

### **Small Business Workforce Assistance Grant**

### **Program Guidelines**

The City of Medina has set aside \$200,000 of American Rescue Plan money to assist City of Medina small businesses with workforce challenges due to COVID-19. Of this money, \$50,000 has been set aside to assist micro-businesses. The grants shall be used by successful applicants to address issues with hiring, rehiring, and retaining employees. The Program will be administered by the City of Medina Economic Development Department and the Economic Development Committee.

#### **Section I: Eligibility Requirements**

A small business shall be defined as meeting the following criteria:

- A qualifying business must be located within the City of Medina, have 50 Full Time Equivalent or fewer employees, is independently owned and operated, and is not dominant in its field of operation.
- A qualifying business must have 2021 annual business revenue of \$3MM or less.

A micro-business shall be defined as meeting the following criteria:

• A qualifying business must be located within the City of Medina and have 10 or fewer employees, one of whom owns the business.

A small business or micro-business, as defined in these Guidelines above, that meets all the following criteria may apply to receive funding from the Program:

- A qualifying business must have experienced negative economic impacts due to the COVID-19 pandemic.
- A qualifying business must be registered with the Ohio Secretary of State's Office and with the Regional Income Tax Agency (RITA).
- The applicant is 50%+ majority owner of the business.
- Owner/Applicant will provide a landlord acknowledgement of lease or proof of building ownership.
- Owner/Applicant is current with property taxes and City fees, or has a payment plan in place with the City.
- Business will need to prove active liability insurance.
- A business with multiple locations may apply for grants for more than one location, but the total funds received by any business cannot exceed \$10,000.
- Affiliates of a qualifying business are included in determining the number of employees and grant funds received. Affiliate is defined as a business that controls, is controlled by, or is under common control with the qualifying business. One business controls

- another if it holds the majority voting or ownership interest or has control over the dayto-day operations
- The business commits to using funds for the retention of existing employees, hiring or rehiring former employees.
- Ineligible businesses include social clubs, liquor and tobacco stores, pawn shops, adult
  entertainment, passive real estate investments, non-profits, and home-based
  businesses operating without appropriate zoning and/or permits.

#### **Section II: Uses of Funds**

Program funds can be used by applicants for the following expenses related to the hiring, rehiring and retaining of employees as long as the expenses do not violate state or federal law. Examples include but are not limited to the following:

- Transportation (e.g. gas cards, uber rides, bus passes, car repair)
- Childcare (e.g. daycare, overnight childcare, etc.)
- Training (e.g. customer service training, English as a second language, etc.)
- Payroll (e.g. increase wages, shift premiums)
- Benefits (e.g. healthcare; sick leave; employee bonuses)

Other uses may be approved if the applicant presents a compelling argument for how the use of funds will deal with specific issues relating to hiring, rehiring and/or retaining employees.

A business that uses grant proceeds for purposes other than eligible costs listed above and approved through the application process must repay the improper expenditures to the City of Medina. If a business fails to repay unspent or improperly spent grant proceeds, the City of Medina must certify the unpaid amount to the Attorney General's Office for collection.

NOTE: Applying for funding does not guarantee that grant funds will be awarded. Any costs incurred by applicants prior to receiving an award notification will be done at their own risk.

#### **Section III: Application and Review Process**

Beginning on July 1, 2022, businesses can apply for the Program at www.medinaoh.org. Applications will be due by 4:00pm August 8, 2022. The selection committee will review, analyze and rank all applications based on their responses provided in the online application. Businesses will be required to fill out the application in its entirety. It will be the business/applicant responsibility to ensure the application is complete and all required supplemental information is submitted.

The City reserves the right to accept or reject all or any part of any application, waive informalities and award the applications to best serve the interest of the City.

Incomplete applications will not be considered. It is the responsibility of the business/applicant to ensure that their application has been received. Email confirmations will be sent in response to all applications submitted.

The selection process will use the following criteria listed below, but not limited to, nor necessarily in order of importance:

- Qualifying business's need for the grant relative to other applicants
- Likelihood the grant will allow the business to retain jobs within the City of Medina
- Overall economic impact of the grant
- Amount of Requested Funds
- Funds requested meet the expenses outlined in the Use of Funds section

#### **Section IV: Reporting Requirements**

Grant proceeds must be used or returned to the City of Medina by October 31, 2024.

Small businesses receiving a grant from this Program are required to submit an annual report and a final report to the City of Medina Economic Development Department, on a form prescribed by the Economic Development Department, detailing the following:

- Detailed description of the use of funds
- Proof of payment for expenses, including paid invoices, cancelled checks, and any other documentation
- Any other information requested by the City of Medina

The annual report shall be due no later than March 1, 2023 and final report due March 1, 2024.

#### **Section V: Maintenance of Records**

Businesses that receive funds from the Program shall keep records of all specific expenses for which the funds were used for a period of five (5) years after the completion of the project. These records shall include, but not be limited to, paid invoices, canceled checks, and other documentation acquired when the permissible expense occurred.

Upon request, the business shall provide access to these records to the City of Medina, its agencies, agents, directors, and/or any party who has contracted with the city for the exclusive purposes of evaluating or ensuring compliance with Program requirements.

At their own expense, the business shall provide photocopies of all requested records to the city or any of the aforementioned parties upon written request of the city within a reasonable time of the request.

Failure to abide by the requirement may result in a demand for the business to repay Program funds to the City of Medina within thirty (30) days of a written request for repayment.

#### **Section VI: Grant Condition**

If applicant no longer is located and conducts business in the City of Medina continuously through 2026, the city will have the right to require any grant funding received, repaid in full.

Applications can be submitted in person, by email to <a href="mailto:sbagrant@medinoh.org">sbagrant@medinoh.org</a>, or by mail to: City of Medina

Economic Development Department

132 North Elmwood Avenue

Medina, Ohio 44256



# **Small Business Workforce Assistance Grant**

### **Landlord / Tenant Acknowledgement Form**

Landlord Acknowledgem	nent:		
Name of Landlord:			
Address:			
City:	State:	Zipcode:	
Property Address:			
City:	State:	Zipcode:	
Parcel Number			
Term of the Lease:			
I,(Name of Landlord) hereby acknowledge that	I am the rightful proper	rty owner and that	
(Name of Business/Appli			
Is a tenant and they are no	ot in default of their ren	tal agreement/payments.	
Signature:	Date:		
Print name of Landlord			



## **Small Business Workforce Assistance Grant**

## **Property Owner Acknowledgement Form**

Property Owner Acknow	wledgement:		
Name of Property Owne	er:		
Address:			
City:	State:	Zipcode:	
Business Address:			
City:	State:	Zipcode:	
Parcel Number			
(Name of Property C	wner) It I am the rightful proper		
(Name of Business/App	licant)		
Signature:	Da	ite:	
Print name of Property (	Owner		