



Fort Mitchell Small Business Emergency Grant Program

The City of Fort Mitchell has created this grant program to assist eligible businesses impacted by the COVID-19 pandemic. Please read all instructions prior to filling out the application. All pertinent information and documents will need to be submitted in their entirety in order to be eligible. For questions regarding this application email info@northernkentuckyusa.com or call 859.344.0040. All applications will be received, independently confirmed and reviewed by Northern Kentucky Tri-ED.

Grant Amount: Up to \$2,500 (Only one application per business)

Eligibility Criteria:

1. Only non-essential businesses that have been mandated to close; retail and restaurants that have been impacted by mandated closures or social distancing requirements due to COVID-19, are eligible to apply.
2. Businesses must be located in the City and have at least 2 employees (full-time, part-time and/or independent contractors) but no more than 35 full-time employees. Business owner(s) may count towards the number of employees. Businesses with 1 employee are eligible if deemed non-essential and have a storefront.
3. Businesses must be locally owned and franchised and an existing commercial enterprise that has been in operation prior to Jan 1, 2020 in the City of Fort Mitchell.
4. Businesses must have a valid City of Fort Mitchell Occupational License.
5. Financial institutions, commercial landlords or non-profits are not eligible.
6. Businesses must be able to provide proof of ownership, current lease agreement or mortgage statement if approved.

Submission Forms:

1. Completed application (online application and PDF printable document are available at www.fortmitchell.com) Documents may be printed, filled and dropped in the drop box at the City building if a hardship exists to fill application online. For assistance in filling out the online application call 859.331.1212
2. Completed W-9 form (Rev. October 2018)
3. A copy of current Kenton County occupational license.
4. A copy of the 4th quarter 2019 Kenton County & Cities Employee Quarterly Withholding Form (Form QCC1) or KY Quarterly Wage and Tax Statement.
5. Narrative: How has COVID 19 Impacted your business? How will this grant help your business and how will you use the money? (Maximum 300 words)

Submission Deadline:

Applications will be accepted until **4:00 p.m. on Tuesday, April 21st, 2020**

Applications may be submitted online through www.fortmitchell.com or printed, filled and dropped in the drop box at the City building.



SMALL BUSINESS EMERGENCY GRANT APPLICATION

Business Full Legal Name: _____

IRS Employer Identification Number (EIN):

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Business Address in Fort Mitchell

Business Headquarters Office
Address (Business address
provided for tax purposes):

City _____

City _____

State _____ Zip _____

State _____ Zip _____

Narrative: How has COVID 19 Impacted your business? How will this grant help your business and how will you use the money? (Maximum 300 words) Attach separate page if necessary.

Check one:

- My business is considered non-essential and was mandated to close.
- My business is considered essential and open but required to meet social distancing.
- My business was not mandated to close, however, we sent employees to work from home for safety of all parties.

Employment Information:

	Total Number of Employees	Average Wage
Full-Time		
Part-Time		
Independent Contractors		

Documents Submittal:

- Completed application (online application and PDF printable document are available at www.fortmitchell.com) Documents may be printed, filled and dropped off in the drop box at the City building if a hardship exists to fill application online. For assistance in filling out the online application call 859.331.1212.
- Completed W-9 form (Rev. October 2018)
- A copy of current Kenton County occupational license.
- A copy of the 4th quarter 2019 Kenton County & Cities Employee Quarterly Withholding Form (Form QCC1) or most recent Kentucky Quarterly Wage and Tax Statement.

Business Contact:

Name: _____

Email: _____

Phone Number: _____

If selected, Businesses must be able to provide proof of ownership, current lease agreement or mortgage statement if approved.

Disclaimer:

The City of Fort Mitchell retains the sole and unfettered discretion to determine compliance with program criteria and eligibility for all applicants. It reserves the right to deny applications based on noncompliance with program application procedures, the absence of available funds to fulfill all requests, or any other lawful basis within the judgment of the City. Finally, it reserves the right to determine the procedures by which payment of funds for approved grants shall be made and does not guarantee payment to any approved grant recipients on any particular timeline.