



# Elbert County, Colorado Business / Organization Relief Program 2021 Elbert County Direct Aid Application

**Applications due by September 30, 2021**

## Program Purpose:

The purpose of this grant program is to assist businesses and organizations in Elbert County, Colorado that have been adversely affected by COVID-19. Grants are available to assist with payroll, capital, equipment, and operating costs incurred due to the COVID-19 economic disruption. Grant funds under this program do not need to be repaid, unless intentional inaccurate information is provided and proven.

## Eligible Entities:

- Eligible business/organizations (outlined below) must be located in Elbert County, Colorado.
- A qualifying entity must certify that they are still in business and that they intend to remain in operation for at least six months.
- Qualified entities must have been in operation prior to June 30, 2020, with annual receipts of less than \$2,500,000.
- Business/organization must be a Corporation, LLC, Non-profit, Partnership, or Sole Proprietor.

## Award Determination:

Elbert County American Rescue Plan Act dollars will provide a maximum of \$10,000 per business/organization

## Time Frame:

Applications are due by 5:00 pm, September 30, 2021.

## How do I apply:

- Download the Direct Aid Application found online at [www.elbertcounty-co.gov](http://www.elbertcounty-co.gov).
- Attach all required documents listed on the form under "Document Check-list".
- Be sure to initial all certifying statements to confirm your eligibility for this program.
- Include a statement justifying the need for the funds. No more than one written page.
- You will receive an email advising that your application has been received. An incomplete application will delay the review of your application.
- Applications are due by 5:00 pm, September 30, 2021. Funding is limited.

Listed documentation is a minimum requirement and staff may request additional information to determine eligibility.

If you have any questions, please email [Trish.kruse@elbertcounty-co.gov](mailto:Trish.kruse@elbertcounty-co.gov).



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1. NAME OF BUSINESS/ORGANIZATION: \_\_\_\_\_

2. TRADE NAME: \_\_\_\_\_

3. BUSINESS ADDRESS: \_\_\_\_\_

\_\_\_\_\_

4. BUSINESS MAILING ADDRESS (If different than above.) : \_\_\_\_\_

\_\_\_\_\_

5. BUSINESS EIN #: \_\_\_\_\_

6. POINT OF CONTACT NAME: \_\_\_\_\_

7. CONTACT PHONE NUMBER: \_\_\_\_\_

8. CONTACT EMAIL ADDRESS: \_\_\_\_\_

**9. TYPE OF BUSINESS / ORGANIZATION**

Corporation

LLC

Partnership

Sole Proprietor

Non-profit

Other: \_\_\_\_\_

10. YEAR BUSINESS/ORGANIZATION WAS ESTABLISHED: \_\_\_\_\_

**11. BUSINESS SIZE (must be less than \$2.5 million)**

2019 Annual Revenue (if applicable): \_\_\_\_\_

2020 Annual Revenue : \_\_\_\_\_

2021 YTD Revenue: \_\_\_\_\_



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12. NUMBER OF FULL-TIME EMPLOYEES: \_\_\_\_\_

13. NUMBER OF PART-TIME EMPLOYEES: \_\_\_\_\_

14. ESTIMATED LOSS DUE TO COVID: \_\_\_\_\_

15. DID YOU RECEIVE PRIOR ELBERT COUNTY GRANT FUNDS? \_\_\_\_\_  
IF SO, FROM WHICH FUND? \_\_\_\_\_ HOW MUCH? \_\_\_\_\_

**16. DOCUMENT CHECKLIST**

Please include these items with your application. All documents are required unless noted.

- Valid ID (Driver's License, Passport ID, or US issued photo ID)
- EIN, SSN or TIN
- Certificate of Good Standing from Secretary of State (pdf)
- W9
- 2019 and 2020 Tax Returns
- 2019, 2020 and 2021 YTD Revenue / Expense Forms or Profit & Loss Statements



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**SELF CERTIFYING STATEMENTS**

**By initialing the items below, I self-certify:**

- \_\_\_\_\_ My business is currently in operation and in good standing with the Secretary of State.
- \_\_\_\_\_ I am current on all Federal, State and local taxes and/or CO Department of Revenue fees.
- \_\_\_\_\_ My business is headquartered in Elbert County, CO. Headquarters is defined as the location/address where the principle business and management decisions are made for the business.
- \_\_\_\_\_ I plan to stay in business for at least 6 months.
- \_\_\_\_\_ I pledge to use these grants to pay for business expenses including but not limited to salary, rent, utilities, inventory, equipment, interest or principal on business loans and other business uses.
- \_\_\_\_\_ I run a business or non-profit, having at least one full-time employee and/or I am sole proprietor.
- \_\_\_\_\_ I authorize the Colorado Department of Revenue and/or the Colorado Department of Labor and Employment to provide my tax return data to the authorizing entity for the purposes of confirming my eligibility for this aid application. Including non-profit.
- \_\_\_\_\_ I understand the statements in this application are subject to verification and validation. I may be asked to provide documentation, including financial or bank statements and other documents, supporting accuracy during subsequent follow-up communications with Elbert County Government or their agents. I will cooperate in providing all information requested.
- \_\_\_\_\_ I understand that if I knowingly provide any inaccurate information on this application, I will be subject to penalties, including potential repayment of any funds received and any appropriate legal action.
- \_\_\_\_\_ By initialing these statements, I am swearing and certifying to Elbert County Government that all are accurate to the best of my knowledge. I am retaining documents and able to provide them, if requested. I am aware that I may be audited to justify my award. If I cannot validate the accuracy of these statements, I understand I may be asked to payback this award and/or be subject to legal remedies.
- \_\_\_\_\_ I certify that I am an officer of the above named company/organization, with the authority to sign on its behalf.
- \_\_\_\_\_ I certify that I am a legally residing and lawfully able to work in the US.



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**ACKNOWLEDGEMENT AND CERTIFICATION**

By signing below, I certify that the above application is true and correct to the best of my knowledge and belief. I understand that the willful or fraudulent submission of a materially false statement in connection with the certification may disqualify my business from eligibility for the program benefits and may subject my business or myself to criminal charges.

This certification shall be deemed executed in the County of Elbert and the State of Colorado and shall be governed and construed in accordance with the laws of the state of Colorado and the laws of the United States.

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**Signature of Business / Organization Owner**

**Date**

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**Title**

**EXPENSE / REVENUE WORKSHEET**

<b>REVENUE</b>	<b>2019</b>	<b>2020</b>	<b>2021</b>
Sales			
Service			
Other			
<b>TOTAL Income</b>			

<b>EXPENSES</b>	<b>2019</b>	<b>2020</b>	<b>2021</b>
Advertising			
Banking Fees			
Contracted expense			
Cost of Goods Sold			
Equipment			
Insurance			
Interest			
Internet			
Lease / Mortgage			
Office Supplies			
Postage / Delivery			
Repairs / Maintenance			
Salary / Wages			
Supplies			
Telephone			
Training			
Travel/Entertainment			
Utilities			
Vehicle			
Other:			
Other:			

<b>TOTAL</b>			
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<b>Profit / (Loss)</b>			
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*I certify the above financials are true and accurate.*

\_\_\_\_\_  
Signature