



**CITY OF ROCKY MOUNT, NORTH CAROLINA  
COVID-19 CDBG-CV Small Business Assistance Grant Program**

**Applicant Checklist**

**How To Apply:**

- Business owners may apply via mail or delivery for City of Rocky Mount’s Small Business Assistance Grant at the following address below.
- Qualifying businesses selected to receive grants will be contacted by City staff with a request to submit additional documentation prior to issuance of grant award (see below listing of additional required documentation that will be requested).
- Applications will be reviewed by City of Rocky Mount staff. If an application is incomplete and requires additional documentation, applicants will be notified and given ten (10) business days to respond or submit necessary documentation. If the applicant is unable to complete the application, it will be denied.

**Additional Required Documentation for Application Submittal:**

Below is a listing of the documentation that will be requested by City staff upon notification of selection to receive a grant:

- A copy of the applicant’s government-issued identification card or driver’s license.
- Applicant’s most recently completed form 2018,2019,or 2020 IRS Form 1040 (all owners 51% or business or more), Schedule C (sole proprietorship), Form 1120 (corporations), and other IRS forms as may be necessary to evidence for-profit business status and \$150,000 or less in annual gross revenue.
- Documentation of expenses for which the business is requesting assistance:
  - Lease or Mortgage (Rent)
  - Monthly Utility Statements
  - Receipts for PPE and other COVID-19-related costs
- Self-Certification of Income Form for Applicant / Business Owner (if the applicant / Business owner is the position used to qualify for the retained LMI job / position)
- Self-Certification of Income Form for Qualifying Employees (or QuickBooks, General Ledger, Payroll Statements or Canceled Checks to evidence payment by the business of a LMI wage for a job / position)
- City of Rocky Mount Vendor Identification Number – The City will disperse grant fund award payments directly to the applicant. Awardee will be required to enroll as a vendor and provide the City with an IRS W9 form (Request for Taxpayer Identification Number and Certification).

Please submit all required documentation to:  
331 S. Franklin Street  
Rocky Mount, NC 27804  
252-972-1100

# **Small Business Assistance Grant Program Application & Information Packet**



**ROCKY MOUNT**  
COMMUNITY AND BUSINESS  
DEVELOPMENT  
THE CENTER OF IT ALL

## **City of Rocky Mount Coronavirus, Aid, Relief and Economic Security Act Funding (CARES Act) Community Development Block Grant (CDBG-CV)**





## **Small Business Assistance Grant Program**

### **CARES Act Funding allocated to The City of Rocky Mount through the U.S. Department of Housing & Urban Development (HUD)**

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## **PART I. APPLICATION INFORMATION**

### **I. Application Introduction and Procedures**

The City of Rocky Mount invites all interested and eligible small businesses with twenty-five or fewer employees, based in the City of Rocky Mount to apply for CARES Act CDBG-CV funding to assist in the preparation, prevention and response to coronavirus.

Applications for CDBG-CV funding must be completed in full and submitted to the Department of Community and Business Development at the following location:

City of Rocky Mount  
Department of Community & Business Development  
331 S Franklin Street  
Post Office Box 1180  
Rocky Mount, NC 27802-1180  
Fax: (252) 972-1581  
cbd@rockymountnc.gov

#### Technical Assistance

City of Rocky Mount Department of Community Development staff is available to answer questions regarding CDBG-CV regulations, applicant and project eligibility and the City's application process.

Please direct questions to:

Peter Varney  
Interim  
Community Development Director  
252.972.1267

Cornelia McGee  
Community Development Administrator  
252.972.1178



## II. What is the Community Development Block Grant (CDBG) Program?

The United States Department of Housing and Urban Development (HUD) administers the Community Development Block Grant (CDBG) Program to assist low and moderate-income persons in several ways including: elimination of slums and blight, preserving and improving the supply of affordable housing, development of needed public facilities and improvements and business growth through the creation and retention of jobs and business opportunities.

The Coronavirus Aid, Relief and Economic Security Act (CARES Act) granted the City of Rocky Mount additional CDBG funding (CDBG-CV grants), specifically to

- prevent,
- prepare for, and
- respond to the coronavirus pandemic

The City of Rocky Mount has elected to use its CDBG-CV allocation to fund a grant project for small businesses affected by the coronavirus pandemic.

## III. How can CDBG-CV Funds be used?

Federal regulations require that CDBG-CV funds be used for eligible activities that meet both CDBG and CARES Act objectives. CDBG-CV funding must meet one of three national CDBG objectives:

- Benefit low- and moderate-income persons;
- Aid in the prevention or elimination of slum or blight; and
- Meet a need having a particular urgency

Additionally, CDBG-CV funding must also meet CARES Act objectives by preventing, preparing for or responding to the coronavirus pandemic.

### Eligible activities may include:

- Purchase of materials or equipment needed to convert business activities to comply with social distancing guidelines
- Purchase of safety supplies/materials for employees
- Assistance to create jobs and manufacture medical supplies necessary to respond to infectious disease



- Financial assistance for business stabilization due COVID-19 related revenue shortfalls including lease or mortgage payments, utility and payroll payments
- Assistance avoiding job loss caused by business closures related to social distancing
- Assistance to expand small businesses that provide medical, food delivery, cleaning, and other services to support home health and quarantine

**The following are examples of ineligible CDBG activities**

- General government expenses and political activities
- Religious activities
- Purchase of construction equipment
- Purchase of equipment, fixtures, motor vehicles, furnishings, or other personal property that is not a permanent structural fixture

Additionally, the City of Rocky Mount will only fund Direct Costs, which are those that have a direct and specific link to the eligible activity which can be readily identified. **Applicants must be able to prove that CDBG-CV grant funds were used for the approved use.**

Under HUD CDBG regulations, at least 70% of those benefiting from CDBG funded activities must be low and moderate-income persons. **Businesses receiving CDBG funding must be able to document that the individuals or households served fall within the HUD income limits.**

**2020 HOUSEHOLD INCOME LIMITS (Effective July 1, 2020)**

	1 Person	2 Persons	3 Persons	4 Persons	5 Persons	6 Persons	7 Persons	8 Persons
<b>Extremely Low Income (30%)</b>	12,250	14,000	15,750	<b>17,450</b>	18,850	20,250	21,650	23,050
<b>Very Low Income (50%)</b>	20,350	23,250	26,150	<b>29,050</b>	31,400	33,700	36,050	38,350
<b>Low Income (80%)</b>	32,550	37,200	41,850	<b>46,500</b>	50,250	53,950	57,700	61,400



#### **IV. Eligible Applicants**

Applicants for CDBG-CV Small Business Assistance grant funding must have:

- ✓ All applicable business insurances must be valid and up to date
- ✓ Valid and current federal and state tax ID numbers
- ✓ Employ 25 or fewer people
- ✓ Experienced a financial hardship due to COVID-19
- ✓ Must have been in existence prior to March 2020
- ✓ Cannot currently be out of business



## PART II APPLICATION

**Business Name:** \_\_\_\_\_

**Business Address:** \_\_\_\_\_

\_\_\_\_\_

**Business Owner Name:** \_\_\_\_\_

**Business Owner  
Mailing Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Cell Phone:** \_\_\_\_\_

**Business email:** \_\_\_\_\_

**FEDERAL TAX ID #:** \_\_\_\_\_

**DUNS #** \_\_\_\_\_ **Issue Date:** \_\_\_\_\_

**\*Business has been operating prior to March 2020.**

**How long as the applicant owned/operated this business?** \_\_\_\_\_

**Number of employees, including owner:**

Full Time	Part Time	Total

**Describe in detail the type of service/products your business does/will offer:**





**Please select one option below: (Refer to 2020 Household Income Limits)**

**Option 1: Business Owner Low-Moderate Income Certification**

**List all personal household members and income for each.**

Household Member	Income Source	Income Amount
<b>Household Income Total</b>		<b>\$</b>

Provide proof of income for all household members. Documentation may include:

- tax statements
- pay stubs
- government benefit award letter
- retirement account statements

**Option 2: Low-Moderate Income Employees Retained or Hired certification**

**A. Provide documentation of employees fired or furloughed due to coronavirus or employees hired to assist the business in preventing, preparing for, or responding to the coronavirus pandemic.**

Position	Years with Business	Fired? Yes/No	Hours Cut or Furloughed?

Documentation may include:

- Proof of unemployment insurance dated after March 2020
- Certified payrolls

**List all personal household members and income for each employee.**

Household Member	Income Source	Income Amount
<b>Household Income Total</b>		<b>\$</b>

**B. Provide Documentation of each employees Low-Moderate Income eligibility.**

**C. Provide Documentation of increased employment by low-moderate income individuals due to CDBG-CV grant funding (new hires or increased hours).**



**CARES Act Eligibility:** Use of CARES Act funds must be used to prevent, prepare for, or respond to the coronavirus pandemic. Please certify the business eligibility.

**COVID-19 (CV) IMPACT \*(as of March 2020)**

	Yes	No	Please Describe:
Profit loss of 25% or more?	<input type="checkbox"/>	<input type="checkbox"/>	
Temporary Closure	<input type="checkbox"/>	<input type="checkbox"/>	
Layoffs/Retention of employees?	<input type="checkbox"/>	<input type="checkbox"/>	
Payroll limitations?	<input type="checkbox"/>	<input type="checkbox"/>	
Need to purchase specialized equipment or supplies?	<input type="checkbox"/>	<input type="checkbox"/>	
Other: _____ provide a detailed description	<input type="checkbox"/>	<input type="checkbox"/>	

**INTENDED USE OF CDBG-CV FUNDS**

Small Business Assistance funds can be used for:

- Financial stabilization and support
- Technical assistance
- Professional advice and business services
- Installation of equipment to ensure a safe working environment
- Purchase of equipment used to ensure a safe working environment

**Describe the intended use of the CDBG-CV Grant funds:**



**Total CDBG-CV Request:**

\$ \_\_\_\_\_

**\*MAXIMUM GRANT AMOUNT  \$5,000 OR  \$10,000**

**Describe the financial requirements needed to reopen or remain open, including other potential funding sources:**

	Total funds needed	CDBG-CV Request	OTHER (Federal, State, Local, private loans)
Working Capital	\$	\$	\$
Payroll	\$	\$	\$
Rental Costs	\$	\$	\$
Profit Loss	\$	\$	\$
Increased Insurance Costs	\$	\$	\$
Equipment Purchase	\$	\$	\$
Purchase of Health/Safety Consumable Products	\$	\$	\$
Other. Provide a Detailed Description:	\$	\$	\$

\*Note: The use of federal funding in excess of \$2,000 for construction, alterations, or repairs (including painting and decorating) of buildings is subject to Davis Bacon prevailing wage requirements.

**Please provide a timeline for the implementation of your proposed CDBG-CV funded project/activity. If awarded, the applicant will need to provide proof that the funds were used for the requested purpose.**

Activity	Start Date	End Date

**Duplication of Benefits Affidavit:**

In order to prevent duplication of benefits (double dipping) applicants must identify any other sources of funds that the business has received as a result of the coronavirus pandemic other than insurance. Sources of funds include but are not limited to: Federal, state and local loan/grant programs, private or bank loans, nonprofit donations or loans. Please indicate below the amount received by your business from any and all funding sources.

Source of Funds #1

Lender/Grant Provider Name			
Purpose			
Amount			
<input type="checkbox"/> Government Loan	<input type="checkbox"/> Government Grant	<input type="checkbox"/> Government Forgivable Loan	
<input type="checkbox"/> Nonprofit Grant	<input type="checkbox"/> Nonprofit Loan	<input type="checkbox"/> Nonprofit Forgivable Loan	
<input type="checkbox"/> Private Loan	<input type="checkbox"/> Other: _____		

Source of Funds #2

Lender/Grant Provider Name			
Purpose			
Amount			
<input type="checkbox"/> Government Loan	<input type="checkbox"/> Government Grant	<input type="checkbox"/> Government Forgivable Loan	
<input type="checkbox"/> Nonprofit Grant	<input type="checkbox"/> Nonprofit Loan	<input type="checkbox"/> Nonprofit Forgivable Loan	
<input type="checkbox"/> Private Loan	<input type="checkbox"/> Other: _____		

Source of Funds #3

Lender/Grant Provider Name			
Purpose			
Amount			
<input type="checkbox"/> Government Loan	<input type="checkbox"/> Government Grant	<input type="checkbox"/> Government Forgivable Loan	
<input type="checkbox"/> Nonprofit Grant	<input type="checkbox"/> Nonprofit Loan	<input type="checkbox"/> Nonprofit Forgivable Loan	
<input type="checkbox"/> Private Loan	<input type="checkbox"/> Other: _____		



Receiving other funding assistance does not automatically disqualify the business from receiving CDBG-CV grant funding. However, the amount of funding under this program may be reduced depending on the documented need.

Please note that any application submitted by the applicant for other sources of funding must include any CDBG-CV funds awarded under this program.

By executing this Affidavit, Applicant(s) acknowledge and understand that Title 18 United States Code Section 1001: (1) makes it a violation of federal law for a person to knowingly and willfully (a) falsify, conceal, or cover up a material fact; (b) make any materially false, fictitious, or fraudulent statement or representation; OR (c) make or use any false writing or document knowing it contains a materially false, fictitious, or fraudulent statement or representation, to any branch of the United States Government; and (2) requires a fine, imprisonment for not more than five (5) years, or both, which may be ruled a felony, for any violation of such Section.

Dated this the \_\_\_\_ day of \_\_\_\_\_, 2021.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Name and Title of Applicant (Please Print or Type)

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date



### **Maintenance and Operations Commitment**

Any equipment purchases or installation made with CDBG-CV funds must be kept in good working order for its intended purpose. The applicant must be willing to assume the maintenance and operation responsibility and costs associated with the purchase of any equipment purchased through this grant.

The sale of equipment purchased with CDBG-CV funds must be reported to the City of Rocky Mount Department of Community Development and may be subject to repayment provisions under 24 CFR 85.32.

NOTE: Community Development Block Grant funds of any kind may not be utilized for ongoing maintenance and operation costs of building improvements/equipment.

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Signature of Authorized Applicant Representative

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Name and Title of Authorized Applicant Representative (Please Print or Type) Date



**City of Rocky Mount CDBG Beneficiary Information:**

<b>RACE/ETHNICITY</b>	<b>CHECK ONE</b>
<b>White</b>	<input type="checkbox"/>
<b>Black/African American</b>	<input type="checkbox"/>
<b>Asian</b>	<input type="checkbox"/>
<b>American Indian/Alaskan Native</b>	<input type="checkbox"/>
<b>Native Hawaiian / Other Pacific Islander</b>	<input type="checkbox"/>
<b>American Indian / Alaskan Native and White</b>	<input type="checkbox"/>
<b>Asian and White</b>	<input type="checkbox"/>
<b>Black / African American and White</b>	<input type="checkbox"/>
<b>American Indian / Alaskan Native and Black / African American</b>	<input type="checkbox"/>
<b>Other Race/Ethnicity (Specify)</b>	<input type="checkbox"/>

Do you identify yourself as Hispanic/Latino (Cuban, Mexican, Puerto Rican, South/Central American or other Spanish culture)?  Yes  No

The City of Rocky Mount has received CARES Act (CDBG-CV) funding through Community Development Block Grant. In order to ensure the City complies with reporting requirements data is assed of how housing and community development program funds are being used to serve the beneficiaries of HUD-funded programs.

An important element of reporting beneficiary information to HUD is for many purposes:

- To ensure grantees are complying with program requirements and policies
- To provide demographic and income information about the persons that benefited from a community's activities
- To monitor grantee programs





The Undersigned Certifies the Application Submitted is:

- a) The information contained in this application and supporting documents are complete and accurate;
- b) The proposed program/project described in this application meets the National Objective of benefiting low and moderate-income persons, as defined by CDBG Federal Regulations;
- c) The proposed program/project described in this application meet one or more of the objectives for CARES Act related activities;
- d) The applicant shall comply with all Federal, State and City laws, policies and requirements affecting the CDBG-CV Program; and
- e) If the project includes the purchase of equipment or facility improvements, the applicant shall maintain and operate the equipment and/or facility for its approved use throughout its economic life.

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Signature of Applicant

Date



## **PART III CERTIFICATIONS**

### **BUSINESS ENTITY CERTIFICATION**

I certify that all information reported in this application and attached is true, accurate and complete to the best of my belief and knowledge.

I will provide written notice of any changes or additions to this information. I also understand the business entity may need to provide additional information during the application process and if funded.

I understand a written contract will be required between the Business Entity and City upon award of funds.

I am aware that the submission of this application does not guarantee funding by the City of Rocky Mount.

I am aware that the City will verify that the business entity and any principles are not on the Suspended or Debarred List.

I am aware that the City may conduct a background and/or credit check for the business entity and any principles.

I am aware that all CDBG-CV projects/programs must pass all applicable environmental reviews.

I am aware that I must provide affidavits of income for all employees retained or rehired by use of the CDBG-CV funds upon funding award.

All required documentation, including attachments, has been included in the original application. I certify that I have either submitted one original hard copy document with all attachments as instructed or electronically submitted one file containing all documents and attachments saved in Adobe Acrobat format.

***I certify that I am authorized to make this application on behalf of the business entity and have been designated as such by the submission of Business Incorporation documents or DBAs.***

Signature \_\_\_\_\_ Date \_\_\_\_\_



**CERTIFICATION OF NO SUPPLANTED FUNDING**

Federal law prohibits recipients of federal funds from replacing state, local, or business entity funds with federal funds. Federal funds **may not** supplant/displace existing funds for a project and its individual sub- activities, including staff costs and general operating costs.

Business Entity certifies that:

- (1) CDBG and CDBG-CV funds, if awarded, will not supplant funds received from other Federal, State or local government sources, or funds independently generate by the expenditures from other Federal, State, or local sources or funds independently generated by the business entity;
- (2) CDBG and CDBG-CV funds, if awarded, will not supplant any funds used to leverage other funding; and
- (3) CDBG and CDBG-CV funds, if awarded, will not be used to supplant other funds provided directly to employees by the business entity, other programs, or direct Federal, State, or local funding.
- (4) CDBG and CDBG-CV funds are being awarded to be used as Gap Funding only.

**CERTIFICATION OF NUMBER OF FULL TIME EQUIVALENT EMPLOYEES**

To be eligible for funding with City of Rocky Mount's program, the business must have no more than 25 full-time equivalent employees for Small Economic Business.

To be eligible for funding with City of Rocky Mount's program, the business must have no more than 25 full-time equivalent employees including the owner for Small Businesses.

**Business Entity certifies that:**

- (1) As of the date of this Application, the business has no more than 25 full-time equivalent employees including the owner.

Signature \_\_\_\_\_ Date \_\_\_\_\_



**CERTIFICATION OF 6 MONTHS OF CONTINUED OPERATIONS**

**To be eligible for funding with City of Rocky Mount's program, the business must agree to remain operating as a business at its location in City of Rocky Mount, North Carolina for a period of no less than 6 months following receipt of the award. If business operations do not continue after 6 months of award your business will not be able to apply for any CDBG-CV funding for a minimum of 1 year.**

Business Entity certifies that:

- (1) The business will continue operating as a business in Rocky Mount, North Carolina for a period of not less than 6 months following receipt of the award.

Signature \_\_\_\_\_ Date \_\_\_\_\_



**ANTI-LOBBYING STATEMENT**

**The anti-lobbying provisions will apply to any person who is an employee, agent, consultant, officer, elected or appointed official of the sub recipient that is receiving CDBG-CV funds.**

Applicant certifies that:

1. No Federal funds have been paid or will be paid, by or on behalf of the applicant, to any person for influencing or attempting to influence an officer or employee of the awarding of any Federal, state or municipal contract, the making of any Federal or municipal grant, the making of any Federal or municipal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment or modification of any Federal, state or municipal contract, grant, loan or cooperative agreement.
2. If any funds other than Federal funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any Federal or municipal agency/department, Member of Congress, an officer or employee of Congress, an employee of a Member of Congress, Mayor, City Council member, or employee of the Mayor or a City Council member in connection with this application, contract, grant, loan or cooperative agreement, it will complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions; and
3. It will require that the language of paragraph 1 and 2 of this anti-lobbying certification be included in the award documents for all subcontractor awards at all tiers.

**OTHER CDBG-CV RELATED CERTIFICATIONS**

**Overall Benefit:** The business entity certifies that the CDBG-CV funds awarded by the City of Rocky Mount will be used only for the benefit of employees affected by COVID-19 and that those receiving the benefit are low- to moderate-income employees.

**Compliance with Anti-discrimination laws:** The programs funded in part or totally by CDBG-CV will be conducted and administered in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act (42 USC 3601-3619, and implementing regulations, as amended.

**Compliance with Laws:** The business entity will comply with all applicable local, state and federal laws.

Signature \_\_\_\_\_ Date \_\_\_\_\_