

APPLICATION FOR JEFFERSON COUNTY CARES ACT GRANT
SMALL BUSINESS OR NON-PROFIT
DEADLINE: AUGUST 28, 2020

- Name of Business _____
- Address: _____ Phone: _____
- Email: _____ Business Type: _____
- Do you certify that your business has less than 100 employees? YES ____ NO ____
- Did you receive a Paycheck Protection Program (PPP) or Economic Injury Disaster Loan or any other type of relief? YES ____ NO ____
- How did COVID -19 affect your business?

- Estimate of cost associated with COVID-19:

o Lost revenue _____

o Cost associated with PPE _____

o Overtime _____

o Other _____

Please include a total cost for reimbursement:

Name of Applicant: _____ Title: _____ Date: _____

I certify all information provided is true and accurate to the best of my knowledge.

Email Application and Supporting documentation to: CARES@JEFFERSONCOUNTYPA.COM

Must provide documentation of loss due to Covid-19, proof of Non-Profit and W-9.

Grant Funds may be taxable-consult Tax Advisor. All applications are subject to review.