

SMALL BUSINESS MICRO GRANT PROGRAM

PROGRAM GUIDELINES

OVERVIEW

What does the program offer? We are eager to launch a grant program in collaboration with the Department of Commerce and Economic Opportunity (DCEO) through the Local CURE Economic Support Payments Grant Program to reimburse local non-essential business owners for working capital expenses. **The Small Business Micro Grant Program will reimburse local business owners up to \$10,000 for working capital expenses that have occurred between March 1, 2020 and December 30, 2020.** This will assist business owners in their efforts to keep their businesses viable despite business interruption losses due to COVID-19.

Who is eligible? All non-essential businesses within the City of Macomb following all relevant laws, regulations, and guidelines, including those pertaining to COVID-19 mitigation, are eligible. Non-essential business are those businesses not declared essential in Governor Pritzker’s Executive Order 2020-30 (COVID-19 Executive Order No. 30): <https://www2.illinois.gov/Pages/Executive-Orders/ExecutiveOrder2020-32.aspx>. See General Eligibility for additional conditions.

What are typical eligible expenses? All working capital expenses are eligible between March 1, 2020 and December 20, 2020 – these could include payroll, rent, inventory, utilities, and more. The narrative should explain how items included were needed because of the business interruption caused by COVID-19.

What are Owners’ Obligations? Owners must complete the project application and certification. If the application is approved, the owners must adhere to the items and uses specified in the application. Applicants must also adhere to all federal, state, and local regulations. While the City understands and acknowledges the challenges related to COVID-19 facing business owners, **these funds originate from the federal and state government and business owners receiving these funds must adhere to all COVID-19 mitigation regulations.**

Who approves project applications? The Office of Community Development will publish program guidelines, work with applicants to ensure properties are eligible, and verify applications are complete. **Completed applications will be reviewed by a committee made up of City staff** to expedite the process and ensure a quick turnaround time for applicants.

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Is there an advantage to applying soon? Yes. **Applications will be accepted through January 7, 2021 no later than the end of the business day (5:00PM).** No late applications will be accepted.

Where has the money come from? The federal government (U.S. Department of the Treasury) originally contributed stimulus funds through the CARES program and the State of Illinois has passed these funds through the Department of Commerce and Economic Opportunity's **Local CURE Economic Support Payments Grant Program** to the City of Macomb.

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GENERAL ELIGIBILITY

All applicants will self-certify in the forms below that they meet all of the eligibility requirements:

- Business must be located within the City of Macomb's municipal boundaries.
- Business must be a non-essential business.
 - Non-essential business are those businesses not declared essential in Governor Pritzker's Executive Order 2020-30 (COVID-19 Executive Order No. 30)
 - <https://www2.illinois.gov/Pages/Executive-Orders/ExecutiveOrder2020-32.aspx>
- Business must be a for profit business
- Expenses must be for working capital expenses for the non-essential business
- The expense was incurred between March 1, 2020 and December 30, 2020
- Business must have had a business interruption due to COVID-19
- Businesses must have complied with, and remain compliant with, all relevant laws, regulations and executive orders from the state and federal government, including all social distancing guidelines and other business-related restrictions and regulations as promulgated by the Executive Orders of the Illinois Governor.

DCEO: Business Types Excluded from Financial Support under the ES Program (financial support to these entities would be disallowed)

- a private club or business that limits membership for reasons other than capacity;
- a government-owned business entity (except for businesses owned or controlled by a Native American tribe)
- a business that derives at least 33% of its gross annual revenue from legal gambling activities, unless, subject to the Department's approval, the business is a restaurant with gaming terminals;
- a business engaged in pyramid sales, in which a participant's primary incentive is based on the sales made by an ever-increasing number of participants; and
- payday lenders.

DCEO: Ineligible Businesses (financial support to these entities would be disallowed)

A business shall be ineligible to receive financial support through an ES Program grant if it:

- is delinquent on payment of any State of Illinois tax obligation;
- is engaged in a business that is unlawful under Illinois or federal law;
- has already received assistance, or notice of award of assistance, under the BIG Program; (list of businesses can be accessed here:
 - BIG Recipients Round 1:
https://www2.illinois.gov/dceo/SmallBizAssistance/Documents/BIG-Round1Awardees_09.17.20.pdf;
 - BIG Recipients Round 2:
https://www2.illinois.gov/dceo/SmallBizAssistance/Documents/BIGRd2Awards_121020.pdf
- is on the federal System for Award Management excluded parties list;
- does not meet any other eligibility criteria established in a financial assistance application; or
- is not in compliance with all relevant laws, regulations and executive orders from the state and federal governments

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FINANCIAL REQUIREMENTS

- **Applicants should include invoices / receipts for all previous expenses for which reimbursement is requested.** Expenses need to be dated between March 1, 2020 and December 30, 2020.
- Distribution of the funds will be administered in the form of a **reimbursement (check) after submission and approval of invoices / receipts.**
- The funds can only be used for the purpose outlined in the application and approved by the City of Macomb.
- The City will review applications for completeness and eligibility and reserves the right to award partial funding to applications.
- The City will require the owner/applicant to produce **invoices, bills, or statements accounting for all expenditures** to be covered by the Small Business Micro Grant Program.
- Please note that the State of Illinois, and the City of Macomb through the State of Illinois, have claw backs in the grant agreements if applicants do not adhere to the uses of funds outlined in the application or federal, state, or local laws and regulations or fail to maintain compliance with all relevant laws, regulations and executive orders of the state and local governments, including Executive Orders promulgated by the Governor of the State of Illinois.

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APPLICATION PROCESS

- Complete application materials:
 - Executed Applicant/Owner Certification & Agreement Form A
 - Executed Application Form B
 - Executed Agreement Form C
 - Narrative: Explain how COVID-19 caused business interruption and grant funds will assist business in recovering from business interruption (maximum 150 words / 1/2 page)
 - Expense documentation (invoices / receipts) March 1, 2020 to present
 - Additional documentation (plans, photos, etc.)

- Submit completed application materials to the Office of Community Development, City of Macomb.
 - 232 East Jackson Street, Macomb, IL 61455
 - zoning@cityofmacomb.com
 - All applications submitted by January 7, 2021 at 5:00 p.m. will be evaluated by a staff committee. Awardees will be notified by January 15, 2021 of award amount and next steps.

- The City Council shall make the final decision as to the approval of all the businesses selected and the distribution of funds.

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TIMELINE

- December 23, 2020: Official rollout of program with tentative program guidelines
- **January 7, 2021 5:00PM: Applications due to Office of Community Development or MAEDCO**
- January 15, 2021: Award decisions made and communicated to applicants
- January 21-28, 2021: Payment to Businesses from City of Macomb

Attachments to Application

- Form A – Applicant Certification
- Form B – Application
- Form C – Small Business Micro Grant Program Agreement
- List of Expenses
- Expense Documentation: Invoices/Receipts and proof of payment dated March 1, 2020 to December 30, 2020
- Signed W-9
- Additional Optional Documentation: plans, photos, narrative, etc.

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FORM – A

SMALL BUSINESS MICRO GRANT PROGRAM APPLICANT CERTIFICATION

As applicant(s) for participation in the City of Macomb Small Business Micro Grant Program, I/we acknowledge the following statements:

1. To the best of my/our current knowledge, all information contained within the application is true and we hereby authorize the City of Macomb to verify any such information at its discretion.
2. I/we have read and understand the Program Guidelines for Small Business Micro Grant Program and agree to fully abide by said guidelines.
3. I/we understand that my/our property must be located within the boundaries of the City of Macomb and be a non-essential business and have suffered a business interruption due to the COVID-19 pandemic in order to be eligible for program participation.
4. Awards will be given at the discretion of City Council.
5. I/we have not received assistance, or notice of an award of assistance, under the BIG Program and are not an excluded party on the federal System for Award Management.
6. I/we certify that I/we have complied with, and will remain compliant with, all relevant laws, regulations and executive orders from the state and federal government, including all social distancing guidelines and other business-related restrictions and regulations as promulgated by the Executive Orders of the Illinois Governor.
7. Due to a limitation on the amount of available program dollar funds, I/we understand that an eligible, completed application is not necessarily a guarantee of project funding.
8. I/we understand that the owner of the business must give written approval for project participation and demonstrate that he/she is current on all taxes.

Signature of Applicant

Date

Signature of Co-Applicant

Date

Signature of Co-Applicant

Date

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FORM - B

SMALL BUSINESS MICRO GRANT PROGRAM APPLICATION

1. APPLICANT

Name

Address

Phone Number

Email Address

CO-APPLICANT

Name

Address

Phone Number

Email Address

CO-APPLICANT

Name

Address

Phone Number

Email Address

Owner must be applicant or co-applicant. There may be more than one co-applicant.

2. Business Name

Business Address

Business Phone

3. Is owner of the property currently participating in any other City business assistance program?

If yes, list here:

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4. Describe the business interruption caused by COVID-19, the financial and other stresses to the business caused by COVID-19, the intended use of any funds awarded and how these funds will assist the business in recovering from the COVID-19 business interruption.

You may attach additional pages if necessary. Limit maximum 150 words or ½ page.

5. Do you understand that you are applying for a maximum of \$10,000 but the City will adjust the amount based on the total number of eligible applicants? (Yes/No) _____
6. Are you, and will you remain, compliant with all state, federal and local laws and regulations, including the Executive Order promulgated by the Illinois Governor? (Yes/No) _____

Applicant Signature: _____

Date: _____

Co-Applicant Signature: _____

Date: _____

Co-Applicant Signature: _____

Date: _____

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FORM - C

SMALL BUSINESS MICRO GRANT PROGRAM AWARD AGREEMENT

This Agreement is made this _____ day of _____, 20____, by and between the CITY OF MACOMB, an Illinois municipal corporation (“City”) and _____ (“Recipient”).

WHEREAS, Recipient is the owner/operator of _____ with a common address of _____, Macomb, Illinois (“Premises”);

WHEREAS, the City has established the Small Business Micro Grant Program (the “Program”) which provides grants for business owners to use for working capital expenses subject to the Guidelines of the Program; and

WHEREAS, Recipient has requested a grant pursuant to the Program in the amount of \$ _____,

NOW, THEREFORE, in consideration of the mutual covenants contained herein, the parties agree as follows:

1. The City shall provide to Recipient a grant in the amount of \$ _____. Direct payment shall be made to Recipient upon presentation of invoices or receipts for costs expended pursuant to the Guidelines of the Program.
2. This Agreement shall be governed by all applicable laws of the State of Illinois and the United States of America. The parties agree that McDonough County is and will be the appropriate venue for the hearing of any dispute related to this Agreement.
3. Recipient has self-certified their compliance, and continued compliance, with all relevant laws, regulations and executive orders from the state and federal government, including all social distancing guidelines and other business-related restrictions and regulations as promulgated by the Executive Orders of the Illinois Governor.
4. If Recipient does not use the funds for a permissible purpose pursuant to the Program Guidelines, or fails to maintain compliance as set forth in Paragraph 3 herein, the City of Macomb reserves the right to demand return of all awarded funds.
5. All covenants, agreements, representations and warranties of the Parties contained herein shall be binding upon and inure to the benefit of the Parties hereto and their respective successors and assigns.
6. All notices, requests, demands and other communications to be given to any Party hereunder shall be in writing and shall be deemed to have been duly given when personally delivered or deposited in the United States Mail, certified or registered mail, return receipt requested, postage prepaid, addressed to the Parties at the following addresses (or at such other address as shall be given in like manner by any Party to the other):

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City of Macomb: Office of Community Development
City of Macomb
232 East Jackson St
Macomb, IL 61455
Attn: Community Development Coordinator

Recipient: _____

- 7. The waiver by any Party of any breach of this Agreement, whether in a single instance or repeatedly, shall not be construed as a waiver of right under this Agreement.
- 8. In the event of a breach of this Agreement by either party, the defaulting party shall be liable for the reasonably incurred legal fees and expenses, including reasonable attorney’s fees, expended by the non-defaulting party to gain compliance with this Agreement, including, without limitation, return of awarded funds.
- 9. This Agreement supersedes any prior agreements and undertakings among the Parties and represents the complete agreement of the Parties.

CITY OF MACOMB
A municipal corporation

RECIPIENT

By: _____

By: _____

Its: _____

Its: _____