

**Mayor**  
James Jess  
**Chief Administrative Officer**  
Jordan Green  
**City Attorney**  
Peter Elverum  
**City Clerk**  
Cyndi Thompson  
**Compliance Officer**  
Suzan Callahan  
**Public Works Superintendent**  
Trent Freeman  
**Treasurer**  
Stanley Glovan  
**Utility Billing Clerk**  
Gena Micu



*Montana's Undiscovered Treasure*

300 MAIN STREET  
DEER LODGE MT 59722-1057  
406.846.2238

**City Council**  
Dick Bauman  
Joe Callahan  
Curt Fjelstad  
Jackie Greenwood  
John Henderson  
Robert Kersch  
John J. Molendyke  
John Skibsrud

## LOCAL RECOVERY FUNDS GRANT APPLICATION FOR SMALL BUSINESSES AND NONPROFITS

**Organization:** \_\_\_\_\_ **EIN#:** \_\_\_\_\_

**Applicant Name:** \_\_\_\_\_ **Role in Organization:** \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_ **Date Organization Started:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Organization Address:** \_\_\_\_\_

**Type of Organization:**  **Small Business** (must meet requirements for impacted small business)  
 **Non-Profit** (must meet requirements for impacted non-profits)

**Amount Requested to be Granted and/or Reimbursed:** \_\_\_\_\_

*In order to assist as many organizations as possible, there is a \$5,000 cap to grants unless there is proof of exceptional need.*

**Note: Funds must be obligated by December 31, 2024 and expended by December 31, 2026. In your description, please provide a detailed timeframe for expenditures for which you are requesting to be granted or reimbursed that will satisfy these obligation and expenditure requirements.**

**Description of Request:**

---

---

---

---

---

**Note: Please be as descriptive as possible. Applicants must prove impact from the effects of COVID-19 following the guidelines described on the following pages of this application. Please attach any proof or additional descriptions as necessary for application to be processed.**

**Justification of Request:**

---

---

---

---

---

**FOR SMALL BUSINESSES:**

***Please confirm and provide proof your business meets the following requirements for a small business:***

1. Has no more than 500 employees; and
2. Is a small business as defined in section 3 of the Small Business Act (15 U.S.C 632) which includes among other requirements, that the business is independently owned and operated and is not dominant in its field or operation.

- Please check box if your business has previously received funding from federal or state government sources in response to the COVID-19 pandemic (note: this is for information purposes only and will not exclude your business from consideration).

***Please identify, explain, and provide proof of how your small business has been impacted by the COVID-19 pandemic. The allowable considerations are as follows:***

- |                                                                                                   |                                                                         |
|---------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| <input type="checkbox"/> Decreased Revenue or Gross Receipts                                      | <input type="checkbox"/> Financial Insecurity                           |
| <input type="checkbox"/> Increased Costs                                                          | <input type="checkbox"/> Lack of Capacity to Weather Financial Hardship |
| <input type="checkbox"/> Challenges Covering Payroll, Rent or Mortgage, And Other Operating Costs |                                                                         |

***Please identify and explain the category of aid for which you are applying for funding/reimbursement:***

- Grants to mitigate financial hardship, such as supporting payroll and benefits, costs to retain employees, and to cover operating costs such as mortgage, rent, and utilities.
- Grants to acquire technical assistance, business counseling, or other business planning services.
- Grants for rehabilitation of commercial properties, storefront improvements, and façade improvements.
- Grants to cover small business start-up or expansion costs.
- Support for financial, transportation, and childcare costs for small and microbusinesses.

## **FOR NONPROFITS:**

***Please confirm and provide proof that your nonprofit meets the following requirements:***

1. Is a 501(c)(3), 501(c)(19) or other tax-exempt organization.

***Please identify, explain, and provide proof of how your nonprofit has been impacted by the COVID-19 pandemic. The allowable considerations are as follows:***

- |                                                                                                   |                                                                         |
|---------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| <input type="checkbox"/> Decreased Revenue from Donations/Fees                                    | <input type="checkbox"/> Financial Insecurity                           |
| <input type="checkbox"/> Increased Costs                                                          | <input type="checkbox"/> Lack of Capacity to Weather Financial Hardship |
| <input type="checkbox"/> Challenges Covering Payroll, Rent or Mortgage, And Other Operating Costs | <input type="checkbox"/> Uncompensated Increases in Service Need        |

***Please identify and explain the category of aid for which you are applying for funding/reimbursement:***

- Grants to mitigate financial hardship, such as supporting payroll and benefits, costs to retain employees, and to cover operating costs such as mortgage, rent, and utilities.
- Grants to acquire technical assistance or in-kind assistance that mitigate negative economic impacts of the pandemic.
- Grants for rehabilitation of commercial properties, storefront improvements, and façade improvements.

---

**\*\*\*APPLICATIONS ARE DUE END OF DAY ON AUGUST 1, 2022\*\*\***

### **NOTE:**

All grants that will be awarded must be for allowable expenditures as detailed in this application and the U.S. Department of the Treasury "Coronavirus State and Local Fiscal Recovery Funds Final Rule." Applicants are responsible for adhering to the allowable expenditures and if they fail to do so or do not provide proof of allowable expenditures within the timeframe specified in the application, they will be required to return any and all funding disbursed by the City and/or forego all rights to reimbursement using Deer Lodge Local Fiscal Recovery Funds.

Please allow 30 days after due date for review and approval of applications. Disbursement or reimbursement for allowable expenditures will occur upon approval by the City during the next City of Deer Lodge monthly claims cycle.

***The City of Deer Lodge does not discriminate based on race, color, religion, national origin, creed, sex, marital status, political belief, age, disability, or any other characteristic provided by law.***