



**Bell County**

**Small Business Grant Application**

**Amount Requested:** \_\_\_\_\_

**Name of Business:**

\_\_\_\_\_

**Name of Owner(s) and/or Applicants (if not owners, please note your job title):**

\_\_\_\_\_

\_\_\_\_\_

**Email address:** \_\_\_\_\_

**Phone number:** \_\_\_\_\_

**Business Address:**

\_\_\_\_\_ (Street Address)

\_\_\_\_\_ (City), Texas \_\_\_\_\_ (Zip code)

**Is your business physically located within the city limits of a city in Bell County?** \_\_\_ Yes \_\_\_ No

**If yes; which City:** \_\_\_\_\_

**Type of Business: (ex.: retail, restaurant, spa)**

\_\_\_\_\_

**How many full-time employees does your business employ at the current time:**

\_\_\_\_\_

**Please explain any revenue decline experienced or expected from March 1<sup>st</sup> on, due to COVID-19. Please provide documentation to support your answer. The documentation can be attached separately.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you currently have any tax liens or judgements imposed by Bell County? \_\_\_\_Yes \_\_\_\_No

If yes; Please explain: \_\_\_\_\_

How has COVID-19 impacted your business financially and organizationally?

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How would you use this funding to mitigate the effects of COVID-19 on your business? Please include budget documentation to show how you would spend the funding.

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Have you applied for funds elsewhere? Please explain why or why not. If you did receive funds elsewhere, explain the amount and how those funds are being used.

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Did your business have to close due to COVID-19 (this can include closures due to government orders or other COVID-19 impacts)? What was your closure duration? Please explain reasoning for any closures.

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Please provide the following supporting documentation:

- A copy of employment reports as submitted to the Texas Workforce Commission for the fourth quarter of 2019, first quarter of 2020 and second quarter of 2020.
- Documentation of mortgage or rent payment. If behind on payments, documentation to support that claim.
- Completed IRS Form W-9

Certification Page

Name of Business:

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I, \_\_\_\_\_ (first and last name) \_\_\_\_\_, certify that all information provided is accurate and fully reflects the business I represent. I understand that this application does not entitle my business for grant funding. If receiving grant funding, the money may not be the total funds requested. I agree to give monthly reports of expenses utilizing grant funds. If I am not able to spend the entire grant amount received on approved expenses, I agree to return the remaining funds to Bell County.

I understand the information provided in this application may be considered public records and may be subject to public disclosure through the Texas Public Information Act. The Bell County Commissioners Court and the Central Texas Council of Governments will endeavor to retain all submitted information on a confidential basis to the extent allowed by law. If submitted information is considered by the applicant to be confidential or protected as a trade secret, the information must clearly be marked as such.

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Signature

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Date

Staff Use Only:

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Category	Points Received/Maximum Total Points
All documentation was provided initially (not to include all details of the narrative).	_____/10
The applicant quantitatively showed need for funding.	_____/15
The applicant has a detailed plan of how they would spend their grant funds.	_____/15
The applicant thoroughly detailed their explanation of why or why not they applied for other funding sources. The applicant justified those reasons.	_____/5
The applicant thoroughly explained any business closures.	_____/5
Total	<b>Total Points: ____/50</b>