



# Syracuse Economic Development Corporation

## ARPA Micro-Enterprise Assistance Fund | Forgivable Loan Application

### 1. APPLICATION INFORMATION

Legal Business Name: \_\_\_\_\_ Year Founded: \_\_\_\_\_

Business Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Applicant/Primary Contact: \_\_\_\_\_ Title: \_\_\_\_\_

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

Amount of funding requested (note: must be consistent with budget on pg. 6) \$ \_\_\_\_\_

#### Which best describes your business:

- Corporation (including LLC's)
- Partnership
- Sole Proprietorship

#### Which industry classification best describes your business (check no more than 2):

- Retail Trade     Food Service     Manufacturing     Tourism / Travel
- Personal Services     Medical Services     Transportation     Child Care
- Hospitality     Other: \_\_\_\_\_

Has your business received any prior financial assistance through federal, state, or local Covid-19 support program since March 7, 2020?     Yes     No

If yes, please specify from the following program(s) below:

Program Name: _____	Amount Received: _____
Program Name: _____	Amount Received: _____
Program Name: _____	Amount Received: _____
Program Name: _____	Amount Received: _____

If applicable, please estimate the total amount of Covid-19 funding assistance your business has received since March 7, 2020. \_\_\_\_\_

Did your business experience a decline (loss) of sales in 2020, 2021 or 2022?     Yes     No



**2. EMPLOYMENT/OPERATIONS**

Total # of employees as of March 7, 2020 (if applicable): \_\_\_\_\_

Total # of current employees as of date of application: \_\_\_\_\_

Was your business open & operating on March 7, 2020?  Yes  No

If yes, for what period of time? \_\_\_\_\_

If no, please describe, in detail, when your business opened and your prior experience/background in the industry of which your business is categorized?

**3. BUDGET AND FINANCIAL REQUEST**

Please complete the table below to list out and explain the costs/expenses you are requesting to use SEDCO funds for. You must include the estimated cost amount, the item/service, name of the 3<sup>rd</sup> party vendor or company providing the item/service (if applicable), and its purpose to benefit your business.

**Please note the total amount of funding requested below cannot exceed \$5,000.**

AMOUNT	EXPENSE/ITEM	3 <sup>rd</sup> PARTY VENDOR / COMPANY NAME	PURPOSE
\$			
\$			
\$			
\$			
\$			
\$			
\$			
<-----			<b>TOTAL FUNDING AMOUNT REQUESTED</b>



Due to high demand, it is possible applicants may not receive the full funding request made to SEDCO. Please explain how you will prioritize each expense item listed above relative the amount of any financial assistance provided:

Please describe, in detail, the impact Covid-19 has had on your business since March 2020. Additionally, please provide a summary of the measures your organization has taken to date, or plans to take in the next 60-90 days in order to adapt to current economic conditions:

The Syracuse Economic Development Corporation (SEDCO) is working with companies and organizations across our community and making efforts to provide resources to those most impacted by economic hardship since March 2020. Please explain how your request will immediately benefit your organization, your workforce, and more broadly, the City of Syracuse community in the short term and long term.



#### 4. MISCELLANEOUS

- Yes  No Is the Company or its principals presently the subject of any litigation, or is any litigation threatened, which would have a material adverse effect on the Company's financial condition?
- Yes  No Has the Company or its principals ever settled a debt with a lending institution for less than the full amount outstanding?
- Yes  No Has the company, its affiliates or its principals ever filed bankruptcy, a creditor's rights or receivership proceeding, or sought protection from creditors?
- Yes  No Is the Company or its principal's delinquent on property, personal, and/or employment taxes?
- Yes  No Has the Company or its principals ever been convicted of any felony or misdemeanor, other than a minor traffic violation, or are any charges pending?
- Yes  No Has the Company, its affiliates or its principals, been cited for a violation of federal, State or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution or operating practices?
- Yes  No Are there any outstanding judgments or lien pending against the Company, its affiliates or its principals other than liens in the normal course of business? If yes, please specify the amount: \$ \_\_\_\_\_
- Yes  No Has the company or principal(s) ever been issued an injunction, been imposed civil penalties or fines? been accused of false or misleading statements, or been the subject of a proceeding or had any allegations made against them, by any federal, state, local agency or authority including but not limited to the SEC, FCC, FDA, or OSHA? If yes, please attach a written explanation to this application.

#### 5. APPLICATION ATTACHMENTS

Please verify the required materials have been submitted as part of your funding request. Applications will be considered incomplete and will not be reviewed without the following:

**Required attachments (please mark the items below that are being submitted):**

- 2021 + 2022 Business Federal Tax Return including all schedules;
- 2021 + 2022 Personal Federal Tax Return for any individuals with >20% ownership
- An interim Profit & Loss Statement from within the last 90 days;
- An Interim Balance Sheet from within the last 90 days;
- A personal financial statement [available using this link](#) dated within the last 60 days for any individuals with >20% ownership
- Any vendor estimates, quotes, or documents to explain the cost of the items SEDCO funds are being requested for



**Other Requirements:**

For each of the above, a resolution of the board of directors, if applicable, or other certification acceptable to the corporation of an authorized officer of the company authorizing the submission of this application and the acceptance of any approved loan proceeds.

Aside from the foregoing, the Agency may obtain a credit report and reserves the right to request additional financial or other corporate governance or other materials or information it deems necessary to adequately review and assess the application.

A contract agreement must be executed between SEDCO and approved applicants prior to disbursement of any approved funds.

SEDCO reserves the right to request any additional information as deemed necessary.

If any of the required attachments listed above are not attached to this application, please provide explanation:

**6. DISCLOSURE**

Please note the Agency is required to comply with Article 6 of the Public Officers Law which declares that all records in the possession of the Agency (with certain limited exceptions) are open to public inspection and copying. If the Applicant feels that there are elements of the application which are exempt from disclosure under Art. 6 of the Public Officer's Law, the Applicant must identify such elements in writing and request that such elements be kept confidential. In accordance with Article 6 of the Public Officers Law, the Agency may also redact personal, private, and/or proprietary information from publicly disseminated documents. **It is the responsibility of the Applicant to request the Agency redact any and all information it deems exempt in compliance with Article 6 of the Public Officers Law.**

**7. SIGNATURE AND APPLICATION ACKNOWLEDGMENTS**

The Applicant understands and agrees with the Agency as follows:

**A. Absence of Conflicts of Interest**

The applicant has received from the Agency a list of members, officers and staff of the Agency. To the best of my knowledge, no member, officer or employee of the Agency has an interest, whether direct or indirect, in any transaction contemplated by this application, except as hereinafter described.

Initial

**B. False or Misleading Information**

The applicant understands and agrees that the submission of knowingly false or misleading information in this application may lead to the immediate termination of any financial



assistance and the reimbursement of an amount equal to all or part of any awarded and disbursed. Initial

**C. Hold Harmless Agreement**

Applicant hereby releases the Agency and the members, officers, servants, agents and employees thereof (collectively, the "Employees") from, agrees that the Agency and the Employees shall not be liable for, and agrees to indemnify, defend, and hold the Agency and the Employees harmless from and against any and all liability arising from or expense incurred by the Agency's examination and processing of, and action pursuant to or upon, the attached application, regardless of whether or not the application is favorably acted upon by the Corporation. Initial

**D. SEDCO's Policies**

The applicant is familiar with SEDCO's policies posted on its website (<http://www.syr.gov.net/SEDCO>) and agrees to comply with all applicable policies as if any awarded funds constituted a project as set forth in such policies. Initial

**E. Disclosures**

The Applicant has read paragraph 6 above and understands that the Applicant must identify in writing to the Corporation any information it seeks to have redacted. Initial

**F. Reporting**

Applicants agree to cooperate with the Corporation to satisfy any State mandated reporting requirements. Initial



**VERIFICATION**

STATE OF \_\_\_\_\_ )  
COUNTY OF \_\_\_\_\_ ) SS:

\_\_\_\_\_, deposes and says that s/he is the  
(Name of Individual)

\_\_\_\_\_ of \_\_\_\_\_  
(Title) (Applicant Name)

that s/he is the CEO or a person authorized to bind the company/applicant, and has personally completed and read the foregoing application and knows the contents thereof and that the same is true, accurate, and complete to the best of her/his knowledge, as subscribed and affirmed under the penalties of perjury. The grounds of deponent's beliefs relative to all matters in the said application which are not stated upon her/his own personal knowledge are investigations which the deponent has caused to be made concerning the subject matter of the application as well as, if applicable, information acquired by deponent in the course of her/his duties/responsibilities for the applicant and from the books and papers of the applicant. The deponent also acknowledges the Corporation's fee schedule and assumes responsibility for payment of any and all applicable fees as described herein. Deponent further acknowledges review and understanding of the Corporation's published policies, and agrees on behalf of the Applicant to be bound by and comply with, all such policies as set forth in the application.

\_\_\_\_\_  
Applicant Representative's Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Federal Employer Identification Number (EIN)

