



Small Business  
Development Centers  
at Lorain County  
Community College

**Lorain County COVID-19 Small Business Emergency Relief Grant Application:**

1. Business Name: \_\_\_\_\_
2. Owner Name: \_\_\_\_\_
3. Business Address (no PO Box): \_\_\_\_\_
4. Phone Number: \_\_\_\_\_
5. Email Address: \_\_\_\_\_
6. Type of Business (LLC, sole proprietorship, etc.): \_\_\_\_\_
7. EIN Number: \_\_\_\_\_
8. How many years in business in Lorain County: \_\_\_\_\_
9. Please provide a brief description of the business or the goods/services sold:  
\_\_\_\_\_  
\_\_\_\_\_
10. Has this business applied for the SBA Economic Injury Disaster Loan (EIDL)? Please provide the app # you received from the SBA \_\_\_\_\_
11. Has this business applied for the SBA Paycheck Protection Program (PPP)? Please provide the app # you received from the SBA \_\_\_\_\_
12. List your banking institution you are working with on the PPL Loan. \_\_\_\_\_
13. Number of Employees on March 15, 2020 (include part timers of 20 hours or more): \_\_\_\_\_
14. Number of Employees that are Lorain County residents: \_\_\_\_\_
15. Number of Employees as of the date of this application filing: \_\_\_\_\_
16. Number of jobs you plan to retain between now and June 30, 2020: \_\_\_\_\_
17. Annual operating revenue for the calendar year 2019: \$ \_\_\_\_\_
18. Annual operating expenses for the calendar year 2019: \$ \_\_\_\_\_
19. Average monthly payroll expense for the calendar year 2019: \$ \_\_\_\_\_
20. What is your monthly rent or mortgage payment: \$ \_\_\_\_\_
21. Please provide your 2020 year-to-date operating revenue: \$ \_\_\_\_\_
22. Please provide your 2020 year-to-date operating expenses: \$ \_\_\_\_\_
23. Estimate the business' lost revenue due to COVID-19 through June 30, 2020: \$ \_\_\_\_\_
24. Estimate any increased business expense due to COVID-19 through June 30, 2020: \$ \_\_\_\_\_
25. Describe how COVID-19 has impacted your business, including an explanation of any lost revenues and increased expenses indicated above. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
26. Enter the dollar amount requested (not to exceed \$2,500.00): \$ \_\_\_\_\_

27. Explain how the business will use these grant funds. Please indicate specific expenses such as payroll, rent, mortgage, utilities, equipment leases, insurance, or other expenses. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The undersigned certifies that he/she is authorized to complete, sign and submit this application on behalf of the applicant/owner. Further, the undersigned certifies that the information contained in this application has been reviewed by him/her and that all information, including additional documents, are, to the best of his/her knowledge, complete and accurate and presents fairly the condition of the applicant and project accurately. Intentionally falsifying information in this document constitutes a criminal offense. The undersigned hereby authorizes the Chamber to investigate the credit worthiness and of the undersigned, and/or applicant if the Chamber deems it necessary. The undersigned understands that additional information may be required to finalize the approval process. The undersigned also understands that the submission of the application for financial assistance does not automatically constitute approval. By signing below, I acknowledge that I have read, understand, and agree to the policies and procedures outlined in this document. I further agree to be interviewed, photographed and/or have my business photographed for economic development marketing purposes. If you have questions, please contact the Lorain County Chamber of Commerce or SBDC at LCCC.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

***Typed name can substitute for actual signature.***

ADDITIONAL DOCUMENTATION: All applicants must submit: (i) a copy of their existing lease (or mortgage); (ii) show proof or evidence that business was in good standing on paying rent (or mortgage) prior to the Governor's order shutting down non-essential businesses in the State of Ohio; and (iii) Completed Form W-9. Applications will not be considered until all documents have been received.