



CPR - CARES Pandemic Relief Grant Application For Small Businesses

APPLICANT INFORMATION

Legal Name of the Business, including assumed name, if any:

<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Corporation	<input type="checkbox"/> LLC
Length of Time in Business	Years Months	Fed Tax Id#	MN State ID
Mailing Address		City	Zip
Location Address		City	Township
Business Phone	()	Cell Phone	()
E-Mail Address		Web Address	
Contact Name		Title	
Amount of Funding Requested	\$ _____	Number of your employees	Full-time _____ Part-time _____
How has the COVID-19 pandemic financially affected your business?			
For what purpose will these funds be used?			

Principal #1

Name		
Address	City	Zip
Percentage of Ownership _____%		

Principal #2

Name		
Address	City	Zip
Percentage of Ownership _____%		

Funding Information

- Eligible applicants may request up to \$5,000 in CPR Grant assistance based upon need.
- Applications will be considered and acted on by the Cottonwood County Board of Commissioners.
- The grant application will be considered public information for auditing purposes only. The attachments will be considered private data.

Eligible Applicants

- For-profit businesses that can demonstrate business losses. Businesses need to show a gross revenue reduction between April 1, 2020 and June 30, 2020 compared to the previous year.
- All eligible applicants must have a physical, commercial location, whether owned or leased, located in Cottonwood County.
- All eligible applicants must be registered with the Minnesota Secretary of State since April 1, 2020.

Ineligible Applicants

- Lending institutions, law firms, accounting firms, utility companies, chain stores, residential rental properties, production agriculture with the exemption of livestock depopulation, insurance agencies, financial advisors, passive investments, and religious organizations.
- A separate application process will be applicable to non-profit organizations.

Application Requirements

- The CPR – CARES Pandemic Relief Grant application must be completed in its entirety by the applicant and submitted to the Auditor/Treasurer's Office located at 900 Third Avenue, Windom, MN 56101 or submitted electronically to donna.torkelson@co.cottonwood.mn.us by September 15, 2020, in order to be considered.
- The most recent federal tax return filed by the business.
- Income statements for at least the second quarter of 2019 and the second quarter of 2020.
- Grant recipients agree to provide documentation of how funds were spent within 60 days following grant dispersal.

GRANT PROGRAM POLICY AUTHORIZATION FOR RELEASE OF INFORMATION

Applicant acknowledges that they are making application for a Grant, and that Cottonwood County may rely on the applicant's warranties and self-certification of eligibility in the approval process of a grant. Applicant certifies that only one application per small business location was submitted. Cottonwood County reserves the right to verify whether duplicate applications were submitted, and to eliminate duplicate applications from consideration, in Cottonwood County's sole discretion. This information and the information provided on all accompanying documents is provided for the purpose of obtaining a grant for the Applicant. Applicant acknowledges that representations made in this application will be relied on by Cottonwood County in its decision to award such grant. Cottonwood County is authorized to make all inquiries it deems necessary to verify the accuracy of the information contained herein. The Applicant will promptly notify Cottonwood County of any subsequent changes which would affect the accuracy of this information and the information provided on all accompanying documents. The Applicant understands that it is a crime to make a false representation as to their or their company's financial ability for the purpose of securing a grant. The Applicant declares under penalty of perjury that all information provided herein and on accompanying documents is true in every detail and accurately represents the financial condition of the applicant and the Business on the date given below, and that the Applicant has authorization for the business to sign this form.

I hereby make application to the Cottonwood County Small Business Relief Fund. I acknowledge that this involves public dollars and I certify that I am eligible, my application is true and accurate and that I understand Minnesota Data Practices laws apply to this application and any grant agreement I may sign under it.

Signature/Title of Applicant: _____ Date: _____

Signature/Title of Applicant: _____ Date: _____

Be sure to include:

- The most recent federal tax return filed by the business.
- Income statements for at least the second quarter of 2019 and the second quarter of 2020.

The Cottonwood County Board of Commissioners retains final authority to determine if a business is eligible or not, and whether to approve a grant or not.

For questions, call 507-831-1905 or email donna.torkelson@co.cottonwood.mn.us.