

Huntington County Press Release

Small Business PPE Reimbursement Grant Program

UPDATE: As of August 21, 2020, the City of Huntington is included in this grant program.

COVID-19 has altered the work environment for almost every business in our county. Huntington County wants to help keep our local businesses safe by reimbursing the cost of Personal Protective Equipment (PPE). If you have a small business, this reimbursement grant program can help you outfit your employees with the PPE needed to do their jobs safely.

An application for the Huntington County Small Business PPE Reimbursement Grant Program is attached. This program is for all small businesses in Huntington County and its municipalities. The grant can be used by non-profits, freelance workers, and any other business with 1-20 employees in Huntington County. PPE that is eligible for reimbursement includes washable face masks, face mask filters, disposable face masks, face visors, hand sanitizer, hand wipes, and gloves.

This grant reimburses a business for its PPE purchased on or after March 1, 2020, through October 31, 2020. Up to \$2,000 of PPE can be reimbursed per application period, for a total of \$4,000 per business.

The first application period is from August 15 to August 31. The second is from October 15 to October 31. The county will only accept applications sent during these two application periods.

Interested businesses can apply for the PPE reimbursement grant using the attached application form. If there are any questions, please contact Huntington County's Grant Program Manager, Aliza Tourkow, at aliza.tourkow@huntington.in.us or 260-999-8600.

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Small Business PPE Reimbursement Grant

COVID-19 has altered the work environment for almost every business. Huntington County wants to help keep our local businesses safe by reimbursing the cost of Personal Protective Equipment (PPE). If you have a small business, this reimbursement grant program can help you outfit your employees with the PPE needed to do their jobs safely.

For the purposes of this grant, PPE includes:

- Washable face masks
- Face mask filters
- Disposable face masks
- Face visors
- Gloves
- Hand sanitizer
- Hand wipes

Who qualifies for this grant?

1. A small business with 1-20 staff members.
2. A for-profit or not-for-profit small business that is registered with the State of Indiana.
3. A small business that also meets a. or b. below:
 - a. A business physically located in Huntington County or any of its municipalities.OR
 - b. A business comprised of a freelance worker whose business address and home address are the same, with a contract to work in Huntington County during the year 2020.

What does this grant cover?

1. This grant will reimburse a business for the purchase of its PPE, as listed above.
2. All purchases must have been made on or after March 1st, 2020, through October 31st, 2020.
3. As a reimbursement grant, small businesses must submit an invoice (or invoices) for all PPE items purchased, along with a receipt or other proof of purchase.
4. Alternatively, small businesses may provide itemized receipts for the PPE items purchased. If the itemized receipt is not clear as to the items purchased, be sure to submit a short explanation of each line item.

How much grant funding can be requested?

1. The maximum amount of this PPE reimbursement grant is \$2,000 per business, per application period.
2. There will be two (2) opportunities to request reimbursement from this grant program, allowing a total of \$4,000 to be reimbursed per business.

When can I apply for this grant?

1. The 1st application period is from August 15th – August 31st, 2020. Grants will be awarded in September. Purchases must have been made between March 1st, 2020 and August 31st, 2020.
2. The 2nd application period is from October 15th – October 31st, 2020. Grants will be awarded in November. Purchases must have been made between March 1st, 2020 and October 31st, 2020.
3. Applicants awarded a grant during the 1st application period will be disqualified if they submit the same invoices and receipts in the 2nd application period as they did in the 1st application period.
4. Application material will NOT be accepted until the grant opens on August 15th or October 15th. Applications submitted outside of the two-week application periods will be discarded.
5. Application forms must be filled out completely, signed, and the requested attachments must be included (such as invoices, receipts, Indiana Secretary of State Business Entity Report, etc.); otherwise, an application is incomplete and cannot be processed for review.

Who do I contact if I have questions?

Please contact Aliza Tourkow at aliza.tourkow@huntington.in.us or (260) 999-8600 with any questions.

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Business Information

Date of application submittal: _____

Legal business name: _____

Trade name (dba), if any: _____

Business address: _____ County: _____

Business phone: _____ Business email: _____

Applicant name: _____ Phone: _____ Email: _____

**Applicant must be authorized to sign on behalf of business and is preferably one of the Owners. Can be same as Contact.*

Contact name: _____ Phone: _____ Email: _____

**Name of person to contact with questions about this application. If same as Applicant, state "same" in the blanks.*

If Freelance Worker, provide name and address of contracted employer in Huntington County:

**Attach your contract as proof that you work in Huntington County for the year 2020.*

EIN: _____ Number of employees at this business: _____

**If more than 20 employees, you are not eligible for this grant.*

Business Structure

- General Partnership
 Limited Liability Partnership (LLP)
 Limited Liability Company (LLC)
 Sub-C Corporation
 Sub-S Corporation
 Domestic Non-profit Corporation

Date of Organization: _____ State of Organization: _____

**Attach your most recent Indiana Secretary of State Business Entity Report (available at inbiz.in.gov).*

Ownership

Name	Title	% Ownership

Describe the basic nature of the business (i.e. Attorney's Office, Hair Salon, Landscaping Business, etc.):

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Reimbursement Grant Requests

Amount of PPE reimbursement being requested under this grant: \$ _____

**Maximum request is \$2,000.00 per business, per open-application period.*

Circle the PPE types included in the attached receipt(s):

Washable face masks	Face mask filters			
Disposable face masks	Face visors	Hand sanitizer	Hand wipes	Gloves

Invoices & Receipts from March 1, 2020 through August 31, 2020 (if applying in August):

OR Invoices & Receipts from March 1, 2020 through October 31, 2020 (if applying in October):

- How many invoices have you attached for the PPE purchased? _____ invoices
**If you include invoices, you must provide proofs of payment (i.e. receipts, cancelled checks (front & back), etc.) that match the invoices.*
- In lieu of invoices, how many itemized receipts have you attached for the PPE purchased? _____ receipts
**If you include itemized receipts, make sure they are easy to read. If a line states "XL OR GL," write what that item is beside the item, such as "Extra Large Orange Gloves."*
- **NOTE:** If an invoice or itemized receipt contains items that are not reimbursable PPE items, cross those items out with a line and calculate the actual PPE cost, as this expresses your reimbursable amount.
- **NOTE:** If applying in October, you cannot use invoices or receipts reimbursed by this grant in August. Attempting to do so disqualifies you from being awarded a grant.

Grant Awards

- Applicants will be notified in September or November regarding the status of their grant applications.
- Grant awards will be provided via ACH (i.e. electronic deposit). Please complete the attached ACH form and submit it with this grant application. If your business lacks the capability of receiving ACH deposits, you may request a paper check via the ACH form.

Certifications

1. The applicant acknowledges that the PPE being reimbursed by this grant must be used in Huntington County for business purposes.
Applicant signs here: X
2. The applicant acknowledges that the PPE being reimbursed by this grant has NOT been reimbursed under any other grant program (no "double-dipping" of grant funds).
Applicant signs here: X
3. The applicant acknowledges that the PPE being reimbursed by this grant will NOT be sold to any individual, business, or other entity and will only be used by the applicant business.
Applicant signs here: X

By signing below, I, on behalf of the applicant business, additionally certify that:

- I am fully authorized to sign this application on behalf of the business.
- If awarded grant funding, the business and its employees agree to abide by the terms and conditions contained herein.
- I have reviewed and verified the content of this application and certify that the information provided is true and accurate.

X

Signature of authorized Applicant, on behalf of the Business

Date

Printed Name

Title

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Upon Completion

- Print all pages and sign the form in every required space.
- Scan the application and all of the required attachments into a PDF document and email it to: aliza.tourkow@huntington.in.us
- Alternatively, send a paper copy of this application form, along with all required attachments to:
Aliza Tourkow, Grant Program Manager
Huntington County Emergency Management Agency
332 E. State Street
Huntington, IN 46750

Check List

- _____ 1. Attach completed application form, including EIN, signed in all signature spaces.
- _____ 2. If you are a freelance worker, attach your contract to work in Huntington County during 2020.
- _____ 3. Attach most recent Indiana Secretary of State Business Entity Report.
- _____ 4. Attach invoices and proofs of payment for PPE purchased during the eligible time period.
OR
- _____ 5. Attach itemized receipts for PPE purchased during the eligible time period.
- _____ 6. If receipts are not clear, include a short explanation of the unclear line items.
- _____ 7. Attach completed ACH form with your business's information.
- _____ 8. Scan and email a PDF of the above items to the County at aliza.tourkow@huntington.in.us.
OR
- _____ 9. Send a paper copy of the application and its attachments to:
Aliza Tourkow, Grant Program Manager
Huntington County Emergency Management Agency
332 E. State Street
Huntington, IN 46750

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The Huntington County Auditor/Treasurer's Office provides the opportunity to receive a grant award via ACH (electronic deposit). Please complete this form with your banking information and attach it to the grant packet. This is the fastest way to receive a grant award.

If your business lacks the capability of receiving ACH deposits, you may request a paper check. Please complete that section below and return this form by attaching it to the grant packet.

Name on the Banking Account: _____

Bank Name: _____

Routing Number: _____

Account Number: _____

Business Phone Number _____

Contact Person _____

E-mail Address to send ACH Remittance (email alert of deposit) _____

Is this a Business **Checking** or **Savings** Account? _____

My business lacks the ability to receive ACH deposits. Please mail my grant award to my business at:

First and Last Name _____

Business Mailing Address _____

**Must match the address on the 1st page of the grant.*