



RUSSELL COUNTY CARES GRANT

OPPORTUNITY FOR COVID-19 RECOVERY ASSISTANCE FOR SMALL BUSINESSES

Grants of up to \$5,000 are available to qualifying small businesses located in Russell County to aid in the recovery from the effects of the COVID 19 pandemic.

Eligibility Information

- Business is physically located in the County.
- Business employs 30 persons or less.
- Business was either temporarily closed or had to operate on a reduced/limited basis because of the Governor's Executive Orders
- Business was open to the public and actively doing business on March 17, 2020.
- County taxes and utilities are current.
- Must fully complete and submit the application.
- Business must be in good standing with the County
- Grants are intended to be used to facilitate re-opening of small businesses and examples of how grants may be used are for physical improvements to facilitate better service such as an exterior walk-up customer service window, improvements to reduce exposure/customer contact, sanitation equipment, touchless pay equipment and fixtures, marketing costs to aid in regaining lost business, and outdoor seating/dining equipment. Other appropriate uses to aid in re-opening and recovery of lost business will be considered.
- Must submit a copy of 2019 Federal & State Tax Forms along with a W-9 Form.

Important Information Concerning your Application:

- Applications may be mailed to the County Administrator's Office, P.O. Box 1208, Lebanon, VA 24266 or delivered to the County Administrator's Office, 137 Highland Drive, Lebanon, VA 24266 or completed on-line by going to the County's website at www.russellcountyva.us within the "**Coronavirus (COVID-19) Guidance**" tab and listed as the Russell County "CARES" Grant.
- Applications will be reviewed by the Board of Supervisors and in its sole discretion will make grant awards after review.
- Grants will be made on a first come first serve basis.
- Applications will be accepted through September 30, 2020, or until funds allocated to this program are expended.
- Items you will need for your application:
 - Basic business information:
 - Address (business physical and mailing, if different)
 - Phone Number
 - Email
 - Number of Employees
 - Name of Business on record with the State Corporation Commission.
 - Name you are doing business as (DBA)
 - Copy of 2019 Federal & State Tax Forms
 - You will need to include a W-9 Form
- Verify that you were current with County taxes and utilities
- You will need to indicate if your business received or was approved for any Federal or State economic disaster loans/grant, unemployment benefits, or Paycheck Protection Program funds.
- Intended use of funds and expected outcome
- You will need to certify that the information provided on the application is accurate and truthful.



Russell County Administrator
 137 Highland Drive
 Lebanon, VA 24266
 Phone: 276-889-8000 Fax: 276-889-8011
lonzo.lester@russellcountyva.us

**OPPORTUNITY FOR COVID-19 RECOVERY ASSISTANCE FOR SMALL BUSINESSES
 REQUEST FOR FUNDING CONSIDERATION**

Checklist	<p>Please include these attachments with your application</p> <p><input type="checkbox"/> Copy of your 2019 Federal & State Tax Forms</p> <p><input type="checkbox"/> Copy of your completed and signed W-9 Form</p>

Applicant understands that this completed and signed application is only an application and does not constitute a commitment on behalf of the Russell County to extend credit, grant, and/or loan funds.

DETAILS	What is the amount you are applying for (\$5,000.00 maximum)? \$ <input style="width: 150px;" type="text"/>															
	What is your expected date to complete the project? <input style="width: 150px;" type="text"/>															
	Have you received any other COVID-19/CARES Act assistance funding from the United States or the Commonwealth of Virginia? Yes <input type="checkbox"/> No <input type="checkbox"/> (i.e. Unemployment, Payroll Protection Funds)															
	Are you currently open? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain why: <input style="width: 750px; height: 20px;" type="text"/> <input style="width: 750px; height: 20px;" type="text"/>															
BUSINESS DETAILS	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; border-bottom: 1px solid black;"><input style="width: 95%; height: 25px;" type="text"/></td> <td style="width: 50%; border-bottom: 1px solid black;"><input style="width: 95%; height: 25px;" type="text"/></td> </tr> <tr> <td>Business Name</td> <td>Contact Phone</td> </tr> <tr> <td style="border-bottom: 1px solid black;"><input style="width: 95%; height: 25px;" type="text"/></td> <td style="border-bottom: 1px solid black;"><input style="width: 95%; height: 25px;" type="text"/></td> </tr> <tr> <td>Business Type (i.e. Restaurant, Retail, Service)</td> <td>Contact Email Address</td> </tr> <tr> <td style="border-bottom: 1px solid black;"><input style="width: 95%; height: 25px;" type="text"/></td> <td style="border-bottom: 1px solid black;"><input style="width: 95%; height: 25px;" type="text"/></td> </tr> </table>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	Business Name	Contact Phone	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	Business Type (i.e. Restaurant, Retail, Service)	Contact Email Address	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>					
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Name/Address of Owner																

BUSINESS DETAILS

Employer ID Number (EIN)

Year Established

Number of Employees

Currently Authorized to Conduct Business in the Commonwealth of Virginia: Yes No

Are you current on utility payments? Yes No

Are you current on all taxes? Yes No

Do you have any outstanding code violations with the County? Yes No

GRANT NARRATIVE

Please provide a brief description of how these funds will be applied and the expected outcome:


Why should the County choose your application for funding support, among many others requesting assistance, as part of this limited COVID-19 Business Support initiative?

GRANT NARRATIVE



Please provide a budget estimate for your request.

GRANT NARRATIVE



Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.	
	<input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate	
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ - Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.	
	<input type="checkbox"/> Other (see instructions) ▶	
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):	
Exempt payee code (if any) _____		
Exemption from FATCA reporting code (if any) _____		
(Applies to accounts maintained outside the U.S.)		
5 Address (number, street, and apt. or suite no.) See instructions.		Requester's name and address (optional)
6 City, state, and ZIP code		
7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number										
				-			-			
or										
Employer identification number										
						-				

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.