

Livingston County Cares Act

Concept: Using a portion of the COVID-19 special allocation of federal funds being funneled through the State of Missouri to Livingston County. Livingston County together with the City of Chillicothe will launch the recovery assistance grant program "Livingston County Cares Act". The program would offer temporary financial relief to those small, local businesses impacted by the COVID-19 public health crisis.

Objectives:

1. To help Livingston County's small businesses by getting them back to work and retain jobs.
2. Help small businesses as they re-open and return to work in a new public health environment, keeping employees and customers safe.
3. Reenergize and restore consumer confidence in Livingston County.

Goal: Support and retain small businesses significantly impacted by COVID-19, by limiting the extent of disruption and loss and reenergizing the community.

Grant Criteria:

1. Small businesses that have experienced significant negative impact due to the Livingston County/City of Chillicothe and/or State of Missouri emergency orders requiring closure or business interruptions due to the COVID-19 health crisis.
2. Businesses located within Livingston County, and in good standing with Livingston County and respective City and Townships (i.e., current on all taxes, permits, and licenses prior to March 2020).
3. A physical "brick and mortar" business presence in Livingston County is weighted.
4. Businesses in the retail service sectors, including restaurants and bars, weighted.
5. Restaurants and other food and beverage establishments that did not have a drive-thru window or offer curbside or delivery services before March 2020, weighted.
6. A business primarily owned by a Livingston County resident(s), weighted.

Eligible Use of Funds:

1. Grants can be used for expenses incurred by your business from March 1, 2020 through May 3, 2020 for which you are applying for reimbursement. Expenses can include but are not limited to payroll (conditional), rent, mortgage interest, utilities, inventory replacement and COVID-19 supplies. (Documentation of the expenses is required)
2. The grant funds may also be used to secure additional testing for the COVID-19 virus, purchasing necessary protective equipment for employees and customers, and exterior/interior cleaning needed to keep facilities sanitized.
3. Business must have at least one full time (32 hours per week or more) paid employee/owner.
4. Business must be following any applicable Emergency Orders and Declarations.
5. Grant funds may not be used to cover costs that will otherwise be reimbursed through other state or federal programs.

Process: A panel of (4) county officials, (3) City officials and (1) Health Department official will be the oversight committee to approve grants recommended by a sub-group that includes the oversight

committee, representatives from the Chamber of Commerce, Main Street, Chillicothe Industrial Developmental Corporation and each of the four local banks.

Grant applications will be available online at:

www.livingstoncountymo.com

www.chillicothemmo.com

Facebook: City of Chillicothe Missouri

Facebook: Connecting Chillicothe/Livingston county & Chillicothe Area Chamber

Applicants must demonstrate how his/her business has been significantly impacted by the COVID-19 public health crisis, as well as demonstrate the business has the financial capacity to re-open and continue to operate into the future.

Grant applications are to be submitted by June 5, 2020 to the Livingston County Clerk's Office at 700 Webster Street, Suite 3, Chillicothe, MO 64061

Questions regarding the "Livingston County Cares Act" grant program may be directed to: Sherry Parks, County Clerk 660-646-8000 ext 3 or Roze Frampton, City Clerk 660-646-1877

DEADLINE JUNE 5, 2020

BUSINESS APPLICATION FOR LIVINGSTON COUNTY CARES ACT GRANT

Name of Business _____

Business Structure - Corporation ____ Sole Prop ____ LLC ____ Partnership ____ Non-Profit ____

Address _____

Business Phone Number _____

Owner's Name & Address _____

Did your business close or alter operations due to Covid-19? - Yes ____ No ____

If yes please explain _____

If yes, dates of closure _____

If yes, date of reopening or expected reopening _____

Percentage of revenue decrease from March & April, 2019 to March & April, 2020 _____

Number of employees - Full-time _____ Part-time _____

Did your business receive any COVID-19 financial assistance (PPP, EIDL, etc.) ? Yes ____ No ____

If yes, amount received _____

Expenses incurred by your business from March 1, 2020 through May 3, 2020 for which you are applying for reimbursement. Expenses can include but are not limited to payroll, rent, mortgage interest, utilities, inventory replacement and Covid-19 supplies. Provide additional pages if necessary. Documentation of the expense must be attached.

Payroll amount _____

Rent amount _____

Mortgage Interest amount _____

Utilities amount _____

Inventory replacement amount _____

Covid-19 supplies amount _____

Other (describe) amount _____

Other (describe) amount _____

Other (describe) amount _____

Total amount _____

Signature _____ Date _____

*** Please attach a narrative of your specific needs or additional information if available.