



City of Jackson

COVID-19 Small Business Assistance Grant 2020

To assist the Jackson Business Community to respond to the COVID-19 pandemic, Jackson City Council would like to provide grant funds totaling \$30,000 to local and small for-profit businesses. The goal is to help businesses that are adversely affected by the stay-at-home order to continue to grow and thrive in Jackson. Each eligible local business can receive up to \$1,000 in financial relief from the City. This money can be used for business expansion, special programs to address pandemic requirements, or operational needs to avoid business closure or job loss (such as water bills, rents, cleaning supplies).

The program requires that the recipients remain in business for at least 1 year after receiving the grant. If the business closes within a year, the grant must be repaid in full, without interest, within 1 year of the close of business.

The grant process intends to be simple and efficient. To be considered for this grant, applicants must submit a completed and signed application form to City Hall by **June 30, 2020**. The application form can be mailed to City Hall / Attn: Patti Ungaro, at 33 Broadway, Jackson, CA 95642 or dropped off at City Hall using the drop-off box, or email to cinfo@ci.jackson.ca.us by the above deadline. Late submissions will not be considered.

Once the application cycle is complete, all applications will be reviewed and considered by a Selection Committee. Recipients can expect to receive funds in July.

If you have any questions please contact the City Manager at 209-223-1646 x 101 or email cmanager@ci.jackson.ca.us

If you wish to make a donation to this program and possibly receive a tax credit, please contact Amador Community Foundation at 209-223-2148 or email kharmon@acfgives.org.

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Application Form

COVID-19 Business Assistance Grant 2020

1. Please complete the following about you and your business:

Applicant* Name: _____

Company/Business: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

Phone Number: _____

**If the Applicant is not the business owner, please enclose a signed authorization by the owner.*

2. Please answer YES or NO to the following:

_____ Do you or the Business you represent possess a current business license issued by the City of Jackson?

_____ Have you renewed the City of Jackson business license for FY 20/21?

_____ Do the services you provide take place within the City of Jackson?

_____ Do you have employees other than yourself? (*You must have at least 1 employee*)

_____ Has your business been able to open, even in a limited capacity, since the “stay-at-home” order was issued in March 2020?

_____ Have you received any other financial support from the City of Jackson, including utility payment deferral? If so, please explain: _____

_____ Have you received any other support from the state or the federal government, such as the Payroll Protection Program/Loan?

3. How long have you been in business in Jackson? _____

4. What other efforts have you made in order to continue to operate your business during and after the COVID-19 crisis?

5. How much are you applying for? _____
Please justify your request and explain how you will use these funds. (*Each business can apply up to \$1000*)

6. Please check if you agree to the terms of the grant:

_____ You/Business will maintain in operation for the next year.

_____ You will repay this grant if you close within 12 months from the date of the grant.

_____ You/Business will renew your Jackson business license.

_____ You agree that the City of Jackson can release your business name and location to the general public and media if you receive this grant.

7. How did you hear about the grant?

- City Website

- Social Media

- Newspaper

- Utility Bills

- Other: _____

By signing this application form, I certify that all information submitted is true and correct to the best of my knowledge and I will submit additional information if requested for consideration of my application.

Applicant Name and Signature:

Printed Name

Date

Signature

Owner Name and Signature (if Applicant is not Owner):

Printed Name

Date

Signature