



**CARES Act Relief Funds – Small Business Application Instructions**  
**Sierra County Small Business Continuity Grant**  
**Application period opens September 10, 2020 and closes October 9, 2020**

The CARES Act provides that payments not to exceed \$10,000 per applicant may only be used to reimburse costs that—

1. Are necessary expenditures incurred due to the public health emergency with respect to the Coronavirus Disease 2019 (COVID-19);
2. Were not accounted for in the budget most recently approved as of March 27, 2020 (the date of enactment of the CARES Act) for the State or government; and
3. Were incurred during the period that begins on March 1, 2020, and ends on December 30, 2020.

**\*\*\*IMPORTANT: PLEASE READ ALL OF THE CORONAVIRUS RELIEF FUND GUIDANCE FOR STATE, TERRITORIAL, LOCAL, AND TRIBAL GOVERNMENTS INFORMATION.**

APPLICATIONS ARE FINAL UPON SUBMISSION, THEREFORE, ADDITIONAL INFORMATION WILL NOT BE REQUESTED OR CONSIDERED EXCEPT FOR THE DOCUMENTS LISTED BELOW.

#### Who can apply?

- This grant is available to qualifying small businesses with 50 or fewer full-time equivalent employees in New Mexico as long as funding remains for the program. The grant proceeds must be spent on eligible “business continuity” expenses. In addition, you may qualify for additional funding for “business redesign” expenses necessary to adopt COVID Safe Practices, and eligible expenses for both portions of this grant program outlined below.
- To be eligible, your company must be headquartered in Sierra County, New Mexico and either have been forced to close or severely curtail business operations as a result of closure orders from the state and have an annual revenue of \$2 million or less prior to the impact of COVID-19. The business must have also had a start date of March 1, 2019 or prior.

#### Who is not eligible to apply?

- Businesses headquartered outside of Sierra County, New Mexico
- Businesses exceeding 50 full-time equivalent employees
- Businesses with annual revenue exceeding \$2 million
- Businesses that started after March 1, 2019
- Businesses that were not forced to close or had severely curtailed business operations as a result of closure orders from the state

#### What documents are required?

- Completed application form

All documentation listed below are required upon execution of the grant award:

- Certificate of good standing
- Copy of your payroll to include March 1, 2020
- Most recent payroll at time of application
- Documentation of March and April 2019 total gross receipts
- Most recent taxes documenting net taxable income
- Unemployment insurance tax documentation for the fourth quarter of 2019
- Completed W9 Form
- Voided Check or Bank Letter with Account/Routing Info (if applicable). Payments will be made directly into the small business bank account. By providing us this information, you certify that the information provided is correct and you authorize the county or municipality to initiate credits for corrections to the financial institution.

## What expenses will be covered?

### Business Continuity:

- Non-owner employee payroll
- Rent
- Scheduled mortgage payments
- Insurance
- Utilities
- Marketing

### Business Redesign:

- Reconfiguring physical space
- Installing Plexiglas barriers
- Purchasing web-conferencing or other technology to facilitate work-at-home
- PPE for employees
- Temporary structures to mitigate the spread of Covid-19

## Contact information:

For questions regarding this application, please call Eloy Armijo at 575 894-6215 or email [elarmijo@sierraco.org](mailto:elarmijo@sierraco.org). After submitting the application and required documents/receipts, you will be notified of your award amount.

*Applicants must be aware that applying for this grant may result in not being eligible to apply for other federal grants.*

Funds will be provided on a reimbursement basis. (Grantees must submit clear copies of invoices and proof of payment. This is required for federal audit purposes.) (Documentation regarding payroll expenses will be required.)

LEGAL NOTICE: By submitting" the application form, I certify that the information provided in this application is true and that the expenses will not be reimbursed through other CARES Act funds. I understand this grant is for expenses incurred between March 1, 2020 and December 30, 2020 as specified above.

<p>I understand that knowingly making a false statement to obtain this grant or providing expenditures that do not qualify may result in the applicant refunding all reimbursed expenditures to the Department of Finance &amp; Administration.</p>
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## Sierra County Small Business Continuity Grant Application Form

**Important Note:** Please answer all questions and provide all documentation, failure to do so will delay the processing of your application and may further result in your application being denied if information requested is not provided to the county in a timely manner.

1. Please enter the legal name, address and phone number of your business.

2. Please enter your New Mexico taxpayer ID number. \_\_\_\_\_

3. Please enter your local business license number. \_\_\_\_\_

4. Do you have a current certificate of good standing? (*circle one*)    YES    NO

5. Only the owner, CEO or other authorized representative of the business may apply for the grant. Please enter your full first and last names.

Business Owner Name: \_\_\_\_\_

CEO or other authorized representative name: \_\_\_\_\_

6. Is your business headquartered in Sierra County, New Mexico? (*circle one*)    YES    NO

7. What type of business do you have? (*circle one*)    C-Corp    LLC    Partnership  
Sole Proprietorship    Nonprofit

8. What was your employee headcount for full-time (32 hours/week or more and part-time employees on March 1, 2020)?

32 hours/week or more \_\_\_\_\_    Part-time \_\_\_\_\_

9. What is your current employee headcount for full-time (32 hours/week or more and part-time employees)?

32 hours/week or more \_\_\_\_\_    Part-time \_\_\_\_\_

10. What were your total gross receipts for March 2019 and for April 2019?

March 2019 \$ \_\_\_\_\_    April 2019 \$ \_\_\_\_\_

11. What were your estimated total gross receipts for March 2020 and for April 2020?

March 2020 \$ \_\_\_\_\_    April 2020 \$ \_\_\_\_\_

12. Was your business included in the New Mexico orders to shut down or severely curtailed business operations? (*circle one*)    YES    NO

13. Did you shut down or severely curtail your business activities as a result of closure orders?

(circle one) YES NO If so, what date did you close or curtail your business? \_\_\_\_\_

- a. If you curtailed rather than closed your business, please describe the nature of the curtailment.

b. What is your best estimate of what month you did or will open? \_\_\_\_\_

- c. When you reopen, what percent of capacity do you expect to operate at? May-December listed for reopen, 0-25%, 26-50%, 51-75%, 76-100% of capacity

May _____	June _____	July _____
Aug. _____	Sept. _____	Oct. _____
Nov. _____	Dec. _____	

14. What was your net taxable income in the most recent complete tax year? \$ \_\_\_\_\_

15. What impact do you anticipate the COVID-19 crisis and related effects will have on your revenues for 2020 as a whole? (circle one)

No effect 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

16. If you pay withholding, have you delayed or plan on delaying withholding tax?

(circle one) YES NO

17. How many years has your business been in continuous operation through March 1, 2020? \_\_\_\_\_

18. How many employees and what total payroll did you report to the state for unemployment insurance taxes for the fourth quarter of 2019?

# Employees \_\_\_\_\_ and Taxes Reported \$ \_\_\_\_\_

19. Have you been approved for an SBA Paycheck Protection Program loan or Economic Injury Disaster loan? (circle all that apply)

- a. SBA Paycheck Protection Program Loan
- b. Economic Injury Disaster Loan

20. Is your business owned by a socially disadvantaged group? (circle all that apply)

- a. No
- b. Woman
- c. Veteran
- d. Minority
- e. Tribal

21. Please provide a receipts/documentation of items purchased or expensed for COVID-19 prevention and/or mitigation and a total of the amount you are requesting. Use the list of items under "What expenses will be covered?" in the instructions page as a guide. (use addition sheets, if necessary)