

# SUBMISSION INSTRUCTIONS

Due to the COVID-19 State of Emergency, completed application forms and all attachments should be scanned and email to [jkilbarger@trotwood.org](mailto:jkilbarger@trotwood.org) or can be mailed or dropped off in our secure drop box located outside of the Government Building, labeled “Utility”, at 3035 Olive Road, Trotwood, OH, 45426.

Mail to: Trotwood Business Loan Review Committee  
ATTN: Julie Kilbarger  
3035 Olive Road  
Trotwood, OH 45426

All of the information submitted for our review must be signed and dated. Deadline for application is Monday, November 30, 2020. Funds will be disbursed in December of 2020.

Please contact Julie Kilbarger with any questions or comments, 937-854-7219 or by email at [jkilbarger@trotwood.org](mailto:jkilbarger@trotwood.org)

For more information, please visit the City’s website at [trotwood.org](http://trotwood.org)



**TROTWOOD**  
♦ GROWING TOGETHER ♦

## TROTWOOD BUSINESS TEAM COVID-19 BUSINESS ASSISTANCE PROGRAM

### ELIGIBILITY

#### RETAIL



#### WAREHOUSE



#### SERVICE



#### RESTAURANT/BAR



The City of Trotwood does not discriminate in its programs and activities on the basis of age, color, gender expression/identity, genetic information, marital status, national origin, physical or mental disability, pregnancy, race, religion, sex, sexual orientation, or veteran status, as applicable.

# TROTWOOD BUSINESS TEAM COVID-19 EMERGENCY LOAN PROGRAM APPLICATION

## CITY OF TROTWOOD

### BACKGROUND

The City of Trotwood is offering businesses located within the City 0% interest forgivable financing through Trotwood's Business Emergency Forgivable Loans, supported entirely by the donation from the Sisters of the Precious Blood. This unique financing tool offers forgivable loans to small businesses operating in the City of Trotwood that have been negatively affected by the outbreak of the COVID-19 virus.

Retail, commercial, and entertainment businesses that rely on customers making purchases at their establishment are significantly affected; this program is designed to provide relief to those types of businesses. Business must demonstrate hardship caused by the coronavirus pandemic.

### HOW IT WORKS

Under this program, the City will provide 0% forgivable loans to businesses negatively affected by the COVID-19 outbreak. Businesses may apply for up to \$1,000 in funds under this loan program. Businesses must have a physical location in the City of Trotwood and have experienced a loss of income due to COVID-19. Businesses must provide proof that they are located in and have been before March 2020. Funding is extremely limited and applications will be accepted on a first come, first served basis.

### REVIEW PROCESS

The review process is conducted entirely through the Trotwood Business Loan Review Committee. The loan review process shall take no more than two (2) weeks after all the required materials have been received by the City Staff. After review, and if approval is granted, the applicant will be notified of acceptance via email. Checks will be mailed to businesses; receipt is subject to city processing and USPS delivery.

## REQUIRED APPLICATION SUBMITTALS AND ELIGIBILITY CERTIFICATIONS

**By Checking each box below, the undersigned hereby certifies that the statement is true and/or that the required submittals are provided in conjunction with the application.**

I confirm that my business is located within the City of Trotwood and the business maintains all proper licenses and permits for operation

I certify that my property taxes are current

I certify that my revenue has declined by 30% or more as a result of COVID-19 since March 15, 2020. ***Attach balance sheet, profit loss statement or other financial documentation that demonstrates the required decline in revenue.***

I certify that the average annual gross receipts of the business is less than \$2,000,000

I have attached a copy of the most recent personal tax returns for owners with 20% or more ownership interest. I certify my City income taxes are current

I have attached a completed IRS W-9 Form and DUNS number

I have provided documentation to help verify the economic hardship suffered as a result of COVID-19, including financial statements, and other data as applicable.

I agree to document and report the economic impact to the business as a result of this loan, including but not limited to jobs retained, job hired, increased sales, participation in other relief programs

I confirm that the business is current with all local, state, and federal taxes.

I certify that the business has complied with its bylaws or other governing documents to obtain approval for the undersigned to submit this application and execute a loan agreement on behalf of the applicant.

I certify that the above information, to the best of my knowledge is accurate and true. I understand that the CITY will rely on the accuracy of the submittals and certifications made in conjunction with this application. Any misrepresentation or inaccurate information may be treated as a default concerning any loan made.

Business Name \_\_\_\_\_ Date \_\_\_\_\_

Authorized Rep \_\_\_\_\_ Title \_\_\_\_\_

# TROTWOOD BUSINESS TEAM COVID-19 EMERGENCY LOAN PROGRAM APPLICATION

Year in Business: \_\_\_\_\_ Years at Present Address: \_\_\_\_\_

Lease Expiration Date: \_\_\_\_\_ Monthly Rent: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Average Gross Annual Receipts: \$ \_\_\_\_\_

Please indicate the square footage of the occupied space: \_\_\_\_\_

Amount of Personal Funds invested in the Business to Date: \$ \_\_\_\_\_

Loan Amount Requested: \$ \_\_\_\_\_

Number of Employees before COVID-19:

Full-Time: \_\_\_\_\_

Part-Time: \_\_\_\_\_

Jobs Expected to be Retained/Hired as a Result of this Loan:

Full-Time: \_\_\_\_\_

Part-Time: \_\_\_\_\_

# TROTWOOD BUSINESS TEAM COVID-19 EMERGEN- CY LOAN PROGRAM APPLICATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

EIN# \_\_\_\_\_ Business Owner: \_\_\_\_\_

Business Organization Type: \_\_\_\_\_

**Please provide a brief narrative of the impact COVID-19 has had on your business:**

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**Please describe how the COVID-19 Emergency Loan will be used to help your small business retain/hire employees and keep your business operating during this challenging time?**

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**Please describe the economic and/or community benefits your business creates for the City of Trotwood.**

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**SIGN:** \_\_\_\_\_

**PRINT:** \_\_\_\_\_

**TODAYS DATE:** \_\_\_\_\_