

## Hays County Emergency Cash Assistance Program Grant Application

Please submit the following application if you would like to be considered for a Hays County Emergency Cash Assistance Program Grant. You must answer all questions for your application to be complete. Only completed applications will be reviewed.

For questions in regards to your eligibility or for assistance with this application, you can call 512-222-1016 and a PeopleFund team member will be able to help. You can also fill out a request for assistance using this short form and a PeopleFund team member will respond within one business day:

<https://peoplefund.org/hays/>.

### APPLICANT CONTACT INFORMATION

Applicant First Name:

Applicant Last Name:

Applicant Phone Number:

Applicant Email Address:

### BUSINESS INFORMATION

Business Name (must match state or county business registration):

Business Address:

Line One (street address):

Line Two (Office/Suite #):

Line Three (City):

Line Four (Zip Code):

Employer Identification Number or Social Security Number:

Website or Social Media page (if you do not have a business website, please leave blank):

1. Is your business located within Hays County?

Yes  No

**\*\*Your business must be located within Hays County to be considered eligible for this grant.**

2. How many "Qualifying Employees" does your business have?

(Definition: A "Qualifying Employee" is any employee earning up to \$98,914.50 on an annualized basis and who does not have an ownership interest in the business of greater than ten percent (10%). Part-time employees and their wages shall be converted to full-time equivalents on the basis of the total hours worked during the months of January and February 2020 divided by 320 hours. Relatives of an owner shall only be deemed a Qualifying Employee if they can be documented as being a part of the business' January and February 2020 payroll. Independent contractors shall not be counted as a Qualified Employees.)

10 or fewer

More than 10

**\*\*Your business must have 10 or fewer qualifying employees to be considered eligible for this grant.**

3. Has your business experienced a loss in business profit due to COVID-19?

Yes  No

**\*\*Your business must have experienced a loss in business profit due to COVID-19 to be considered eligible for this grant.**

4. What date was your business established?

\_\_\_\_/\_\_\_\_/\_\_\_\_

\*\*Your business must have been established on or before July 1, 2019 to be considered eligible for this grant.

5. Have you received additional sources of pandemic-related financial assistance? Check all that apply.

- Economic Injury Disaster Loan
- Economic Injury Disaster Advance
- Paycheck Protection Program Loan
- Local sources of assistance (ex. City of Buda "Still Budaful" grant for small businesses)
- Other: Please list \_\_\_\_\_

\*\*This question provides feedback for data purposes only. Receiving the PPP, EIDL, or other sources of pandemic-related financial assistance **does NOT** affect your eligibility for this program.

6. How is your business structured?

- Independent Contractor
- Sole Proprietor
- Limited Liability Company or Limited Liability Partnership
- Corporation
- Non-profit
- Other

If other, please list:

7. What type of business do you operate?

(Industry drop-down)

- Manufacturing
- Agriculture
- Construction
- Retail
- Logistics
- Finance
- Technology/IT
- Healthcare
- Marketing
- Personal Services/Salon
- Childcare
- Adult Care
- Food/Restaurant
- Real Estate
- Education
- Other

If other, please list:

\*\*Businesses in the following industries are not eligible for this grant: gambling or gaming, real estate investment or rental property income, adult entertainment, church and religious organizations, specific non-profit structures such as a Chamber of Commerce or NGO.

8. I certify that the funds will be used for working capital (including rent, pre-existing mortgage interest or payments, and utilities), inventory or supplies, furniture or fixtures, machinery for equipment, maintenance or repairs, or payroll or employment benefits for Qualifying Employees. I understand that if the funds are knowingly used for unauthorized purposes, Hays County may hold me legally liable, such as for charges of fraud.

Yes  No

9. I know that I may be audited to prove that grant funds under this program were used appropriately. I agree to an audit of the use of grant funds received. You must agree to this statement in order to qualify.

Yes  No

10. I agree to claw-back provisions if funds are used for ineligible purposes. You must agree to this statement in order to qualify.

Yes  No

11. By answering "YES", I certify that each owner with more than 10% equity in the business **does not** have access to unencumbered assets over \$100,000.

Yes  No

12. Please attach a copy of IRS Form W9.

13. Please attach a copy of your year to date 2020 profit and loss statement. If you are applying as a non-profit, please also project what your earnings will be for November and December.

14. Please attach a copy of the 2019 personal tax return (in full) for each owner in the business with over 10% equity. If you are applying as a non-profit, please attach a 2019 income statement.

15. Please attach a copy of your 2019 business tax return (in full).

16. If owners are paid as W2 employees, please attach a copy of the W2 for each owner.

17. Please attach a written statement detailing how you will use the funds. If you are applying as a non-profit, also include a narrative describing what activities have been impacted by the pandemic and what level of giving the organization's volunteers and donors have been able to maintain.

**\*\*Funds may only be utilized for eligible purposes.**

18. Please share anything additional you would like this award committee to know when considering your application.

19. I confirm that I have completed this application truthfully and understand that untruthful answers will prevent me from obtaining funding under this program.

Yes  No

By signing below, you agree to all of the representations, authorizations, and certifications as listed in this application.

Applicant Signature

Date

*Hays County is a governmental body subject to the Texas Public Information Act. Information you submit to Hays County in this application may be subject to the Act and, therefore, subject to public release.*

**Documents for Request**

- W-9
- Year to date Profit and Loss statements for 2020 (by month if possible); If you are applying as a non-profit, please also project what your earnings will be for November and December
- Personal tax returns for all owners with more than 10% equity stake in the business
- Business tax return
- If owners are paid as W2 employees, include a copy of each owner's W2
- Use of funds statement (must only be for those items for which this money may be used); if applying as a non-profit, also include a narrative describing what activities have been impacted by the pandemic and what level of giving the organization's volunteers and donors have been able to maintain
- Additional documents as needed

The County or third party administrator reserves the right to request further documentation and information as it deems necessary.

If mailing in a paper copy of your application, please send the application, and all requested documents to:

PeopleFund  
Attn. Katherine Sobel  
2921 E. 17<sup>th</sup> St,  
Austin, TX. 78702