Mayor

James Jess

**Chief Administrative Officer** 

Jordan Green

**City Attorney** 

Peter Elverum

City Clerk

Cyndi Thompson

**Compliance Officer** 

**Public Works Superintendent** 

Trent Freeman

Stanley Glovan

Utility Billing Clerk

Gena Micu



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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:	
<u></u>	nall Business (must meet requirements for impacted small business) on-Profit (must meet requirements for impacted non-profits)
•	ted and/or Reimbursed:as possible, there is a \$5,000 cap to grants unless there is proof of exceptional need.
	cember 31, 2024 and expended by December 31, 2026. In your description, for expenditures for which you are requesting to be granted or reimbursed expenditure requirements.
Description of Request:	
	<del></del>

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 S	MALL BUSINESSES:					
Please o	confirm and provide proof your business med	ets t	he following requirements for a small business:			
	<ol> <li>Has no more than 500 employees; and</li> <li>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.</li> </ol>					
S	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).					
	<u>identify, explain, and provide proof</u> of how y demic. The allowable considerations are as f		small business has been impacted by the COVID- ws:			
	Decreased Revenue or Gross Receipts		Financial Insecurity			
□ I	Increased Costs		Lack of Capacity to Weather Financial Hardship			
	Challenges Covering Payroll, Rent or Mortgage, And Other Operating Costs					
Please i	identify and explain the category of aid for v	vhic	h you are applying for funding/reimbursement:			
	Grants to mitigate financial hardship, such as su and to cover operating costs such as mortgage,		orting payroll and benefits, costs to retain employees, t, 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 <u>identify, explain, and provide proof</u> of how your nonprofit has been impacted by the COVID-19 pandemic. The allowable considerations are as follows:					
	Decreased Revenue from Donations/Fees	Financial Insecurity			
	Increased Costs	Lack of Capacity to Weather Financial Hardship			
	Challenges Covering Payroll, Rent or Mortgage, And Other Operating Costs	☐ 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 employee 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 proper	rties, 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.