

HALIFAX COUNTY *Virginia*

Small Business Recovery Assistance Fund

The Small Business Recovery Assistance Fund will help businesses in Halifax County, including the Towns of South Boston, Halifax, Virginia, and Scottsburg meet their long-term business goals by adjusting to COVID-19 demands. Establishing safe and clean re-opening procedures, in accordance with the Governor's guidance, is necessary for the safety of customers and employees. It will allow businesses to regain and sustain operations, ideally helping them retain existing staff, fill vacant positions, create new jobs, and become more efficient and resilient.

Eligible Businesses:

Assistance through the program will be targeted to businesses that meet each of the following criteria.

1. Physically located in Halifax County,
2. Locally or regionally owned,
3. 20 total employees or fewer,
4. Has been impacted by COVID-19,
5. Has not received federal CARES Act assistance for the same purpose as the SBRAF request,
6. Was open for business by March 12, 2020, AND
7. Provides local or regional services, including those in the program's areas of emphasis:
 - a. tourism related businesses, nonprofit destination marketing organizations (DMOs),
 - b. accommodations (i.e. hotel, motel, bed and breakfast),
 - c. restaurants/food service, professional services (i.e. banking, legal, design, real estate),
 - d. cultural & educational services,
 - e. arts,
 - f. recreation,
 - g. retail,
 - h. nonprofit/social services,
 - i. health practitioners, and
 - j. personal care (i.e. beauty/barbershop, nail salon, dry cleaners, etc.)

NOTE: Non-profit organizations (i.e. theaters, museums, chambers, etc.) will be awarded starting January 1, 2021 as funding allows. For-profit businesses will be offered first opportunity to apply.

The Town has been awarded \$500,000. The maximum benefit to any individual business is \$10,000. This program will be operated on a reimbursement basis only; therefore, the Town of South Boston must submit proof of payment prior to seeking reimbursement from DHCD. Since the Town of South Boston is acting as the lead applicant/fiscal agent, funds will be disbursed to businesses as follows:

- **Retooling and technology activities (up to \$5,000)** will be disbursed on a reimbursement basis once the business submits documentation of expenditures via invoices and proof of payment.
 - **Space and technology upgrades** to reopen and conduct business safely, including furniture, barriers, and technology such as laptops, software, and touch-free credit card payment systems to accommodate social distancing.
 - **Sanitization** (cleaning service and/or supplies- EPA-approved disinfectants, gloves, and masks).
 - **Job training, classes and/or technical assistance** such as:
 - protecting the employees from COVID-19,
 - protecting customers from COVID-19,
 - pivoting or modifying the business model, and
 - training for long-term sustainability planning. (Businesses will be encouraged to register with the local/regional workforce council or equivalent body (Virginia Workforce Boards).
- **Rent/Mortgage: (up to \$10,000) (The \$10,000 maximum benefit amount is contingent on no assistance sought for retooling and technology activities):**
 - **Rent/Mortgage** – Rent/Mortgage will be disbursed on a reimbursement basis once the business submits documentation of expenditures via mortgage statements, lease agreements and proof of payment dated no earlier than March 12, 2020 (Date of State of Emergency).
 - All businesses will be eligible for rent/mortgage assistance up to six (6) months.
 - Taxes and insurance must be removed from the escrowed mortgage amount.
 - Only commercial space can be reimbursed. Residential or non-business space must be subtracted from the payment amount.
 - Expense documentation from the approved business will be included in a reimbursement request to DHCD.
 - Reimbursement requests to the state can take up to two (2) to three weeks, and the businesses should allow an additional 5-10 days for the Town to disburse grant funds received from the reimbursement request.

Timeline:

- Applicants can submit requests on a first-come, first-served basis until funds are depleted.

Ineligible Activities:

Due to the limited amount of available funds at this time, the activities listed below are ineligible uses:

- Payroll costs incurred to maintain existing employees (i.e. job retention)
- Utilities
- Relief from employer payroll taxes
- Costs of daily business operations
- Regular maintenance of the facility or equipment
- Refinancing of existing debts.
- Activities not deemed to be in response to COVID-19 impacts.

Required Attachments:

In addition to the COVID-19 Small Business Recovery Assistance Application, the beneficiary will also be required to provide the following supporting documentation:

- **W-9** (<https://www.irs.gov/pub/irs-pdf/fw9.pdf>)
- **2019 Federal Income Tax Return**
- **Monthly Profit and Loss Statements or Income Statements beginning January 1, 2020** to demonstrate COVID-19 impact. A monthly Profit & Loss or Income Statement is a financial statement that summarizes the revenues, costs, and expenses of operating the business and the resulting profit or loss incurred. The statements do not need to be prepared by an accountant. They may even be handwritten. If you have any questions or concerns, please contact Tamyra Vest for assistance: Phone: (434) 575-4209, Email: tvest@southboston.com.
- **Current Business License**, if applicable
- **Payroll Documentation (i.e. quarterly Form 941)**
- **Expense Documentation for what you are seeking reimbursement**
 - Space/technology upgrades – Invoices and Proof of Payment (i.e. cancelled checks, credit card statements, online bill pay transaction history, bank statements)
 - Sanitation – Invoices and Proof of Payment (i.e. cancelled checks, credit card statements, online bill pay transaction history, bank statements)
 - Rent/Mortgage – Lease Agreement, Mortgage Statement, and Proof of Payment (i.e. cancelled checks, transaction history, bank statements)
- **Prior CARES Act Documentation**
- **Dun and Bradstreet – Data Universal Numbering System (DUNS) Number:**
 - **Purpose of DUNS** - A DUNS number is a unique nine-character number used to identify your organization. The federal government uses the DUNS number to track how federal money is allocated.
 - **How to Register for a DUNS Number** - If your organization does not yet have a DUNS number, visit the Dun & Bradstreet (D&B) website (<https://fedgov.dnb.com/webform/displayHomePage.do>) or call 1-866-705-5711 to register for a DUNS number. Registering for a DUNS number is free of charge, so if you encounter any organizations or websites soliciting a fee or charge to acquire a DUNS number it is likely a scam or fraudulent. **Allow up to two business days** to obtain a DUNS number, but it can occur in one business day. You will need all of the information listed below to obtain a DUNS number:
 - Name of organization
 - Organization address
 - Name of the chief executive officer (CEO) or organization owner
 - Legal structure of the organization (e.g., corporation, partnership, proprietorship)
 - Year the organization started
 - Primary type of business
 - Total number of employees (full and part-time)

Complaints and Appeals Procedures:

During the course of the program, it is probable that business owners will make complaints. The Project Management Team will follow its written policy for handling disputes and complaints. This policy will be given to each applicant. The policy is as follows:

1. During the intake and application process, applicants will be informed that if their application is denied, they will be notified in writing that they have thirty (30) days from receipt of such notice to make a written appeal to the Grant Manager. The Grant Manager will review the appeal and issue a written response within fifteen (15) business days. If necessary, the appeal will be further reviewed by the Project Management Team, before a final decision is made.
2. When invoices and proof of payment are submitted for reimbursement, applicants will be informed that if their full reimbursement request is denied, they will be notified in writing that they have thirty (30) days from receipt of such notice to make a written appeal to the Grant Manager. The Grant Manager will review the appeal and issue a written response within fifteen (15) business days. If necessary, the appeal will be further reviewed by the Project Management Team, before a final decision is made.
3. The Grant Manager will respond to all written complaints and appeals in writing and will include an explanation of the reason(s) for the decision reached, information on the next step in the appeals process, and a specified date by which the complainant has to appeal the decision. Appeals of the Grant Manager's decision shall be addressed to the Project Management Team; appeals of that decision shall be addressed to the locality's appropriate official; and appeals to that decision shall be addressed to the Town Council. Final appeals shall be addressed, in writing, to the DHCD Community Representative. The appeal will include a copy of all correspondence that has taken place to date. The appeal will identify the problem and the desired solution. DHCD will investigate the complaint and respond, in writing, in a timely manner. All involved parties will be copied. Documentation of complaints will be kept on file in the Grant Manager's office.
4. If the complainant requires assistance in putting his or her complaint in writing, the Grant Manager will make assistance available. The same is true for appeals.

Denied Application: Write the grant manager: Tamyra Vest, 432 Main Street, South Boston, VA 24592. Email: tvest@southboston.com

Denied Full Reimbursement: Write the grant manager: Tamyra Vest, 432 Main Street, South Boston, VA 24592. Email: tvest@southboston.com

The Appeals Process: If you would like to appeal a decision made by the grant manager:

1. Write the Project Management Team at 432 Main Street, South Boston, VA 24592. Email: tvest@southboston.com
2. Write the Town Manager at 455 Ferry Street, South Boston, VA 24592.
3. Write the Town Council at 455 Ferry Street, South Boston, VA 24592.
4. Write DHCD at Main Street Centre, 600 E. Main St., Suite 300, Richmond, VA 23219.

Company Information:

(All questions should be answered or noted as inapplicable)

Business Name _____

Legal Entity Type _____

Federal Tax ID _____

Company Ownership _____

Business License #
(If Applicable) _____

Physical Address _____

Mailing Address _____

Business Owner Name _____

Email _____

Phone _____

Is this a minority-owned business? Yes No

Is this a female-owned business? Yes No

Is this a Section 3 business? Yes No

If Yes, you will need to complete supporting documentation.

A Section 3 business is a business:

- That is at least 51 percent or more owned by Section 3 residents.
- Whose permanent, full-time employees include persons, at least 30 percent of whom are currently Section 3 residents, or within three years of the date of first employment with the business concern were Section 3 residents, or
- That provides evidence of a commitment to subcontract in excess of 25 percent of the dollar award of all subcontracts to be awarded to a Section 3 business concern.

Retooling and technology activities (up to \$5,000)

Requested Amount \$ _____ for **Space and Technology Upgrades** to reopen and conduct business safely, including but not limited to furniture, barriers, signage for social distancing requirements, non-construction related modifications to enhance social distancing and limiting ingress/egress, and technology such as laptops, software, and touch-free credit card payment systems to accommodate social distancing.

Requested Amount \$ _____ for **Sanitization Supplies** including but not limited to cleaning service and/or supplies – EPA-approved disinfectants, gloves, masks, and sneeze/cough guards.

Requested Amount \$ _____ for **Job Training, Classes and/or Technical Assistance** such as protecting the employees from COVID-19, protecting customers from COVID-19, pivoting or modifying the business model, and training for long-term sustainability planning.

Rent / Mortgage (up to \$10,000) (The \$10,000 maximum benefit amount is contingent on no assistance sought for retooling and technology activities)

Requested Amount \$ _____ for **Rent/Mortgage**

- All businesses will be eligible for rent/mortgage assistance from March 12, 2020 to the time of application, or up to 6 months in rent/mortgage relief.
- Taxes and insurance must be removed from the escrowed mortgage relief.
- Only commercial space can be reimbursed. Residential or non-business space must be subtracted from the payment amount.

Company Background / COVID-19 Impact

Date Established: _____ Owner Since: _____

Current Number of Employees _____ (attach most recent quarterly 941 or supporting documentation)

Describe how the current COVID-19 situation has adversely affected your business and why you need this grant assistance.

Please describe what you need the grant funds for:

Have you received any prior CARES Act assistance (i.e. PPP, EIDL, etc.)? Yes No

Source/Type: _____ \$ _____ Applied towards: _____

Source/Type: _____ \$ _____ Applied towards: _____

If approved for assistance, I agree / do not agree to participate in three (3) virtual Small Business Recovery Workshops (2 hours each) offered by the Town of South Boston and/or the Longwood Small Business Development Center to help my business adjust to COVID-19 demands.

Yes, I agree No, I do not agree

Required Attachments:

- Completed W-9 Form**
- Most Current Federal Income Tax Return**
- Monthly Profit and Loss or Income Statements beginning January 1, 2020**
- Current Business License, if applicable**
- DUNS Number**
- Payroll Documentation verifying Number of Employees (i.e. Quarterly Form 941)**
- Prior CARES Act Documentation**
- Expense Documentation for what you are seeking reimbursement**
 - **Space/technology upgrades – Invoices and Proof of Payment (i.e. cancelled checks, online bill pay transaction history, or bank statements)**
 - **Sanitation – Invoices and Proof of Payment (i.e. cancelled checks, online bill pay transaction history, or bank statements)**
 - **Rent/Mortgage – Lease Agreement, Mortgage Statement, and Proof of Payment (i.e. cancelled checks, online bill pay transaction history, or bank statements)**

Signature: _____

Print Name & Title: _____

Date: _____