

**CORTLAND COUNTY
MICROENTERPRISE ASSISTANCE PROGRAM - 2020 PROGRAM
PRE-APPLICATION PACKAGE**

Cortland County will be submitting a Community Development Block Grant (CDBG) application to the New York State Office of Community Renewal (OCR) for microenterprise funds to establish a Microenterprise Assistance Program (MAP). As part of the application process, the County must document to OCR that there is adequate interest and need to warrant the award of these funds. Submission of pre-applications from individuals or businesses, new or existing, is key to the County's ability to secure the funds. We hope you will complete and submit this package to help ensure funding to the County. Pre-applications should be submitted ASAP.

The following documents make up the pre-application and are attached for your review and completion:

- General Information Form – Complete and return
- Narrative, Budget, and Need Form – Complete and return
- Family Income Form – Complete and return
- Letter of Interest – Sign, date, and return

***Questions can be directed to Linda Armstrong of Thoma Development at 607-753-1433,
or by email at linda@thomadevelopment.com***

***Return all completed forms to Linda Armstrong
Email to linda@thomadevelopment.com
or mail
Attention: Linda Armstrong
Thoma Development
34 Tompkins Street
Cortland, NY 13045***

GENERAL INFORMATION FORM

This information is for **pre-application purposes only**. Pre-applications will be used to determine the level of interest in the proposed program. Additional information may be requested. Applicants will be required to complete a full application at a later date if microenterprise funds are awarded for the proposed Program.

GENERAL INFORMATION

Name(s): _____

Address: _____ Email: _____

Business Name: _____

Address: _____

Daytime Phone Number: _____ Cell Phone: _____

Number of people in your family: _____

BUSINESS/JOB INFORMATION

Existing Business (Date business started _____)

New Business

Please summarize what employees you currently have and how many you will hire if awarded funds:

How many full-time employees do you currently have, *including yourself and other owners*? _____

How many part-time employees do you currently have? _____

How many full-time employees do you plan to hire if funds are awarded? _____

How many part-time employees do you plan to hire if funds are awarded? _____

What is the total number of hours all part-time employees to be hired will work in a week? _____

Please list the types of jobs to be created:

1) _____

2) _____

3) _____

Do you have a current Business Plan? YES NO

Are you in the process of preparing a Business Plan? YES NO

PROPOSED PROJECT NARRATIVE

On a separate sheet, please **type or print** a description of your project in a paragraph or two. Attach the sheet and return it with your pre-application. Please address the following issues (In any order that is appropriate for the details of your Project):

- Is the business new or existing; if existing provide brief history
- Type of business
- What new product or service will be provided, if grant funds are awarded
- Does the product or service fill a void in the community; explain
- What will grant funds be used for
- Specify type of job(s) to be created
- How does the project facilitate job creation, if appropriate
- Location of business
- Will you have an on-line presence, storefront or both

PROPOSED BUDGET

Please complete the chart below. Provide the item(s) to be purchased in the appropriate category, the estimated costs and the source of the estimates, such as actual quotes or online retailers such as Amazon, etc. Complete for only those Items that are pertinent to your Project. Each applicant will have to provide 10% of the total project cost as equity (which cannot be in the form of debt), in addition to the cost in excess of the maximum award of \$35,000. Not all applicants will receive the maximum. Applicants should request only what is needed to complete the project and should have sufficient equity to contribute to the project if and when an award is made. Building supplies, construction costs, and vehicles are **not** eligible for funding. (Attach additional sheet and detail if desired or helpful)

Item	Estimated Cost	Source of Estimated Costs
Equipment		
Furniture and Fixtures		
Electronics/Computers/Software		
Inventory		
Working Capital		
TOTAL:		

I currently have or will have the required 10% equity for the above project. The equity will be from (Please specify source): _____

STATEMENT OF NEED

Microenterprise funds are intended to assist small businesses that do not have access to traditional bank financing. When you apply, you will have to document your need. Please provide below a statement of why this project can't be financed with traditional bank financing and a micro grant is necessary.

FAMILY INCOME FORM - CORTLAND COUNTY

Name: _____

Address: _____

Number of people in my family: _____

INSTRUCTIONS

Determine your family size by counting yourself and each family member who **currently** resides with you within the same housing unit. A family member is a person who is related to you by birth, marriage, or adoption. Circle the appropriate family size below. Next, total the income from all sources received during the last calendar year (January - December) by yourself and each member of your family who **currently** resides with you. Income includes wages, salaries, tips, business income, interest, dividends, the taxable portion of pensions and annuities, IRA distributions, rents, royalties, partnerships, unemployment compensation, and social security; less alimony paid, and unreimbursed employee business expenses calculated consistent with IRS Form 2106. Compare this total to the figure listed for the circled family size and indicate which range your family income falls within by checking the appropriate box.

My Family Income is (check one)

Family Size (Circle)	<30% Median	30-50% Median	50-80% Median	>80% Median
1	<input type="checkbox"/> < \$15,200	<input type="checkbox"/> \$15,201-\$25,350	<input type="checkbox"/> \$25,351-\$40,500	<input type="checkbox"/> >\$40,500
2	<input type="checkbox"/> < \$17,400	<input type="checkbox"/> \$17,401-\$28,950	<input type="checkbox"/> \$28,951-\$46,300	<input type="checkbox"/> >\$46,300
3	<input type="checkbox"/> < \$21,720	<input type="checkbox"/> \$21,721-\$32,550	<input type="checkbox"/> \$32,551-\$52,100	<input type="checkbox"/> >\$52,100
4	<input type="checkbox"/> < \$26,200	<input type="checkbox"/> \$26,201-\$36,150	<input type="checkbox"/> \$36,151-\$57,850	<input type="checkbox"/> >\$57,850
5	<input type="checkbox"/> < \$30,680	<input type="checkbox"/> \$30,681-\$39,050	<input type="checkbox"/> \$39,051-\$62,500	<input type="checkbox"/> >\$62,500
6	<input type="checkbox"/> < \$35,160	<input type="checkbox"/> \$35,161-\$41,950	<input type="checkbox"/> \$41,951-\$67,150	<input type="checkbox"/> >\$67,150
7	<input type="checkbox"/> < \$39,640	<input type="checkbox"/> \$39,641-\$44,850	<input type="checkbox"/> \$44,851-\$71,750	<input type="checkbox"/> >\$71,750
8	<input type="checkbox"/> < \$44,120	<input type="checkbox"/> \$44,121-\$47,750	<input type="checkbox"/> \$47,751-\$76,400	<input type="checkbox"/> >\$76,400

9 or more _____ Actual Income \$ _____

Currently Employed? (circle appropriate answer) Yes or No

The information provided herein will be confidential and will only be used to provide statistical data required under the Community Development Block Grant program. If appropriate, it may be subject to verification pursuant to the rules and regulations of the Office of Community Renewal and the U.S. Department of Housing and Urban Development.

I certify that the information provided herein is true to the best of my knowledge.

Signature

Date

LETTER OF INTEREST

Cortland County
Microenterprise Program - 2020 Program

My signature below indicates my interest and desire to apply for Microenterprise funds and undertake the project as described in my pre-application should these funds be awarded to Cortland County.

I am familiar with the guidelines and requirements of the proposed program, including the requirement to provide a minimum 10% equity match. I verify that I have the necessary funding to provide this match and commit it to the project. I understand that if the budget for my project exceeds the maximum amount of assistance available through Cortland County, that I will be responsible for providing such additional funds as needed. I also understand that the 10% equity contribution cannot be in the form of debt or a loan.

I further understand that the provision of funding is a competitive process and that a formal application with additional documentation will need to be submitted if I choose to participate in the Program, and that submission of a pre-application or complete final application does not ensure funding. I understand that all final applications will be reviewed by a Committee and approval of applications for funding will be made by the County’s Council.

I fully support the efforts of Cortland County to secure such funds for a Microenterprise Assistance Program and look forward to working with the County to undertake this project.

Sincerely,

Signature

Date

Please make sure all forms are completed and the letter of interest is signed before returning.
Thank you!