



# KENAI

## Small Business Relief and Recovery Grant Application

### Section 1 – Applicant Information

Business name:

Contact name:

Contact address:  
(mailing)

City:

State:

Zip:

Contact phone number:

Contact email address:

Physical address of business:  
(business must be located  
within the City of Kenai)

City:

State:

Zip:

IRS Taxpayer Identification Number  
or proprietor's Social Security Number:  
(SSN will be kept confidential)

### Section 2 – Grant Request Information

Was your business impacted by the COVID-19 public health emergency and are you in need of economic assistance?  Yes  No

(Impacts may include, but are not limited to, loss of sales due to mandatory shutdown, inventory loss, additional operating expenses of reopening and protecting staff and customers, including funds already spent for those purposes.)

What is the grant amount you are requesting (check only one):

- \$2,500 grant for business with 2019 revenues of \$50,000 to \$100,000
- \$5,000 grant for business with 2019 revenues of \$100,000 to \$250,000
- \$7,500 grant for business with 2019 revenues of \$250,000 to \$500,000
- \$10,000 grant for business with 2019 revenue of more than \$500,000

(Grant amounts have been divided into four levels, based on each business' 2019 total gross sales revenue for four quarters as reported on tax returns to the borough)

How will the grant funds be used?

(Optional for informational purposes only to gauge community need and program effectiveness)

Please answer the following eligibility questions:

1. My business is a C Corporation traded on a U.S. stock exchange or a corporate-equivalent entity traded on a foreign stock exchange, and owned in whole or majority-owned by such a publicly traded corporation.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. My business is a national chain that owns and operates a premise in the City of Kenai (individually owned-and-operated local franchises are eligible).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. My business has a City lien or is in violation of a payment agreement with the City.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. My business has a Borough lien for unpaid sales taxes.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5. My business is currently in bankruptcy proceedings.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6. My business does not have a permanent physical presence in the City of Kenai for the sale of goods or provision of services, with at least one worker assigned to that facility.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7. My business is a marijuana business licensed under Alaska Statute 17.38.	<input type="checkbox"/> Yes	<input type="checkbox"/> No

(If you answered yes to any of the above questions, your business is not eligible for a grant)

Do you intend to remain in business into 2021?  Yes  No

Applications must be received or postmarked by 5 p.m. on June 19, 2020, and may be submitted by email to: [grantsadmin@kenai.city](mailto:grantsadmin@kenai.city) or hand-delivered or mailed to City of Kenai City Hall at 210 Fidalgo Ave., Kenai, AK 99611, Attn: Grant Review Committee. Applications may be amended before the deadline. Incomplete applications will be rejected. Applicants will be notified of the status of their application via email to the contact person listed on the application. Questions about the grant program, application process, or application status must be directed to Larry Persily, City Project Lead, 283-8226, or email [lpersily@kenai.city](mailto:lpersily@kenai.city). If the demand for grants exceeds the City's available funds, the City reserves the right to prorate the grants equally to all recipients to stay within available funding. It is the sole responsibility of the applicant to determine or to seek independent advice as to the tax implications of receiving the grant funds.

As an official signer for the applicant, I certify that the information provided in this application is true and accurate and acknowledge that the funds will be spent by the required deadline of Dec. 30, 2020. I agree to assist in the verification of information provided in this application and to provide additional information to the city, if requested.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_