Newark Small Business COVID-19 Emergency Grant Round 3

Application

Overview

Welcome to the Newark Small Business COVID-19 Emergency Grant application. In this time of crisis, businesses nationwide are suffering enormous impacts related to COVID-19. As an effort to help businesses and Newark families who may endure such an impact, Mayor Ras J. Baraka has taken the initiative to provide additional financial help to those who qualify. As an effective effort to mitigate barriers to capital for Newark's most vulnerable businesses, small businesses, the City of Newark has committed an additional \$2 million in funding (local trust funds and/or Community Development Block Grant (CDBG).

Mayor Baraka's Newark Economic and Housing Development Department (EHD) in partnership with Invest Newark are working together in this effort to provide relief while assessing the economic impacts related to COVID-19 on our small business community. EHD is the grant administrator for this initiative.

This grant aims to help for profit small businesses and microenterprises with losses they have experienced through loss of income, payroll loss, sales, etc. This emergency fund will provide working capital grants in amounts up to Twenty Five Thousand Dollars (\$25,000) to qualifying small businesses. Proceeds of the grant can be utilized for accounts payable, payroll, inventory, licensing and license renewal, utilities, accounting and auditing services, rent, insurance, COVID-related equipment and supplies, subject to funding availability.

The information you provide will facilitate this emergency relief and inform strategies to speed recovery. Your individual responses will not be published. Responses will be analyzed to project the extent of the economic damage your business and others have endured. Generalized findings will be published; all respondents will receive a decision regarding funding and awards from the City of Newark Department of Economic and Housing Development.

Application Guidelines

If you represent a for profit small business in the City of Newark and your business is experiencing financial losses due to this COVID-19 crisis, you may be eligible to apply if you meet the following conditions:

- Have a for profit business with a physical establishment located in Newark.
- Have twenty five (25) employees or less.
- Have been in operation for at least one year.
- Have experienced a loss of income due to COVID-19.
- Have committed NO violations of the City of Newark COVID-19 shutdown guidelines.

- Have NOT been awarded a grant from the City of Newark during previous rounds.
- Have NO threatening or pending litigation or material contingent obligation against applicant.

This application is primarily designed for small sized for profit businesses, which are defined as businesses of 25 total employees and less; and microenterprises (5 employees or less). This includes franchise operations and local branches or stores of larger companies.

Eligible small businesses will be selected by a committee guided by the above criteria and scoring will be weighted based on:

- Proven need
- Newark residents employed
- Type of business, preference to personal services
- Location; Newark small businesses eligible everywhere, but 25% of grant funds awarded to hot spot zip codes (07104, 07105, and 07107)
- Owners and/or employees with income below moderate area median income.
- Minority and/or Women-Owned Business Enterprise

We invite you to submit an application if you have read the qualifying criteria carefully. Only eligible Newark businesses will be considered. You should be prepared to submit the following documentation before a final decision can be made:

- Corporate registration(s) and/or license(s).
- Proof of general liability insurance as required for the size and scale of the business.
- Most recent year's corporate tax returns (2019 preferred, 2018 accepted)
- Internal business financials (profit and loss/balance sheet)
- Payroll/employee information (list of names and income)
- Evidence of hardship/losses due to COVID-19 related business disruption (i.e. aging accounts payables, outstanding obligations, etc.).
- A detailed statement or budget indicating how funds will be used.
- A COVID-19 adaptation and recovery plan for the next 1 to 3 years. Can include outdoor structures, e-commerce, applications fees, PPE, digital literacy training, enabling remote working, diversifying products/customers/suppliers, reducing costs, securing mentors, safety protocols, marketing strategy, occupancy limits, and outdoor usage, etc. (Limited to one-page)

We urge you to provide as much information as possible so that a proper assessment of impact can be analyzed. Your financials can be used to help you demonstrate loss. For your convenience, proof of documentation, as required by this application, should be uploaded to this application using scanned documents or a mobile phone or device to provide complete (whole document) and legible photo images of documents.

No documents should be emailed. Send questions only to EHD@ci.newark.nj.us.

- You may qualify for a grant of up to Twenty Five Thousand Dollars (\$25,000).
- You may not be awarded the total amount requested.
- o The deadline to submit an application is December 31, 2020 at 5pm.
- Applications will be reviewed in January 2021.
- Grants will be awarded in February 2021.

No applications shall be accepted in-person. Applications are complete when all online questions are answered and supporting documentation is received. Documentation includes financial statements, use of funds budget, evidence of loss/hardship, corporate registration, payroll/employee information, and proof of insurance as detailed above.

Information provided on documents must match information provided in the application.

Decisions are based on eligibility, criteria met, and availability of funds.

All questions require an answer, and the application is not considered complete until each is answered and all attachments are uploaded.

We now invite you to begin the application.

Questions Determining Eligibility

1. Were you awarded a grant for COVID-19 impact relief in a previous round this year?
° Yes
O No
2. Is this a business for profit with a physical location in Newark, NJ?
° Yes
O No
3. Does this business have more than 25 employees?
° Yes

° No
4. Has this business been in operation for at least 1 year?
□ Yes
□ No
Questions Determining Award 5. Business or organization name:
6. Business Address: Street Address City State Zip
7. Your contact information (owner of business): First Name Initial Last Name Home Address Street Address City State Zip
8. How much in emergency funding are you requesting based on evidence of hardship/loss? (limit is \$25,000)

0	WBE
0	Both
0	Neither
14.	Is your business currently closed due to the COVID-19 crisis?
0	Yes
0	No
15.	Will these funds help prevent business closure due to COVID-related loss of revenue?
0	Yes
0	No
16.	Will these funds help prevent layoffs due to COVID-related loss of revenue?
0	Yes
0	No
17.	If so, how many layoffs would be averted?
18.	When was your business established?
Mo Day Yea	

19. Do you or your employees earn less than the amounts listed in this table?

0	Yes	
0	No	
Far 1 2 3 4 5 6 7 8	nily Size	Annual Median Income \$56,430 \$64,491 \$72,553 \$80,614 \$87,063 \$93,512 \$99,961 \$106,410
per	-	22, use the below slider to indicate the approximate y your business that are considered low-to-moderate
0	0-20%	
0	21-40%	
0	41-60%	
0	61-80%	
0	81-100%	
21.	Which industry sector best des	cribes your business? (check primary industry)
	Administrative Services	
	Arts, Entertainment, or Recrea	tion (Museums, event spaces, film)
	Construction or Heavy Site Wo	rk
	Educational Services	
	Finance, Insurance, Real Estate	2

	Food or Beverage
	Healthcare or Social Assistance
	Hospitality or Food services
	Legal Services
	Manufacturing (all other)
	Personal Services (Salon, Barbershop, Nail Shop, etc.)
	Print Publishing or Other Information
	Professional or Technical Services
	Retail (stores or e-commerce)
	Software or Telecommunications
	Transportation or Warehousing
	Utilities or Energy
	Wholesalers
	<u>Other</u>
22.	Primary product or service (please fully describe your business):

Business Landscape Questions Helping Determine City-Wide Impact

23. Organization Type

0	Sole proprietorship
0	Privately held business with employees
0	Franchised business operation
24.	Is this business independently owned or a corporate owned franchise?
0	Independently owned
0	Corporate owned franchise
	Please indicate the number of locations your business has in Newark from the options ow:
0	1
0	2
0	3
0	4+
26.	Please check the box next to the ward in which your primary business is located.
	North
	South
	East
	West
	Central
27.	Please indicate your gross revenues (sales) in 2019 from the options below:

0	Less than \$100,000
0	Between \$100,000 and \$200,000
0	Between \$200,000 and \$300,000
0	Between \$300,000 and \$400,000
0	Between \$400,000 and \$500,000
0	More than \$500,000
28.	Are the principals of your business US citizens or legal permanent residents?
0	Yes
0	No
29.	Ownership (check all that apply):
	Locally-owned
	Minority or Person of Color owned
	Woman-owned
	Immigrant-owned
30.	Have you reduced your staffing capacity?
0	Yes, we have laid off employees or contract workers
0	Yes, we have reduced employee or contract workers hours
0	Yes, we have laid off employees AND reduced employee or contract workers hours
0	No, we have not reduced staffing and operate the same hours

31. If you have laid off employees or contract workers, how many?
Temporary layoffs
Permanent Layoffs
32. Do you anticipate reducing staffing in the future due to this COVID-19 crisis?
C Yes, we plan to lay off employees or contract workers
C Yes, we plan to reduce employee or contract workers hours
Yes, we plan to lay off employees or contract workers AND reduce employee or contract workers hours
O No, we do not currently have plans to reduce staffing in the future.
33. Have you applied for or are planning to seek additional emergency assistance for your business from another source (SBA, NJEDA, or other)? If so, please list the agencies with which
you are seeking additional relief.
34. Will you be able to make rent payments (or property payments, if you own your building)?
O Yes
O No
O I don't know/uncertain currently
O Not applicable, my business does not pay rent

35. Have you lost money through deposits or down payments that will not be refunded? Or have you had to refund deposits or down payments? Please
describe:
36. Are there other costs, such as equipment leases or debt payments (loans) that will be
difficult to cover? Please describe:
37. Have your costs increased due to the impact of this crisis? (For example, videoconferencing
subscription, additional sanitation measures). Please describe:
38. How much has your gross income declined compared to this same month last year? 100% lower
C 75% lower
© 50% lower
© 25% lower
O No Decline
39. How much has your gross income declined this month compared to February 2020 (before the crisis impacted your business)?
© 100% lower
C 75% lower
So% lower

0	25% lower
0	No Decline
	Please indicate which additional impact your business is experiencing due to COVID-19, eck all that apply)
	Late payments or collection losses
	Lack of cash reserves
	Inability to pay bills, fees
	Temporary closures
	Cancelled events
	Reduced participation at gatherings or events
	Discrimination or unfair treatment
	Please indicate which of the following COVID-19 related developments has directly affected ur business. (check all that apply)
	Workers working remotely
	Workers working reduced hours
	Absenteeism due to sick workers
	Reduced access to clients and customers due to remote working
	Unable to get critical supplies or production parts, components
	Cancelled or postponed delivery of exports (domestic)

☐ Cancelled or postponed delivery of exports (international)
Fewer visitors than normal to your business
Decrease in number of customers
Decline in business due to uncertainty and long-term fears
Disruption in operations due to an order by the City of Newark
42. How worried are you about your business or organization surviving this challenge? (please check 1)
Not worried, no negative impact
Some impact, but we'll make it
© Worried about impact and staying in business
O Very worried and don't know if we'll make it through
43. What else would you like us to know? What assistance does your business or organization
need? Please be specific:
Attestation
44. Lawsuits The applicant hereby represents and warrants that it is not currently involved in any litigation, and is presently unaware of any pending or threatened litigation that would have material adverse effects on the business and/or frustrate the business continuation purpose of this grant.

45. No Outstanding City Balance	
The applicant hereby represents and warrants that, as of the date of this grant applicit has made all payments in full that are due and payable to the City of Newark, including without limitation, taxes, assessments, license fees, and/or service charges. The applicar further represents and warrants that, as of the date of this grant application, there are needing liens against the business and in favor of the City of Newark due to non-paymer City charges.	g nt 10
46. No COVID-19 Violations The applicant hereby affirms that the establishment was not cited by the City of Nev violations or shutdown due to operations counter to COVID-19 restrictions.	vark for
47. Accurate Information I certify that the foregoing statements made by me are true. I am aware that if any constatements made by me are willfully false or designed to defraud, the City of Newark shatthe right to demand full and immediate repayment of the grant funds.	
48. I understand that I must upload all required supporting documents for my applicatio considered complete and eligible for the awarding of any funds.	n to be
Business registration	
Proof of liability insurance	
Tax returns	
Financial Statements	
Payroll/employee information	
Evidence of hardship/loss	
☐ Budget showing how funds will be used	
Adaptation and recovery plan (one page limit)	

Attachments Upload

49-56. Supporting Documents

Please upload whole, legible documents with the type of each document named for identification purposes.

Each document on the above checklist is to be uploaded individually, for numbers 49 - 56.

End of Application

Thank you for your submission! Again, applications will be reviewed during January 2021 and notifications will be made and grants will be awarded in February 2021. In the interim, feel free to pursue additional applicable resources from the organizations listed below:

Local Resources

City of Newark One Stop COVID-19 – www.newarkcovid19.com
Invest Newark Small Business Information – www.investnewark.org
Greater Newark Enterprises Corp – info@new.gnecorp.org

State Resources

New Jersey COVID-19 Information Hub - https://covid19.nj.gov/

New Jersey Business Programs: https://cv.business.nj.gov

New Jersey Jobs Portal: https://jobs.covid19.nj.gov