

### **COVID-19 Small Business Emergency Loan Program**

### **Program Summary**

In response to the adverse economic impacts of the COVID-19 pandemic, the Denison Development Foundation (DDF) has developed a COVID-19 Small Business Emergency Loan Program to provide assistance to Denison-based businesses suffering from financial impacts related to the COVID-19 (coronavirus) pandemic.

The Denison Development Foundation (DDF) is a PRIVATE non-profit organization that has the economic development of Denison as its primary purpose.

The loan is available to all non-home-based Retail and Qualified Business Category businesses located in the City of Denison; however, priority will be given to retail businesses that have frequent and/or close contact with customers. Categories of eligible small businesses include: retail (storefront), restaurant/food business, or select Qualified Business Categories listed in the application.

This program is intended to complement the Small Business Administration's Economic Injury Disaster Loans (EIDL) and Paycheck Protection Program (PPP). It is very important for each business to apply for those programs to maximize business assistance and to reduce adverse economic impact on our community. Therefore, priority will be given to EIDL & PPP applicants with SBA confirmed complete applications.

The purpose of this program is to provide working capital for personnel costs, rent, utilities, etc. for existing, operational, small business enterprises within the City of Denison. The DDF will provide a loan to a qualified business of up to \$2,500. All loans will be balloon notes with a maturity due date of December 31,

2021 and will not be charged interest. A promissory note must be executed between the parties. Applications will be accepted until all the funds have been allocated (first come-first served) or until June 30, 2020; or until the DDF determines that its program goals have been satisfied.

### **Privacy Information**

Information provided in this application is considered private and is not subject to public disclosure through the Texas Public Records Act.

### **Eligibility and Consideration**

In order to qualify for funding under this program, the applicant must meet all of the following criteria:

- Retail businesses or Qualified Business Categories with less than 25 full time employees
- Retail businesses or Qualified Business Categories experiencing or projecting a 25% reduction in gross receipts.
- The business must be:
  - o located in the corporate city limits of Denison
  - o in a commercial setting
- Provide proof of applicant's ownership of the business.
- Provide proof of payroll taxes withheld and remitted.
- Must have paid at least \$1,000 in state and local sales tax in 2019 (can be pro-rated for a new business). This is not required for Qualified Business Category.
- In current and in good standing with the City of Denison with regard to:
  - o sales and use tax payments
  - o property and sales taxes due, if applicable
  - o compliance with all applicable zoning, land use, and other ordinances
- Engaged in a business that is legal under city and state law.
- Registered with the Texas Secretary of State's Office.

### **Submission**

Please submit the following application and supporting documentation to the Denison Development Foundation. Applications will be taken until June 30<sup>th</sup>, 2020 and will be reviewed weekly for approval. Applicants will be notified within 48 hours that their application has been received. The DDF is the sole and final authority in determining eligibility and approval for funding.

Submissions by email (send to apply@denisontx.org) are preferred and will speed up the review process; however, hard copies can be delivered to our office at 311 W. Woodard. Our lobby is closed but there is a mail slot at our front door that can be utilized 24/7.



## **COVID-19 Small Business Emergency Loan Application**

# **Contact Information** First/Last Name of person completing this application \_\_\_\_\_\_ Name of Business \_\_\_\_\_ Business Type \_\_\_\_\_\_ NAICS CODE \_\_\_\_\_ Address of Business \_\_\_\_\_ Email Address \_\_\_\_\_\_ Phone Number \_\_\_\_\_ Are you a Denison Chamber Member? This is not a requirement to be eligible for funding. Yes, I am a Denison Chamber Member No, I am not a Denison Chamber Member **Business Ownership** Tax ID #\_\_\_\_\_ Entity Name: \_\_\_\_\_ File Number assigned by the Texas Secretary of State: Name of business owner (if different from above): My business is a local franchise. (I am responsible for all revenue and expenses.) My business is a local independent business. Number of years in business: \_\_\_\_\_ \*Attach receipt or cancelled check of your most recent lease/mortgage payment.

<sup>\*</sup>Attach receipt or cancelled check of a recent utility payment (water, electric, gas, etc.)

<sup>\*</sup>Attach completed W-9

## Local Sales & Use Tax Payments -OR- Qualified Business Categories

	My retail/restaurant business paid more than \$1000 in state and local sales tax in 2019.				
	2019 total (state and local) sales tax paid	1\$ (Ne	(New businesses can be prorated)		
	*Attach a copy of Texas Sales & Use Tax Return for FY 2019, if applicable				
	My business type is within one of the qualified business categories.				
	My business type is within one of the qualified business categories (Choose one):				
	Apartment Complex Owner	Auto Detail	Chiropractor		
	Dance /Music Studio	Dentist	Dog Grooming		
	<b>Educational Services</b>	Gym/Workout	Optometrist		
	Salon /Studio /Spa	Veterinarian			
Busi	iness Revenue				
Demo	onstrate that you have experienced a minim	num of a 25% decline in	gross receipts.		
	Gross receipts from January 1 to May 1, 2019: \$				
	Gross receipts from January 1 to May 1,	2020: \$			
If nec	essary, explain:				
Pers	sonnel				
How	many total employees were employed at th	ne business on February	1, 2020?		
	Full-time Employees #:	Part-time # employees:			
	*Attach copy of Texas Workforce Commi	ission Quarterly Wage Ro	eport for 4 <sup>th</sup> Quarter 2019		
Numl	ber of current or anticipated employees bet	tween March 1, 2020 – N	Лау 1, 2020		
Busi	ness Impacts				
What	are the impacts to your business from COV	/ID-19? Please check all	that apply.		
E	Business closure - Temporary	Inability to respond	to home delivery requests		
F	Reduced hours of operation	Interrupted supply/	deliveries from vendors		
E	Employee layoffs/furloughs	Inability to serve cu	stomers		
	Revenue decline	Decreased custome	ers		
	ncreased operating costs (i.e. salaries, nsurance, paid leave)	Restricted access to costs	capital to address increased		

### **Use of Funds**

How will your business use the loan funds? Please check all that apply.

Rent/mortgage payment. (Has your landlord/lender denied assistance?)	Purchase of supplies to offer alternative business access (i.e. curbside pickup, delivery, website upgrades for online sales, etc.)
Employee support (salaries, insurance, paid leave)	Expenses associated with increased material costs from suppliers or alternate suppliers.
Utilities (i.e. electricity, phone/internet, etc.)	Expenses associated with marketing the business (if currently open) and/or reopening the business (if temporarily closed).
Purchase of COVID-19 supplies for business protection/cleaning.	

business protection/cleaning.				
Financial Assistance (Currently pend	ing or received)			
Name of your primary financial institution:				
Have you meet with your financial institution about financial assistance? Yes No				
If no, why not?				
Have you applied for any of the following Feder	ral programs that are currentl	y available?		
Paycheck Protection Program (PPP)	Requested amount:		-	
Economic Injury Disaster Loan (EIDL)	Requested amount:		-	
Emergency Economic Injury Grant	Requested amount:		-	
Small Business Debt Relief Program	Requested amount:		-	
Employee Retention Tax Credit	Requested amount:		-	
*Provide proof of application provided via attac	chment.			
If not, why not? (250 word maximum)				
Have you requested any of these resources throor the Small Business Administration?	ough the local Grayson Small	Business Developmer	ıt Center	
Small Business Counseling				
Small Business Contracting				
Small Business Tax Provisions				
Total loan amount requested from DDF: \$				
	Maximum is \$2500		_	

The Denison Development Foundation is the sole and final authority in determining eligibility and amount of funding.

### Acknowledgements/Signature

Please check each statement acknowledging that you have read and affirm the information you have submitted within this application is true and accurate to the best of your knowledge. **USE YOUR INITIALS IN THE BOXES.** 

My business has fewer than 25 full time (or full time equivalent) employees.

I affirm that my business has experienced or projected a reduction in gross receipts of at least 25%.

I affirm that my business has an experienced or projected a decline in employment between February 1, 2020 and May 31, 2020. (Unless you are a sole proprietor.)

The Tax ID, Entity Name, File Number assigned by the Texas Secretary of State when registering my business is accurately listed on this application.

My business is located in the incorporated city limits of Denison, in a commercial setting.

By signing this document, I am attesting that I am the majority owner of the business applying for this loan.

I will provide proof of efforts to obtain current Federal stimulus grants/loans: EIDL, PPP, etc.

I will provide a Copy of Texas Sales and Use Tax Return for FY 2019. (If applicable)

I will provide a copy of the Texas Workforce Commission Quarterly Wage Report for 4<sup>th</sup> quarter of 2019.

I affirm this business is engaged in activities that are legal under City ordinance.

I affirm this business is in good standing with the City of Denison with respect to taxes, fees, utility payments, or other financial obligations, and is in compliance with all applicable zoning, land use, and other ordinances.

I am aware the loan will be a no interest balloon note with a maturity due date of December 31, 2021. A promissory note will be executed between DDF and the borrower.

Business Legal Name					
Written:					
Legal Representative	Title				
Signed:					
Legal Representative	Title				
Signed as Individual:	Date				

### **Documents to be Attached**

Summary of documents that must be provided at time of application. Please attach in order and/or clearly label the document:

- A. Receipt or cancelled check of most recent lease/mortgage payment.
- B. Receipt or cancelled check of most recent utility payment (water, electric, gas, etc.)
- C. Completed W-9
- D. Copy of Texas Sales and Use Tax Return for FY 2019, if applicable
- E. Copy of Texas Workforce Commission Quarterly Wage Report for 4<sup>th</sup> Q 2019
- F. Proof of application for COVID-19 Federal grant/loan programs.

# **Directions for Submitting the DDF COVID-19 Small Business Emergency Loan Application**

- 1. Save the completed application as [BUSINESS NAME] DDF Loan Application
- 2. Submit the completed application and ALL documents to:

Apply@denisontx.org OR

Deliver to 311 W. Woodard St. and drop in mail slot at front door.