

**Delco Strong Small Business Support
Grant Program**

APPLICATION QUESTIONNAIRE

Business Information General

Business Legal Name: _____

d/b/a if operating under a different name: _____

Year Business was founded: _____

State business was organized or incorporated in: _____

Business Physical Address Street Address: _____

City, State Zip Code _____

Business Website Address: _____

Federal EIN: _____ - _____

Type of Business: _____

2-digit NAICS Code: _____

Business Ownership

Please list the names and addresses of all individuals/companies with 20% or more ownership in applicant Business:

Owner 1: _____ Percent Owner: _____

Address: _____

Owner 2: _____ Percent Owner: _____

Address _____

Owner 3: _____ Percent Owner: _____

Address: _____

Owner 4: _____ Percent Owner: _____

Address: _____

Owner 5: _____ Percent Owner: _____

Address: _____

Business Employment

Number of full-time employees on business payroll on March 1, 2020: _____

Number of full-time employees on business payroll today: _____

Have you furloughed or laid off employees? (circle one) Yes No

COVID-19 Related Questions

Is the business open? (circle one) Yes No Partially

Is this business closed or partially closed due to COVID-19 shut down? (circle one) Yes No

If yes, what is the estimated revenue loss the business experienced for March/April? (circle one)

0% 25% 50% 75% 100%

Has business or owner applied for relief programs? (circle one for each)

SBA Economic Injury Disaster Relief (EIDL) Yes No

SBA Paycheck Protection Program (PPP) Yes No

Pennsylvania COVID-19 Working Capital (CWCA) Yes No

Pennsylvania Pandemic Unemployment Assistance (PUA) Yes No

If you answered yes has Business been awarded funding?
Please indicate from which program and amount of award:

Program: _____ Amount: \$ _____

Program: _____ Amount: \$ _____

Program: _____ Amount: \$ _____

Program: _____ Amount: \$ _____

Post COVID-19 Questions

Does the business have a plan for emerging from the Commonwealth of Pennsylvania COVID-19 shutdown?
(please describe in 500 characters maximum)

Is the Business interested in resources for coming out of Commonwealth of Pennsylvania COVID-19 shutdown?
(circle all that apply)

- | | | | |
|-------------------------------|--------------|-------------------|--------|
| Marketing/Promotion | Accounting | Legal | Safety |
| Cleaning of physical location | Health | Finding Employees | |
| Working Capital Resources | Supply Chain | Technology | |

Other: _____

Contact Information

Name: _____

Title: _____

Phone Number: _____

Email: _____

Primary Language Spoken of Business contact person: _____

Acknowledgements

I acknowledge that I am an owner or authorized by the owners of the business to submit this application, and that all of the information submitted is true to the best of my ability on the date of submission. _____(initial block)

I attest that the business is current on all taxes. Further, I acknowledge that if awarded through this program I am responsible for any reporting requirement and tax payment obligation at the state and federal level. _____(initial block)

I acknowledge that applicants and grantees for this program are responsible for following the rules, regulations, and contract stipulations of loan and grant programs regardless of the source of funds; furthermore, I acknowledge that it is the responsibility of a grantee to use and report on all funds appropriately whether sourced from County Level Authority, State, or Federal government programs. _____(initial block)

I acknowledge that by submitting this application, I am not automatically awarded funding. _____(initial block)

I acknowledge that if my business is awarded funding that all owners that hold 20% or more interest in the business will be required to execute a contract with the Delaware County Economic Development Oversight Board in order to receive grant funds. _____(initial block)

PRINT FULL LEGAL NAME: _____

SIGNATURE: _____

DATE: _____

Application Submission

Electronic

Electronic submission of application for this program will only be accepted online May 6, 2020 between 12:01 am and 11:59 pm. To submit an electronic application for the Delco Strong Small Business Support Grant Program, Please do so here: <https://www.delcostrong.delcopa.org>

Paper

Paper submission of application for this program will only be accepted at the following location -
Delaware County Courthouse; 201 W. Front Street, Media, PA 19063 On May 6, 2020
between the hours of 12 noon and 4:30 pm and On May 7, 2020 between the hours of
8:30am and 1:00pm
Please seal application in an envelope with Business Name and Contact Name on front.

Full Application

Only full and complete applications will be reviewed for this grant program. Full and complete applications include:

- Application Questionnaire completed with acknowledgements initialed and signed by submitter.
- A copy of the most recent tax return submitted for business, signed.
- 2019 Financial Statements
- 1st Quarter 2020 financial statements (January through March)
- W9 Executed by the Business
- Copies of invoices for grant award consideration included with submission.