

# City of Deming Small Business Continuity Grant Application

## **CARES Act Relief Funds**

The CARES Act provides that payments from the Fund may only be used to cover costs that—

1. Are necessary expenditures incurred due to the public health emergency with respect to the Coronavirus Disease 2019 (COVID-19);
2. Were not accounted for in the budget most recently approved as of March 27, 2020 (the date of enactment of the CARES Act) for the State or government; and
3. Were incurred during the period that begins on March 1, 2020, and ends on December 30, 2020.

The State of New Mexico is providing Coronavirus Aid Relief funds to reimburse costs for expenses due to COVID-19.

**\*\*\*IMPORTANT: PLEASE READ ALL OF THE CORONAVIRUS RELIEF FUND GUIDANCE FOR STATE, TERRITORIAL, LOCAL, AND TRIBAL GOVERNMENTS INFORMATION.**

APPLICATIONS ARE FINAL UPON SUBMISSION, THEREFORE, ADDITIONAL INFORMATION WILL NOT BE REQUESTED OR CONSIDERED EXCEPT FOR THE DOCUMENTS LISTED BELOW.

## **Who can apply?**

- This grant is available to qualifying small businesses with 50 or fewer full-time equivalent employees in New Mexico as long as funding remains for the program. The grant proceeds must be spent on eligible “business continuity” expenses. In addition, you may qualify for additional funding for “business redesign” expenses necessary to adopt COVID Safe Practices, and eligible expenses for both portions of this grant program outlined below.
- To be eligible, your company must be headquartered in New Mexico and either have been forced to close or severely curtail business operations as a result of closure orders from the state and have an annual revenue of \$2 million or less prior to the impact of COVID-19. The business must have also had a start date of March 1, 2019 or prior.

## **Who is not eligible to apply?**

- Businesses headquartered outside of New Mexico
- Businesses exceeding 50 full-time equivalent employees
- Businesses with annual revenue exceeding \$2 million
- Businesses that started after March 1, 2020
- Businesses that were not forced to close or had severely curtailed business operations as a result of closure orders from the state

## **What documents are required?**

- Completed application form (submitted online)

All documentation listed below are required upon execution of the grant award:

1. Certificate of Good Standing (if applicable)
2. City of Deming Business License
3. Payroll documentation (NM Workforce Solutions quarterly reports for January 2020-Present)

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4. Documentation of March and April 2019 total gross receipts (NM Tax & Revenue Quarterly Reports)
5. Most recent taxes documenting net taxable income
6. Unemployment insurance tax documentation for the fourth quarter of 2019 (NM Workforce Solutions quarterly reports)
7. Completed W9 Form

## **What expenses will be reimbursed?**

### Business Continuity:

- Non-owner employee payroll
- Rent
- Scheduled mortgage payments
- Insurance
- Utilities
- Marketing

### Business Redesign:

- Reconfiguring physical space
- Installing plexiglass barriers
- Purchasing web-conferencing or other technology to facilitate work-at-home
- PPE for employees
- Temporary structures to mitigate the spread of Covid-19

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1. Name of Business \_\_\_\_\_
2. Point of Contact \_\_\_\_\_
3. Physical Business Address \_\_\_\_\_  
\_\_\_\_\_
4. Mailing Address \_\_\_\_\_  
\_\_\_\_\_
5. Phone Number \_\_\_\_\_
6. Email Address \_\_\_\_\_
7. Do you have an annual revenue of \$2 Million or Less?
  - ☐ Yes
  - ☐ No
8. Is your business headquartered in NM?
  - ☐ Yes
  - ☐ No
9. Date your business was established? \_\_\_\_\_
10. Was your business negatively financially impacted by the COVID-19 Pandemic?
  - ☐ Yes
  - ☐ No
11. Was your business (check all that apply):
  - ☐ Mandated to close for any period of time
  - ☐ Mandated to reduce operation or service
  - ☐ Mandated to curtail services in any way
  - ☐ Decrease staff
  - ☐ Close your business due to lack of revenue/no customers
12. Have your business costs increased due to COVID-19 Pandemic?
  - ☐ Less than 5%
  - ☐ 6%-10%
  - ☐ 11%-25%
  - ☐ Greater than 25%
13. Current number of full time employees (2 half-time employees are equivalent to 1 full-time employee) \_\_\_\_\_
14. Is your Combined Reporting System Number (CRS#) compliant?
  - ☐ Yes
  - ☐ No
15. What is your CRS#? \_\_\_\_\_

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16. What is your Federal Employer Identification Number (FEIN#) \_\_\_\_\_

17. Was your City of Deming Business License renewed between January 1, 2020 and March 31, 2020?

- ☐ Yes
- ☐ No

18. Please Identify how you will utilize funding (check all that apply):

Business Continuity

- ☐ Non-owner employee payroll
- ☐ Rent
- ☐ Scheduled mortgage payments
- ☐ Insurance
- ☐ Utilities
- ☐ Marketing
- ☐ Business Redesign Only
- ☐ Other

19. Please identify how you will utilize funding (check all that apply):

Business Redesign

- ☐ Reconfiguring physical space
- ☐ Installing plexiglass barriers
- ☐ Purchasing web conferencing or other technology to facilitate work-from-home
- ☐ PPE for employees
- ☐ Temporary structures to mitigate the spread of COVID-19
- ☐ Business continuity only
- ☐ Other

20. If you indicated other above, please explain in detail how you plan to utilize the funds: \_\_\_\_\_

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21. How much are you requesting for reimbursement? \_\_\_\_\_

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22. Have you received funding from any other sources? (Check all that apply)

- ☐ Economic Injury Disaster Loan (EIDL)
- ☐ Paycheck Protection Program (PPP)
- ☐ Local Economic Stimulus Fund (Cycle 1)
- ☐ Local Economic Stimulus Fund (Cycle 2)
- ☐ Other
- ☐ Have not received any other funding

23. Please indicate how much you received from each program listed above (if applicable)\_\_\_\_\_

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24. I, A LEGAL REPRESENTATIVE OF THE BUSINESS APPLYING, ACKNOWLEDGE THAT ALL INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I WILL UTILIZE ANY FUNDS AWARDED IN COMPLIANCE WITH THE CARES FUNDING GUIDELINES.

- ☐ Agree
- ☐ Disagree

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## Required Document Uploads:

1. Certificate of Good Standing
2. Copy of Current Business License
3. Copy of Payroll Reports (NM Workforce Solutions if applicable)
4. Exhibit 3—Payroll Documentation (if applicable)
5. Gross Receipts Reports (NM Tax & Rev)
6. Most Recent Tax Filings
7. Unemployment Insurance Reports (if applicable)
8. Completed W-9 Request Form
9. Receipts/Proof of Payment/Paid Invoices
10. Exhibit 4—Detailed Reimbursement Request