

Lake County COVID-19 Business Assistance Grant Program



Administered by the South Central Oregon Economic Development District

Lake County has received \$569,031 in funding to support Oregon businesses who have been impacted by COVID-19. These funds were allocated to counties to distribute to businesses who have been financially impacted. Lake County wishes to prioritize businesses **impacted by the freeze**. Priority businesses prohibited from operating by EO 20-65 include:

- Gyms and fitness organizations
- Indoor recreational facilities, museums indoor entertainment activities, and indoor pools and sports courts.
- Zoos, gardens, aquariums, outdoor entertainment activities and outdoor pools.
- Venues that host or facilitate indoor or outdoor events

Additionally, restaurants/bars that were required to close for indoor dining and hotels, motels and RV Parks that can show a loss due to COVID will be given priority.

Timeline

Applications will only be accepted until 5:00 pm on December 23, 2020. However, applicants are strongly encouraged not to delay! Business applicants affected by the recent "freeze" related to EO 20-65 will be prioritized and processed upon receipt and if complete, will be notified and paid as soon as administratively possible. All other applications will be reviewed for completeness and held until December 23. All applicants will be notified of their status no later than January 5.

Award Amounts

Awards to eligible businesses will be made as a grant. The base grant amount will be \$20,000. Additionally, if a business can show proof of a decline in sales of more than \$20,000 for the period between March 1, 2020 and November 30, 2020, as compared against the same period of time in 2019, they can receive additional funds based on the amount of loss up to \$50,000. Any previous grants received from SCOEDD administered funds will be deducted from the \$20,000 base grant.

Use of Funds

Businesses may use the proceeds for any business-related operating expenses. They cannot be used for personal expenses.

Eligibility

Minimum eligibility requirements; only one application may be made per business/proprietor:

 The business is headquartered in Oregon and has its principal operations in Klamath County, Oregon.

- 2. If required by Oregon law to be registered with the Oregon Secretary of State to do business in Oregon, the business is so registered. (If you're operating under a business name other than your true legal name, you should be registered with the Oregon Secretary of State. You can check to see if you're current or get your business properly registered at the Secretary of State's website, here: http://eqov.sos.state.or.us/br/pkg web name srch inq.login.)
- 3. The business is either for-profit or an entity tax-exempt under section 501(c)(3) of the Internal Revenue Code.
- 4. The business was adversely affected in either one of the following three ways:
 - a) The business was prohibited from operating as directed by Executive Order 20-12. Is the primary revenue activity of the applicant one of the following?

 Amusement parks; aquariums; arcades; art galleries (to the extent that they are open without appointment); barber shops and hair salons; bowling alleys; cosmetic stores; dance studios; esthetician practices; fraternal organization facilities; furniture stores; gyms and fitness studios (including climbing gyms); hookah bars; indoor and outdoor malls (i.e., all portions of a retail complex containing stores and restaurants in a single area); indoor party places (including jumping gyms and laser tag); jewelry shops and boutiques (unless they provide goods exclusively through pick-up or delivery service); medical spas, facial spas, day spas, and non-medical massage therapy services; museums; nail and tanning salons; non-tribal card rooms; skating rinks; senior activity centers; ski resorts; social and private clubs; tattoo/piercing parlors; tennis clubs; theaters; yoga studios; and youth clubs.
 - b) The business was prohibited from operating as directed by Executive Order 20-65.

 Is the <u>primary revenue activity</u> of the applicant one of the following?

 Gyms and fitness organizations; indoor recreational facilities, museums indoor entertainment activities, and indoor pools and sports courts; zoos, gardens, aquariums, outdoor entertainment activities and outdoor pools; venues that host or facilitate indoor or outdoor events
 - c) The business can demonstrate a one-month decline in sales, incurred by the COVID-19 pandemic, between March 1, 2020 and November 30, 2020, as compared against the same period of time in 2019.

The following businesses are **ineligible** to apply for or receive funding under the Program:

- 1. Passive real estate holding companies and entities holding passive investments.
- 2. Non-profit entities that do not have federal 501(c)(3) status.
- 3. Businesses that experience a decline in revenues for reasons other than those caused by the COVID-19 pandemic (e.g. seasonal or cyclical businesses cycles).
- 4. Businesses that are delinquent on federal, state or local taxes that were due on or before the date of application.
- 5. Businesses that do not comply with all federal, state and local laws and regulations.
- 6. Businesses that have closed and do not intend to reopen.
- 7. Businesses that have more than 100 full-time equivalent employees.
- 8. Businesses that earned \$5,000 of business revenue or less in 2019.

Reporting

Business information, ownership information and demographic information will be reported to the State for all applications submitted, reviewed, approved and/or denied. Information reported includes, but is not limited to:

- Name of company
- Employer Identification Number (EIN)
- Oregon Business Identification Number (BIN)
- Address of company
- Industry/NAICS
- Amount of any award made from this program
- Legal business structure
- Number of employees
- Number of employees expected to be retained as a result of this award

To Submit an Application

Signed applications and supporting documents can be returned via email to denise@scoedd.org. Questions can be answered by calling 541-591-4572.

Section 1: Business Information Business Name: Business Owner/Operator Name: Business Type: Corporation LLC 501(c)3 Sole Proprietor Partnership **Contact Email Address: Contact Telephone: Business Street Address: Mailing Address (if different):** City: State: Zip: County: Federal EIN/TIN (or SSN if Sole Proprietor): **Business Identification Number (Oregon BIN):** BINs are issued by Oregon Employment Department (OED) and are required for all businesses that have 5 or more employees and for businesses with fewer than 5 employees that file OED Form 132. Industry NAICS Code (as listed on the businesses most recent federal tax filing): Look up your NAICS here: https://www.census.gov/eos/www/naics/ Please provide a brief description of the business including how long you've been operating and what products or service you provide: **Business Ownership Details Company Principals – for 20% owners or more** (Non-Profit? Skip to next section) Title: Percent Ownership: Name: Email for this owner: Phone for this owner: Title: Name: **Percent Ownership:** Email for this owner: Phone for this owner: Title: **Percent Ownership:** Name: Email for this owner: Phone for this owner:

Name:	Title:		Percent Ownership:
Email for this owner:		Phone for	this owner:
Name:	Title:		Percent Ownership:
Email for this owner:		Phone for	this owner:
Section 2: Calculating Your Gra	-		
The base grant amount is \$20,00	If your business can s	how proo	f of a decline in sales of more
than \$20,000 for the period betw	veen March 1, 2020 and	Novembe	r 30, 2020, as compared to
the same period of time in 2019,	you can receive that am	ount of lo	ess up to a maximum, grant
of \$50,000.			
Amount Requested:			
\$	Less previous grant	amount	\$
	J ,		
If request is more than \$20,000 p November 30, 2019 to March 1, during 2020.			
How many people will continue to v	work at this husiness he	rause of t	he grant?
now many people will continue to	Nork at this business be	cause or e	ne grant.
Section 3: Required Document	ation		
To qualify for a grant through this progressions to be processed essence! Complete the following check			
Was your specific type of business	forced to close by Ores	on's Exec	utive Order 20-12?
Yes No			e e
Is the <u>primary revenue activity</u> of the appl this executive order, and should check "No they are open without appointment); barl esthetician practices; fraternal organizati hookah bars; indoor and outdoor malls (i. area); indoor party places (including jump exclusively through pick-up or delivery ser	o" above. Amusement parks; per shops and hair salons; bo on facilities; furniture stores; e., all portions of a retail com ing gyms and laser tag); jew	aquariums; wling alleys; gyms and fit plex contain elry shops ar	arcades; art galleries (to the extent that cosmetic stores; dance studios; tness studios (including climbing gyms); sing stores and restaurants in a single and boutiques (unless they provide goods

If you answered yes to this question, no sales records are required.

services; museums; nail and tanning salons; non-tribal card rooms; skating rinks; senior activity centers; ski resorts; social

and private clubs; tattoo/piercing parlors; tennis clubs; theaters; yoga studios; and youth clubs.

Was your specific type of business forced to close by Oregon's Executive Order 20-65 (the Freeze)?
Yes No
Is the <u>primary revenue activity</u> of the applicant one of the following? If you're not on this list, you were not forced to close by this executive order and should check "No" above. Gyms and fitness organizations; indoor recreational facilities, museums indoor entertainment activities, and indoor pools and sports courts; zoos, gardens, aquariums, outdoor entertainment activities and outdoor pools; venues that host or facilitate indoor or outdoor events.
If you answered yes to this question, no sales records are required.
Do you own a restaurant or bar which was forced to close for indoor seating by Executive Order 20-65? Yes No
If you answered yes to this question, you need to provide sales records reflecting a one month decline in sales (see below), but will be given priority access to this grant.
✓ If you answered no to either executive order question above or are a restaurant or bar closed for indoor seating, please provide proof of a one-month decline in sales incurred because of the COVID-19 pandemic, between March 1, 2020 and November 30, 2020, as compared against the same period in 2019.
 ✓ Acceptable documentation includes (samples included at the end of this document): ○ Profit and Loss Statements (like periods in 2019 and 2020) ○ Income Statements (like periods in 2019 and 2020)
 Sales Reports (like periods in 2019 and 2020) Business Bank Account Records (like periods in 2019 and 2020), e.g., business bank statements, online business banking reports, etc.
Section 4: Certifications and Representations The information in this application, including all attachments and certifications, are, to the best of the knowledge of the undersigned, complete, current and accurate. The application presents fairly the conditions of the eligibility of the undersigned. Proceeds of the award are intended to solely support the operations and reopening expenses of the applicant business.
<u>INITIAL</u> all the following certifications that apply (do not type X, yes or no, or check the box):
The business was adversely impacted as a direct result of the COVID-19 crisis.
The business had 100 or fewer full-time employees as of the date of this application.
The business:
Was prohibited from operating by Governor's Executive Order 20-12; and/or
Was prohibited from operating by Governor's Executive Order 20-65; and/or
Experienced a 25% or more reduction to sales as a result of the COVID-19 crisis

The business earned more than \$5,000 in calendar year 2019.		
The business is current on all federal, state and local taxes as of the date of application.		
The business is headquartered in Oregon and has primary operations in Lake County, Oregon.		
 The business is currently registered with the Oregon Secretary of State to do business in Oregon if such registration is required.		
The business is compliant with all federal, state and local laws and regulations.		
The business agrees to provide business, financial and ownership information necessary to determine and verify eligibility.		
The business will only use these proceeds to support business-related expenses to maintain operations and/or reopen and proceeds will not be used for personal purposes.		
Unless otherwise directed by Executive Order, the applicant is open, or has reopened for business or intends to reopen when permitted.		

Failure to comply with eligible use of proceeds, or making a material misrepresentation about the business and its operations to qualify for an award will be a provision of default of the award and subject the award to recapture. The State of Oregon reserves the right to request additional documentation from the applicant to verify the accuracy and authenticity of the information provided.

Should the State determine a misrepresentation exists creating a default, the award may be forfeited and subject to repayment. Failure to repay or cure a default will result in any and all collection actions permissible by law, including through third party collection services or the Oregon Department of Revenue. The applicant agrees to allow the State to pursue such collection actions.

General Certification

Signature of Applicant:

I certify to the best of my knowledge that all information, contained in this application, including all attachments and certifications, is valid and accurate. I further certify that, to the best of my knowledge:

1. The application has been reviewed and approved by the authorized owner(s), managers with appropriately delegated authority, and/or in accordance with the organization's articles of incorporation, articles of organization or bylaws, and

2. Signature authority is verified.

Check one:

Yes, I am authorized to submit on behalf of the applicant within authority granted in the applicant's articles of incorporation, articles of organization or bylaws. (e.g., President, Secretary, Chief Executive Officer, Board Chair, etc.)

No, I am not authorized to submit on behalf of the applicant within authority granted in the applicant's articles of incorporation, articles of organization, or bylaws so I have attached documentation that verifies my authority to sign on behalf of the applicant.

Only applications with proper signature authority will be accepted.

Printed Name of Applicant:

Title of Applicant:

Please Print application, complete all sections and be sure to initial all certifications and sign the application.

Date:

Completed applications can be submitted to denise@scoedd.org or delivered to the Lake County Treasurer's office at 513 Center Street, Lakeview.

These are intended to provide some examples of what proves loss of sales. These are just examples and are not all inclusive.

Examples 1&2 - Proof of Loss of Sales from P&L

10/21/20		Profit & Loss April 2019		
	Income Sales Total Income		22,871.67 22,871.67	
10/21/20		Profit & Losa April 2020		
	Income Personal Contribution		Agr 20 45,066.00	
	Sales Total treame		10,143.17	

11/03/20 Cash Basis

Profit & Loss April 2020

	Apr 20	Apr 19	% Change
Ordinary income/Expense income Lottery External Withdrawai	0.00	-63,224.37	100.0%
Total Lottery	0.00	-63,224.37	100.0%
Sales	605.66	91,954.01	-99.3%
Total Income	605.66	28,729.64	-97.9%
Grass Profit	605.66	28,729.64	-97.9%
Net Ordinary Income	605.66	28,729.64	-97.9%
let Income	605.66	28,729.64	-97.9%
2 5495			

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Customer Service: 1-866-486-7782



Last statement. May 31, 2019 This statement. June 30, 2019

Save time and money on payroll with one of our full-service options. Business Online Payroll (R) is a cost-effective, online payroll solution with complete tax pay and file service. Paychex (R) is a full-service option which includes expert, one-on-one service. Visit our website to learn more about payroll services available through Umpqua Bank.

COMMUNITY BUSINESS CHECKING

Account number Low balance Average balance Interest earned \$3,602.20 \$5,415.17 \$0.00 Beginning balance Deposits Additions Withdrawats/Subtractions Ending balance \$4,803.04 \$4,500.37 \$1,641.17 \$7,662.24

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Customer Service: 1-866-486-7782



Last statement: May 31, 2020 This statement: High 30, 2020

Umpqua Bank Rules & Regulations updates go into effect 7-1-2020. This update mainly includes changes to Umpqua Bank's Funds Availability Policy. Next business day funds availability has increased to \$225, if there is a hold on a check. For more info, and to review other changes, you may request a copy by calling us at 1-866-486-7782 or visiting umpquabank.com/disclosures.

COMMUNITY BUSINESS CHECKING

Account number Low balance Average balance Interest earned



Beginning balance Deposits/Additions Withdrawals/Subtractions Ending balance

