

COVID-19 Small Business Recovery Grant

Callaway County was a recipient of CARES Act funding during the COVID-19 pandemic. A portion of the funding is being appropriated to the Fulton Area Development Foundation to establish a small business recovery grant program to provide COVID-19 related support to as many small businesses within Callaway County as possible.

Purpose:

To provide small businesses in Callaway County funding that will assist them with COVID-19 related business expenses. This grant is not meant to cover loss of revenue; however, your business could qualify if it made COVID-19 necessitated changes or improvements to continue operations or re-open following a period of government-directed closure.

Re-payment:

Businesses that receive this grant are not required to repay the grant. This is not a loan; it is an investment in our community to help small businesses in Callaway County recover from the negative impact caused by the COVID-19 pandemic.

How can your business qualify?

- Business was unable to continue normal operations during COVID-19
 - Temporarily closed
 - Reduced hours or product lines
 - Altered method of delivering service
- Less than 50 employees
- Non-Profit Organizations are eligible

How can my business qualify for the grant?

- Tell us how COVID-19 impacted your business. Examples: temporary closure, reduced hours, creating innovative business practices. Please use a separate sheet of paper to include with your grant application.

How do I apply for the COVID-19 Small Business Recovery Grant?

Applicants should fully complete the grant application, have it notarized, and return it to the Callaway Chamber of Commerce by August 7, 2020. All businesses that apply must be licensed and operate within Callaway County.

Disclaimer:

Fulton Area Development Foundation reserves the right to award grants based on fund availability and eligibility.

Application for COVID-19 Small Business Recovery Grant

Application Date: _____

Legal Business Name: _____

Date Business was established: _____

Business Address: _____

Type of Business: _____

Business Contact: _____

Title: _____

Contact Number: _____ Alternate number: _____

Email: _____

of employees: _____ (FT and PT)

Are you applying for a business that is in Callaway County?

- Yes
- No

How was your business impacted by COVID-19?

- Modifications made to continue operations
- Unable to operate for a period of time
Date closed: _____ Date reopened: _____

How Grant funds will be used: _____

Please include with Application:

- Written explanation of how COVID-19 impacted your business. We want to hear your story. (please include additional pages for your written explanation) including how you will use the funds to keep your business thriving.
- Copy of your business license
- Non-profits should include Certificate of Good Standing from the State of Missouri

Applicant Name

Applicant Representative Name

Applicant Representative Signature

Title

Date

Subscribed and sworn to before me this _____ day of _____, 2020

Notary

Return application and all required documents to:

Tamara Tateosian
Executive Director
Callaway Chamber of Commerce
510 Market Street, Fulton, MO 65251
tamara@callawaychamber.net

OFFICE USE ONLY

Date Received: _____ Received By: _____

FADF Decision: YES NO Date Awarded: _____

Comments: _____