



**FRANKLIN COUNTY COVID-19 SMALL BUSINESS GRANT APPLICATION**

Franklin County Fiscal Court believes the continued success of small local businesses is essential to the health of our local economy.

In order to be considered eligible, the business must:

- Have a physical business location in the unincorporated area of Franklin County, Kentucky. Home based businesses are not eligible.
- Employ no more than 50 persons.
- Have been operating and licensed as a business prior to October 1, 2019.
- Plan to continue operation for at least twelve months after grant funds are assigned.
- Be in good standing on all state and local licenses, fees, and taxes.
- Not have been previously reimbursed for the same expenses by any other federal, state, or local grant or forgivable loan or assessed any additional fees to customers to cover the effects of the pandemic on the business.
- Accept responsibility for tax reporting on grant funds awarded. \*On July 6, 2020, the IRS confirmed that the receipt of a government grant by a business generally is not excluded from the business's gross income under the Code and therefore is taxable.

**Section A – Business Information:**

Business Name \_\_\_\_\_

Business Physical Address \_\_\_\_\_

Business Mailing Address \_\_\_\_\_

Business Phone and Email \_\_\_\_\_

Business Owner \_\_\_\_\_

Owner Residence Address \_\_\_\_\_

Federal Tax # \_\_\_\_\_ County Business # \_\_\_\_\_ KY Organization or license # \_\_\_\_\_

Description of business/services \_\_\_\_\_ Date business established \_\_\_\_\_

\*If franchise or chain, name and address of person owning at least 51% living in Franklin County, KY

Please check if: \_\_\_\_\_ Minority-Owned \_\_\_\_\_ Women-Owned \_\_\_\_\_ Veteran-Owned

**Section B – Reimbursable Expenses**

Rent or Mortgage paid on business property since March 20, 2020 \_\_\_\_\_

Utility expenses since March 20, 2020 \_\_\_\_\_

Amounts paid to employees since March 20, 2020 \_\_\_\_\_

Reduction in revenue since March 20, 2020 (attach explanation and documentation) \_\_\_\_\_

Attach profit /loss statements for 2019 and 2020. Further information may be requested to verify expenses. All expense information and supporting documentation on this application is confidential.

**\*\*ALL REQUESTED INFORMATION MUST BE PROVIDED OR THE APPLICATION WILL NOT BE ACCEPTED\*\***

I (we) affirm that all the information provided above is correct and this business meets all criteria above.

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date