherently religious activities, lobbying, political patronage, and nepotism activities.

Subrecipient (I) agree and understand that:

1. No federal funds have been paid or will be paid, by or on behalf of the applicant (business owner), to any person for influencing or attempting to influence an officer or employee of the awarding of Federal, state or municipal contract, the making of any Federal or municipal grant, the making of any Federal or municipal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment or modification of any Federal, state or municipal contract, grant, loan or cooperative agreement.
2. If any funds other than Federal funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any Federal or municipal agency/department, Member of Congress, an officer or employee of Congress, an employee of a Member of Congress, Mayor, City Council member, or employee of the Mayor or a City Council member in connection with this application, contract, grant, loan or cooperative agreement, it will complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions; and
3. It will require that the language of paragraph 1 and 2 of this anti-lobbying certification be included in the award documents for all subcontractor awards at all tiers.

Name: _____ Title: _____

Signature: _____ Date: _____

COMPLIANCE STATEMENT

Federal laws require entities receiving federal funds to comply with Affirmative Action. The Subrecipient agrees that it shall be committed to carry out pursuant to the Grantee's specifications an Affirmative Action Program in keeping with the principles as provided in President's Executive Order 11246 of September 24, 1966.

Subrecipient (I) agree and understand that:

1. Equal Employment Opportunity and Affirmative Action (EEO/AA) Statement

The Subrecipient will, in all solicitations or advertisements for employees placed or on behalf of the Subrecipient, state that it is an Equal Opportunity or Affirmative Action employer. EEO prohibits discrimination against anyone on the basis of protected classes such as race, color, sex, gender, and persons with disabilities,

2. Women and Minority-Owned Businesses (W/MBE)

The Subrecipient will use its best efforts to afford minority - and women-owned business enterprises the maximum practicable opportunity to participate in the performance of this Agreement. As used in this Agreement, the term "minority and female business enterprise" means a business at least fifty-one (51) percent owned and controlled by minority group members or women. For the purpose of this definition, "minority group members" are Afro-Americans, Spanish-speaking, Spanish surnamed or Spanish-heritage Americans, Asian-Americans, and American Indians. The Subrecipient may rely on written representations by businesses regarding their status as minority and female business enterprises in lieu of an independent investigation.

3. Labor Standards

The Subrecipient agrees to comply with the requirements of the Secretary of Labor in accordance with the provisions of Contract Work Hours and Safety Standards Act, the Copeland "Anti-Kickback" Act (40 U.S.C. 276a-276a-5; 40 USC 327 and 40 USC 276c) and all other applicable Federal, State and Local laws and regulations pertaining to labor standards insofar as those acts apply to the performance of this Agreement. The Subrecipient shall maintain documentation which demonstrates compliance with hour and wage requirements of this part. Such documentation shall be made available to the Grantee for review upon request.

4. Religious Organization

The Subrecipient agrees that funds provided under this Agreement will not be utilized for religious activities, to promote religious interests, or for the benefit of a religious organization in accordance with the Federal regulations specified in *24 CFR § 570.200(j)*.

Name: _____ Title: _____

Signature: _____ Date: _____

ASSEMBLY CHECKLIST

Refer to requirements section to see specification of documents for application packet.

Provide three (3) copies of the application and narratives.

- Complete Application with signed statements and narratives (*1 original and 2 copies*)

Only one (1) copy for the following included in original application:

- Job Description (applicable to job to be created or retained)
- Business License (or other licensure applicable to your business)
- Proof of SAM.gov registration
- City of Jonesboro Privilege License
- Business and personal tax returns
- Business and personal bank statements
- W-9 Form
- W-4 Form