

**Pennington County CARES Grant: Business and Non - Profit
Guidelines (Round 2)**

This program is offered pursuant to funding received by Pennington County, a political subdivision of the State of Minnesota (the “County”), through the federal Coronavirus Relief Fund for State, Territorial, Local and Tribal Governments (the “Fund”), established under Section 601(a) of the Social Security Act, as added by Section 5001 of the Coronavirus Aid, Relief, and Economic Security Act (“CARES Act”). Funding will be made available to a limited number of businesses and Non - Profits that meet specific requirements set by the Pennington County Cares Grant Program (the “Program”) and specific priorities intended to advance economic development in Pennington County.

The program provides grants for the recovery, stabilization and mitigation related to the COVID – 19 emergency. Funds can be used for operating expenses, including rent payments, mortgage payments, utilities, payments to suppliers, production of business contingency plans, technical assistance/reopening services, technology capital or marketing assistance/tools, security or other critical non-payroll business expenses (including expenses related to reopening) as a approved by the fund administrator.

Businesses and Non-Profits that have applied for and received CARES Act Grants / Loans under other programs (Pennington County Small Business Grant – Round 1, PPP, SBA EIDL or other State or Federal Funding) cannot use Pennington County CARES Grants - Round 2, to cover the same expenses. Applicants will be responsible for complying with the terms and requirements of the loan or grant programs from ALL other sources.

A business applicant that meets the below criteria is eligible for a grant of up to \$30,000.00:

- Must be a locally owned and operated business with a physical establishment in Pennington County.
- Must be in operation for at least 3 months prior to March 1, 2020.
- Must not have received a grant from Pennington County to cover the same costs/expenses since March 1, 2020.
- Must be licensed and in good standing with Pennington County and the office of Minnesota State Secretary, if applicable.
- Must demonstrate direct and adverse effects due to the COVID-19 pandemic with significant loss in revenue and increased expense since March 15, 2020.
- Can be a business located in a shared commercial space.
- Must have at least 2 FTE (30 hours per week) **other than the business owner(s)** and no more than 50 FTE at that location.
- **Must submit complete Profit and Loss statements for period 1-1-2019 to 8-31-2019 and 1-1-2020 to 8-31-2020.**
- Business narrative related to COVID-19 adverse effects.
- Any additional documentation or information deemed necessary by the Pennington County CARES Act Committee to determine eligibility, generate grant documents, disburse grant funds, or meet program reporting requirements.

A Non–Profit business {501(c)3; 501(c)6; 501(c)9} that meets the below criteria is eligible for a grant of up to \$25,000.00:

- Must be locally owned, operated and domiciled in the State of Minnesota with a physical establishment in Pennington County. If there is a parent organization/company or a second location outside of Pennington County, only the entity located in Pennington County can apply to receive a grant and grant funds must be used for the local organization's expenditures.
- Must employ 20 or fewer full-time equivalent (FTE) employees as of January 1, 2020.
- Applicant must have been in operation prior to January 1, 2020.
- Must demonstrate direct and adverse effects due to the COVID-19 pandemic with significant loss in revenue / donations and increased expense since March 15, 2020.
- Must not have received a grant from Pennington County (Round 1) and be in good standing with the Minnesota Secretary of State and the Minnesota department of Revenue as of January 1, 2020.
- **Must submit complete Profit and Loss statements for period 1-1-2019 to 8-31-2019 and 1-1-2020 to 8-31-2020**
- Must demonstrate the Non-Profit helps mitigate need for, or complements, HHS efforts **(Housing, Food, Childcare, youth Services, Employment, social and health services).**
- Must disclose all Federal, State or local grant or loan applications for which applicant has applied, which have been received or remain pending since March 1, 2020.
- Must Certify in good faith that the "uncertainty" of current conditions makes the grant request necessary to support ongoing operations.
- Must include a Business narrative related to COVID-19 adverse effects.
- Any additional documentation or information deemed necessary by the Pennington County CARES Act Committee to determine eligibility, generate grant documents, disburse grant funds, or meet program reporting requirements.

Business owners that apply for Pennington County Small Business CARES Grants on behalf of more than two businesses become ineligible for additional grants.

Certain businesses are ineligible, including:

- Corporate chains or multi-state chains.
- Businesses in default conditions prior to February 29, 2020.
- Businesses that do not plan to reopen.
- Businesses that primarily derive income from gambling.
- Businesses that derive income from adult entertainment.
- Businesses that derive income from real estate transactions, property rentals or property management or lobbying.

The program provides grants for the recovery, stabilization and mitigation related to the COVID-19 emergency. Eligible expenses include:

- Operating / Program Expenses
- Rent Payments
- Business Mortgage Payments
- Utilities
- Payments to Suppliers

- Production of Business Contingency Plans
- Technical Assistance / Reopening Services
- Technology Capital or Marketing Assistance / Tools
- Security
- Other Critical non-payroll business expenses

Funds may not be used for Agriculture (Crop or Livestock production), purchasing machinery or vehicles, moving expenses, land acquisition or payment of property taxes.

The Pennington County CARES Act Committee (PCCAC) will determine in its discretion the appropriate amount of a grant, eligible costs and expenses, with narrative explanation submitted.

Application Process:

Applications will be accepted beginning October 12, 2020 through October 23, 2020.

Businesses and Non-Profit Organizations (NPO) submit application, requested documentation and Business narrative to:

Pennington County Emergency Management – CARES Grant

101 Main Avenue North

PO Box 616

Thief River Falls, MN 56701

Or email: elbeitel@co.pennington.mn.us

It is the applicants responsibility to verify that all documentation is received

Pennington County CARES Grant: Business and Non-Profit Organizations

Applicant Name:

First Name: _____.

Last Name: _____.

Legal Name of Business: _____.

Operating Name of Business if applicable: _____.

Business Address: * BUSINESS MUST BE LOCATED IN PENNINGTON COUNTY*

Address: _____.

Address Line 2 (Optional): _____.

City: _____.

County: _____.

State: _____ Zip Code: _____.

Business Phone Number: _____ Applicant Phone Number: _____.

Primary email address: _____.

Type of Business or Organization: _____.

Legal Structure of Business or Organization:

Sole Proprietor Corporation For-Profit (S-Corp or C-Corp) Cooperative Partnership

Limited Liability Company / Partnership (LLC/LLP) Non-Profit Organization (501 (c)

Date of Business / Organization creation: __/__/__.

I certify that this Business / Organization is in compliance with Pennington County and the Minnesota Secretary of State requirements for business filing as of today's date:

Yes No Not Applicable (Explain below)

_____.

Does this Business / Organization have at least 2 full-time equivalent (FTE) employees OTHER THAN THE OWNER(S) and not more than 50 full-time equivalent employees as of March 1, 2020?

Yes No How many FTE employees: ____

How many 1099-MISC Contractors were working for the Business / Organization as of March 1, 2020?
_____.

Can the Business / Organization demonstrate a significant loss in revenue, monetary donations and increased expenses related to the COVID-19 Pandemic Emergency?

Yes NO

- **Business / Non-Profit Organization must provide complete Profit and Loss Statements for periods 1-1-2019 to 8-31-2019 and 1-1-2020 to 8-31-2020 for revenue and COVID-19 expense comparison.**
- **A Non-Profit Organization must demonstrate how it complements HHS efforts (Housing, Food, Childcare, Youth Services, Employment, Social and Health Services).**

Applicants are strongly encouraged to seek funding or relief from all available resources. Has the applicant pursued or does the applicant intend to pursue other forms of funding and/or relief from expenses during the COVID-19 emergency?

Yes What sources: _____
 No _____

_____.

Business / Organization Narrative: Describe how COVID-19 emergency has directly and indirectly impacted the applicants Business / Organization 2020 revenue, projected revenue, Covid-19 related expenses and future expenses. If possible, please be as descriptive as possible. Please attach to this application.

Grant Amount Requested (\$): _____.

(Grants are up to \$30,000.00 for profit Businesses and \$25,000.00 for Non-Profit Organizations, per qualifications. The Pennington County CARES Act Committee (PCCAC) will determine in its discretion, the appropriate amount of a grant. All requests will be reviewed for approval or rejection. The Grant Administrator is not the Approving Authority. Incomplete, missing information or fraudulent applications will be notified of possible rejection within 30 days of PCCAC review).

Submit (Please read and mark all the items below to acknowledge each statement)

I (we) certify that I (we) have the authority to apply for this grant on behalf of the business described herein.

I (we) certify that the business has been negatively impacted by the COVID – 19 Emergency as described herein.

I (we) certify that the grant fund will be used for authorized business expenses only, in accordance with the requirements and restrictions set forth in Section 601(d) of the Social Security Act, as added by section 5001 of the CARES Act, and not for household, personal, or consumer use.

I (we) certify that the information contained in this application is true, complete, and correct to the best of my (our) knowledge.

I (we) expect to resume normal business operations after the emergency guidelines are lifted.

I (we) shall cooperate with the County or appropriate officials for grant auditing purposes, as further set forth and described above (Operating Revenue Comparison).

I (we) understand that any willful misrepresentation on this application could result in a fine and/or imprisonment under provision of the United States Criminal Code U.S.C. Title 18, Section 1001, and shall entitle the County to receive a return of any funding provided hereunder.

Data Privacy Notice: per MN Statutes 13.591, Subdivision 1, certain data provided in this Application is private or nonpublic data; this includes financial information about the business, including credit reports, financial statements, net worth calculations, business plans; income and expense projections; balance sheets; customer lists; income tax returns; and design, market, and feasibility studies not paid for with public funds. Per MN Statutes 116J.401, Subd. 3., certain data provided in this application is private data; this includes data collected on individuals pursuant to the operation of business finance programs. As described in MN Statutes 13.591, some or all of the data provided in this Application may become public.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.

Owner Name

Owner Title

Owner Signature

Date

Pennington County CARES Grant: Business and Non-Profit Organizations

Applicant Name:

First Name: _____.

Last Name: _____.

Legal Name of Business: _____.

Operating Name of Business if applicable: _____.

Business Address: * BUSINESS MUST BE LOCATED IN PENNINGTON COUNTY*

Address: _____.

Address Line 2 (Optional): _____.

City: _____.

County: _____.

State: _____ Zip Code: _____.

Business Phone Number: _____ Applicant Phone Number: _____.

Primary email address: _____.

Type of Business or Organization: _____.

Legal Structure of Business or Organization:

Sole Proprietor Corporation For-Profit (S-Corp or C-Corp) Cooperative Partnership

Limited Liability Company / Partnership (LLC/LLP) Non-Profit Organization (501 (c)

Date of Business / Organization creation: __/__/__.

I certify that this Business / Organization is in compliance with Pennington County and the Minnesota Secretary of State requirements for business filing as of today's date:

Yes No Not Applicable (Explain below)

_____.

Does this Business / Organization have at least 2 full-time equivalent (FTE) employees OTHER THAN THE OWNER(S) and not more than 50 full-time equivalent employees as of March 1, 2020?

Yes No How many FTE employees: ____

How many 1099-MISC Contractors were working for the Business / Organization as of March 1, 2020?
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Can the Business / Organization demonstrate a significant loss in revenue, monetary donations and increased expenses related to the COVID-19 Pandemic Emergency?

Yes NO

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Yes What sources: _____
 No _____

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Owner Name

Owner Title

Owner Signature

Date
