



ANDERSON COUNTY SMALL BUSINESS / NONPROFIT SPARKS GRANT APPLICATION

Description

The Anderson County Commission allocated approximately \$500,000 in Strengthening People and Revitalizing Kansas (SPARK) funds towards a small business and nonprofit grant. The funds are to be used to aid local businesses that were impacted by the COVID-19 pandemic. The funds originated from the federal CARES Act and all federal and state rules and regulations must be followed.

General Eligibility Requirements

Only **for-profit** (including sole proprietors, LLCs, corporations, etc) and **not-for-profit businesses** with operations in Anderson County who are in good standing with the Kansas Secretary of State and are current on all local taxes and utilities are legible to apply. Additional eligibility requirements are listed with each grant description. All grant recipients will be required to sign a grant agreement with Anderson County. At this time, agricultural producers are not eligible for funds due to the complexity of ag markets and the availability of assistance from the USDA.

Grant Amounts and Selection

The Anderson County Commission will designate a small committee to review all grant applications and make determinations based on a number of factors such as the number of applications received, the demonstrated financial losses and needs of businesses and plans for business resiliency being made to better prepare for economic downturns.

Timeline (Anticipated)

- September 28th – Begin accepting grant applications
- October 19th – Deadline for applications
- November 2nd – Grant award notifications
- December 30th – All grant funds must be spent

How to Apply

- 1) Applications can be found on the Anderson County website at www.andersoncountyks.org or the City of Garnett website at www.simplygarnett.com
Applications can also be picked up at the Anderson County Clerk's office.
- 2) Complete all sections of the application along with a W-9 and MOU.
- 3) Return application with all documentation required to the Clerk's office or email by pdf to ancospark@andersoncountyks.org



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Anderson County businesses and non-profits with fewer than 100 employees are eligible to apply for Small Business / Nonprofit grants. Funds can be used to pay working capital expenses such as payroll, rent, mortgage, insurance, utilities, inventory, and more. Applications will be accepted September 28th through October 19th in the Anderson County Clerk's Office.

General Information

| | |
|---|--|
| Legal Name of business or organization: | |
| Month and Year Established: | |
| Phone Number: | |
| Email Address: | |
| Business Address: | |
| Business Entity Type: (LLC, Corporation, Sole Proprietor, Nonprofit) | |
| Business EIN (if applicable): | |
| DUNS Number (if applicable): | |
| Social Security Number (if sole proprietor): | |

| | |
|---|--|
| Is the business currently open and operating and providing goods and/or services? | |
| Is the business currently good standing with the Kansas Secretary of State's Office? | |
| Is the business currently in bankruptcy proceedings or considering filing for bankruptcy? | |

Business Information

| | |
|--|--|
| Business Activity: | |
| Please provide a description of the goods and/or services provided by your business: | |



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| | |
|---|--|
| Gross revenues for calendar year 2018: | |
| Gross revenues for calendar year 2019: | |
| Projected revenues for 2020: | |
| Percentage Loss/Gain: (Calculated using revenues from 2019 vs 2020) | |
| Was your business subject to mandatory or voluntary closures? If so, list dates closed: | |
| | |

Payroll

Please provide the current number of employees:

| | |
|--|--|
| Full-time employees | |
| Part-time employees | |
| What is the business' annual payroll (in \$)? | |
| What are the business' average wages? | |
| Please provide a short description of how COVID-19 is negatively impacting the business: | |
| | |



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Grant Request: For loss of revenue, business interruption, or cost to reopen your business from March through December 30, 2020 (Minimum of \$1,000; Maximum of \$25,000).

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| Grant amount requested: | \$ |
|-------------------------|----|

Please provide a detailed summary of how you plan to use the funds, if awarded:

How have/will you adjust your business operations to better adapt to emergency or crisis situations like COVID-19?

Has the business received any additional local, state or federal funding (i.e. PPP, EIDL, HIRE Fund, CARES Act funding, CDBG-CV, etc) to help mitigate the impacts of COVID-19?



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ACKNOWLEDGMENT

Accuracy of Information. By submitting this application, you certify that you are authorized to apply for grant funds on behalf of the business identified. You also certify that the information provided is true and correct to the best of your knowledge. The funds cannot be used for duplicate purposes and failure to comply allows the county to recoup funds upon audit. Falsification of information could result in the immediate repayment of grant funds with the possibility of other legal action.

| | |
|-------------------------|--|
| Your Name (Print): | |
| Title/Role in Business: | |
| Your Phone Number: | |
| Your Email Address: | |
| Signature: | |
| Date: | |