

Town of Berwyn Heights

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2022 ARPA Grants for Berwyn Heights Based Businesses & Non-Profit Organizations

Application Grants up to \$25,000 for Operating and Small Capital Expenditures.

This grant is available to all eligible Town of Berwyn Heights based businesses and non-profits as allowed by the American Rescue Plan Act (ARPA) to address the negative economic impacts caused by the COVID-19 public health emergency. All businesses with current Berwyn Heights business licenses and non-profits are invited to apply. National franchises and chains will be considered on a case-bycase basis. Funding is available until depleted.

Provides Funding for:

- Broadband Infrastructure
- Equipment for small businesses serving the Town of Berwyn Heights
- Rental Assistance
- Digital advertising/website/e-commerce creation and maintenance
- Payroll Assistance
- Business Relocation and Reopening

Eligibility

- Commercial businesses and nonprofits with a physical presence in the Town of Berwyn Heights
- Operating business as of November 1, 2021
- 75 or fewer FTEs
- Town of Berwyn Heights property taxes and other Town bills or obligations are not eligible.
- Vape, liquor, and tobacco businesses, or age-restricted business ineligible, if applicable per law
- Town elected officials are not eligible

Requirements

- Completed Application include need for funding; evidence of business disruption; how funds will be utilized in accordance with requirements; and business continuity plan
- Current/valid Town of Berwyn Heights Business License
- Provide documentation to prove eligibility, must include any of the following:
 - Two most recent tax returns
 - Most Recent Income Statement
 - Current Employee Roster
 - Articles of Incorporation/Organization/Formation
 - Current lease or last two mortgage statements
- Completed non-discrimination statement and hold-harmless agreement
- Commitment to maintain funded project(s) within the Town of Berwyn Heights for a minimum of two (2) years

• Applicants must maintain a website for their businesses and link to the Town of Berwyn Heights for news and information.

Questions? Email <u>mfriesen@berwynheightsmd.gov.</u> All questions are required, and the form will not be accepted without a response.

Business Name:
Type of Business:
Mailing Address:
Business Website:
Business Owner:
Phone Number:
Email:
Contact Person and contact details (if different):
Physical Business Address (if different):
Is the applicant the owner of the subject business?
Do you have a current/valid Berwyn Heights Business License?
Was this an operating business on November 1, 2021?
Start of operations in Berwyn Heights:
Is this business part of, or franchise of, a national chain?
Are there other outlets of the business?
If yes, how many?
Number of employees (FTEs):

Average Payroll:
Payroll Frequency:
Current average monthly expenses, excluding payroll:
Is this business currently shut-down/closed?
If yes, date of closing:
Date of planned reopening:
Briefly describe how your business operations have been disrupted relative to the COVID-19 pandemic and how this has created the need for financial assistance for your business. Include circumstances of shutting down/closing, if applicable.
Briefly describe how the proceeds from this grant will be utilized in accordance with the requirements. Please include the specific expenses that would be paid.
Total ARPA Grant funds requested:
Please list the funding purpose (rent, mortgage, payroll, utilities, equipment, etc.) with the specific amount requested (total of listed purposes should equal the Total ARPA Grant funds requested):

All applicants are required to commit to maintain funded project(s) within the Town of Berwyn Heights for a minimum of two (2) years. Do you commit to maintain funded project(s) within the Town for a

minimum of two (2) years?		

Required documentation: Copies of your current Town of Berwyn Heights Business License, two most recent tax returns, current lease or last two mortgage statements, most recent income statement, current employee roster, and Articles of Incorporation/Organization/Formation.

Only completed application packets, including all required documentation, with signed affidavit below, will be reviewed by Town staff.

We, the authorized representative(s) of the grantee organization, do hereby confirm that any information provided to the Town of Berwyn Heights in connection with the application for ARPA grants is true and correct to the best of our knowledge, information, and belief. We further affirm that we will comply with the Non-Discrimination clause and Hold Harmless Agreement detailed as follows: NON-DISCRIMINATION: The Grantee certifies that it does not discriminate on the basis of race, religion, sex, age, ethnicity, ancestry, or national origin, physical or mental disability, color, marital status, sexual orientation, gender identity, genetic information, political affiliation, or any other factors not related to the ability to provide services. HOLD HARMLESS AGREEMENT: If this grant is approved, in consideration for the receipt of any ARPA grant monies from the Town of Berwyn Heights, and any other good and valuable consideration, receipt and sufficiency of which is hereby acknowledged, the undersigned does hereby agree to indemnify and hold the Town of Berwyn Heights, its agents, servants and employees, harmless from and against any and all claims, demands, actions, causes of action, suits, and proceedings by others, and against all liability for damages, including attorneys' fees, incurred by reason of or arising from any program, class, equipment or activity for which funds provided by the Town of Berwyn Heights are used directly or indirectly, regardless of whether or not the Town is named as a sponsor. We hereby affirm, under penalties of perjury, that we have full legal capacity to authorize the disbursement of this grant to our organization and that all information and attachments that have been provided to the Town are true and correct to the best of our knowledge. The Grantee invites the Town to make all reasonable inspections and investigations to determine the need for economic assistance. We have read and understand the requirements for the Non-Discrimination clause and the Hold Harmless Agreement for this grant and confirm that the need for this grant is directly related to impacts of the COVID-19 pandemic. Organization:

Applicant Signature:
Applicant Title:
Additional Business Owner Signature (if applicable):
Additional Business Owner Name and Title (if applicable):
Date and time:

Applicant grants permission to the Town of Berwyn Heights use of pictures, names, and likenesses	s for
purposes of marketing and business initiatives:	