



Micro Business COVID-19 Impact Grant Application

Ketchikan Gateway Borough

Section 1 - Applicant Information

Business name:

Business physical address:

City:

State:

Zip:

Contact name:

Contact mailing address:

City:

State:

Zip:

Contact phone number:

Contact email address:

Taxpayer Identification Number (TIN/SSN):

Borough Sales Tax Registration Number(s):

Only one grant per business

Section 2- General Program Guidelines

Businesses with revenue of at least \$10,000 but less than \$100,000 during CY 2019, and suffering a revenue decline of 40% or more during Second Quarter CY 2020 compared to Second Quarter CY 2019 due to the Covid-19 pandemic are eligible to apply for a grant. Grant awards will be based on a percentage of lost revenue. The minimum grant award is \$500. This program is limited to for-profit enterprises only.

Section 3 - Eligibility Criteria

Application period opens July 20, 2020 and grants will be awarded on a first come, first served basis. Only complete applications will be considered. Applications may be hand-delivered or mailed to: KGB Finance Department, Suite 118, 1900 First Avenue, Ketchikan, AK 99901.

Please answer the following eligibility questions:

Yes

No

1. My business is a C-Corp traded on a U.S. stock exchange or a corporate-equivalent entity traded on a foreign stock exchange, or owned in whole or majority owned by such a publicly traded corporation.

Yes

No

2. The business I operate is a national or international chain that owns and operates a company-owned unit in the Ketchikan Gateway Borough (individually owned-and-operated franchises are eligible).

Yes

No

3. My business has a Ketchikan Gateway Borough or City of Ketchikan lien, or is in violation of a payment agreement with the Borough or City.

Yes

No

4. My business or principal has a lien for unpaid sales or excise taxes.

Yes

No

5. My business lacks a year-round physical presence in the Ketchikan Gateway Borough for the sale of goods or services.

Yes

No

6. My business is currently in bankruptcy proceedings.

Yes

No

7. My business is a marijuana business.

To be eligible, a business must be able to answer 'no' to all of the questions listed above.

Business Name:

Section 4 - Fiscal Impact

Please enter your business' gross receipts from inside the Ketchikan Gateway Borough. Using the COMBINED CITY AND BOROUGH SALES TAX REPORT, add the figures from row 1, columns B, C, and D. If you have multiple businesses or locations, please combine sales figures and report the total for the maximum grant award. Applications cannot be accepted until after 2nd Qtr CY 2020 sales tax returns are filed and paid.

2nd Quarter (April, May, June) 2019:	<input type="text"/>	Borough Use Only	
2nd Quarter (April, May, June) 2020:	<input type="text"/>	GL Code:	730-10-008-6080
Revenue decline (2020 - 2019):	<input type="text"/>	Grant Amount: \$	<input type="text"/>
			<input type="text"/>

Approval

Date

If your business does not file sales tax returns with the Borough due to an exempt product line or customer base, please provide the requested data from your accounting records, and provide an explanation as to why your business does not file sales tax returns. Such applications will be considered on a case-by-case basis.

Briefly describe how your business operations have been impacted by COVID-19:

Section 5 - Sign and Certify

I certify that the business listed herein has been negatively impacted by (check ALL that apply):

- the COVID-19 pandemic;
- the State-mandated closure of certain businesses;
- voluntary closure of the business to promote social distancing;
- decreased customer demand due to the pandemic; or
- other actions taken to prevent the spread of the virus.

I understand that if I am awarded a grant, the amount awarded is public record. Other business information provided is confidential except to the extent necessary to audit the program.

I further certify that I am: 1. an principal officer, general partner, or owner of the named business, 2. authorized to apply on the behalf of the business, and 3. all of the information provided herein is true and accurate. I understand that I may be required to return any grant funds awarded based on false or inaccurate information.

Signed: Date:

Printed Name: Title:

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Questions? Call the Borough Finance Department at 907-228-6620