

ARPA – Small Business Assistance Grant – Application

The information provided in this form and any submitted attachments allows the City of Los Banos to evaluate your grant application.

SECTION I – APPLICANT INFORMATION

Name of Applicant:

Business Name:

What is the legal status of your organization? For Profit Nonprofit

Business Address:

Phone Number:

Email Address:

Social Security or Federal Tax ID No.:

SECTION II – BUSINESS INFORMATION

Is this and new or existing business? Existing Business
 New Business (if new, skip to section III)

Number of Years in Business:

Days/Hours of Operation:

| | | |
|---|------------|------------|
| How many employees are currently working for you? | Part-Time: | Full-Time: |
|---|------------|------------|

| | | |
|---|------------|------------|
| How many employees worked for you prior to COVID? | Part-Time: | Full-Time: |
|---|------------|------------|

Prior Years Revenues (most recent three years):

| | | |
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SECTION III – ADDITIONAL BUSINESS INFORMATION

Industry Sector:

Please describe the your business and the products and/or services you provide:

Do you have recent Business Plan? No Yes, current business plan enclosed

| SECTION IV – COVID IMPACTS, GRANT REQUEST AND USE OF FUNDS |
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| Please describe how your business has been impacted by the COVID-19 pandemic and your need for financial assistance: |
| Have you applied for additional financial assistance from other local, state, or federal sources? |
| If yes, please list the funding source(s), amount requested and the status of your application(s): |
| Were you able to open at any time during the shutdown? |
| What is the total grant amount requested? |
| Explain in detail how grant monies will be utilized, if awarded. |
| Provide any other pertinent information which would be helpful in the grant decision making process: |

| SECTION V – FINANCIAL AND ADDITIONAL INFORMATION |
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| Do you have a current City of Los Banos Business License? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Evidence of business property ownership or current lease? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are three years of consecutive income statements enclosed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| Are three years of consecutive tax returns enclosed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |

Businesses must fully complete the Small Business Assistance Grants Application and provide all additional information. Submission of an incomplete or inaccurate application may result in ineligibility in program funding. Assistance or aid to businesses that did not experience a negative economic impact from the COVID-19 pandemic are not eligible for funding under this program.