



Village of Peoria Heights Commercial Expense Reimbursement Grant Program

In response to the Coronavirus Disease 2019 (COVID-19) pandemic, the Village of Peoria Heights has partnered with State of Illinois Department of Commerce and Economic Opportunity to create the Commercial Expense Reimbursement Grant Program to assist Affected Business Owners who operate commercial businesses within the boundaries of the Village of Peoria Heights.

Grant awards are offered as a reimbursement in an amount not to exceed \$5,000.00 of total verified eligible commercial expenses for lease, mortgage, or utility payments incurred from March 1, 2020 – October 31, 2020. Applicants must demonstrate a decrease of 25% in sales or receipts compared to 2019 for month(s) submitted for reimbursement.

All applications are reviewed by the Village on a first-come-first-serve basis and approved subject to the availability of funds as authorized by the Department of Commerce and Economic Opportunity **through December 15, 2020.**

All required information to verify eligibility must be submitted to the Village alongside the Grant application.

For more information, please contact Mr. Dustin Sutton, Village Administrator Village of Peoria Heights, 4901 N. Prospect Road, Peoria Heights, IL 61616 Ph: (309) 686-2385; Email: dsutton@heightspd.com

The immediate goal of the **Peoria Heights Commercial Expense Reimbursement Grant Program** (the “Program”) is to provide economic support to Affected Business Owners located within the Village of Peoria Heights. To be funded, Affected Business Owners must have an approved application and have signed the Program certification agreement.

The Grant application includes a repayment obligation if businesses are found to be ineligible for funds.

Applications for the program will be accepted through December 15, 2020 or until funding is exhausted.

The Program uses funding from the Department of Commerce and Economic Opportunity’s Economic Support Payments Grant Program to provide support to Affected Business Owners who have suffered from economic loss and hardship. All Affected Business Owners are invited to apply for a Program Grant at the rate of one (1) Grant per Affected Business Owner subject to verification of eligible commercial expenses, availability of funds, and approval of the Village. Each Grant awarded to an Affected Business Owner through application to the Grant Program shall be on a first-come-first serve basis, and limited to a single, lump-sum maximum reimbursement of Five-Thousand and 00/100 Dollars (\$5,000.00) of eligible commercial expenses through December 15, 2020.

Expenses previously reimbursed by any other emergency reimbursement program will be ineligible.

Definition of Terms

Affected Business Owner: a commercial business owner operating an eligible business demonstrating economic loss and hardship attributable to COVID-19 who had occupied a site and commenced commercial activities on or before March 1, 2020.

Eligible business: a legal business enterprise licensed by the State of Illinois eligible for financial assistance under DCEO’s Local Cure Economic Support Program Grant Program, section 601(a) of the Social Security Act as added by section 5001 of the CARES Act, or other federal legislation addressing the COVID-19 emergency. Eligible businesses include self-employed individuals and independent contractors. *Please note: private clubs, businesses that restrict membership, government-owned businesses, except those owned by a Native American tribe, businesses that derive more than 33% of their gross annual revenue from gambling activities (except restaurants with gaming terminals), businesses engaged in pyramid sales, and payday lenders are not eligible businesses under this Program.*

Economic loss and hardship: decrease in monthly sales or receipts of at least 25% when compared to the same month(s) in 2019.

Eligible commercial expenses: lease, mortgage, or utility payments for a commercial location within the boundaries of the Village of Peoria Heights incurred between March 1, 2020 – October 31, 2020. Expenses previously reimbursed by CARES funding, Local CURES funding, Village funding, or any other emergency response program are not eligible for reimbursement.

Utility: water, electric, gas, waste disposal, sanitation, telephone, and / or internet services.

The application procedure is as follows:

1. Complete the Program Application, including all required attachments or supplemental information, and submit everything to the Village Clerk's office. All applications will be reviewed and approved or denied by consent of the Village Administrator and attested to by the Village Clerk which shall constitute Village Board approval.
2. Applicants must provide documentation of all expenses requested for reimbursement. Charges must be incurred between March 1, 2020 and October 31, 2020. Requests for lease reimbursements must be accompanied by a written lease agreement. Requests for mortgage reimbursements must be accompanied by a copy of the mortgage statement from the financial institution holding the mortgage lien. Requests for utility reimbursements must include all invoices for the original charges.
3. Applicants must provide proof of payment for all requested reimbursements. Proof of payment includes copies of cancelled checks, copies of bank statements, and copies of credit card statements.
4. Applicants must include a current copy of their State of Illinois business registration/IBT Number. [NOTE: Not all businesses require a license issued by the State of Illinois. However, any business that issues payroll checks to employees must register with the Illinois Department of Revenue for an Illinois Business Tax Number ("IBT" No.)]
5. Applicants must provide proof of tax filings and payments for the preceding 12 months.
6. Applicants must provide a profit and loss, or other accounting statement, showing a decrease in revenues of at least 25% from 2019 to 2020 for any month(s) reimbursements are requested.
7. Applicants must sign and return a copy of the Village's certification agreement for the Program.
8. The Affected Business Owner's business location must be located at an address within the boundaries of the Village of Peoria Heights.
9. The Affected Business Owner's commercial activities must have been in operation as of March 1, 2020 at a location within the Village of Peoria Heights.
10. The grant award shall be paid to the Affected Business Owner by the Village within ten (10) business days following verification of application and expenses eligible project costs.
11. If the Village rejects a Program application, a written explanation will be provided to the Applicant. The Applicant may then revise and resubmit the Application for a second review.

All fields must be completed.

Business Name: _____

Business Owner(s) Name(s): _____

Business Site Address: _____

Business Mailing Address: _____

Daytime Business Phone: _____ Cell Phone: _____

Email Address: _____

Preferred contact method for questions about this application (select one):

- Business phone
- Cell phone
- Email

Property Tax ID # _____ FEIN: _____ Business License No. _____

Type of Business (select one) Service Retail Other (*describe*): _____

Requested reimbursements:

- Lease Payment(s) \$ _____
 Monthly Lease Payment: \$ _____ Month(s) covered: _____

- Mortgage Payment(s) \$ _____
 Monthly Lease Payment: \$ _____ Month(s) covered: _____

- Utility Payment(s) \$ _____
 - Gas \$ _____ Month(s) covered: _____
 - Electric \$ _____ Month(s) covered: _____
 - Water \$ _____ Month(s) covered: _____
 - Telephone \$ _____ Month(s) covered: _____
 - Internet \$ _____ Month(s) covered: _____
 - Waste Disposal \$ _____ Month(s) covered: _____
 - Sanitation \$ _____ Month(s) covered: _____

Total Amount of Grant Request: \$ _____

NOTE: All grant awards are limited to \$5,000 of total verified eligible commercial expenses incurred by Affected Business Owner between March 1, 2020 – October 31, 2020.

All grants awarded through the **Peoria Heights Commercial Expense Reimbursement Grant Program** (the "Program") shall be for eligible commercial expenses during month(s) of documented economic loss and hardship

between March 1, 2020 and October 31, 2020. Grants are approved and paid on a *first-come-first-served* basis, subject to the availability of funds and the approval of the Village through December 15, 2020.

Please read the following requirements carefully.

ADDITIONAL REQUIREMENTS:

1. Only site addresses that are occupied and operated by the Affected Business Owner located within the Village of Peoria Heights are eligible for the Program. Site eligibility may be confirmed by contacting the Village Clerk's office.
2. Affected Business Owners may apply for and receive Program grants only one time for eligible commercial expenses incurred for the site on or between March 1, 2020 and October 31, 2020.
3. The maximum Program grant amount for each business site approved for the Peoria Heights Commercial Expense Reimbursement Grant Program shall not exceed the total verified eligible costs up to a total of Five-Thousand and 00/100 Dollars (\$5,000.00) per Affected Business Owner as identified by the Federal Employer Identification Number.
4. Affected Business Owners applying for lease reimbursement(s) must, in advance of receiving Program Grant funds: a) provide a copy of a written lease in effect for reimbursement month(s), b) submit proof of payment of the amount owed to the site's Landlord for each month for which the applicant is seeking reimbursement of lease payments in an amount equal to or greater than the grant amount approved for the Affected Business Owner by the Village; and c) verify the Affected Business Owner does not owe any outstanding debts or fines payable to the Village of the Peoria Heights, the State of Illinois, or any other local, state, or federal agency.
5. Affected Business Owners applying for mortgage reimbursement(s) must, in advance of receiving Program Grant funds: a) provide a copy of a written mortgage statement(s) from the financial institution which holds the site's mortgage lien from the reimbursement month(s), b) submit proof of payment of the amount owed to the mortgage lien holder for each month for which the applicant is seeking reimbursement of mortgage payments in an amount equal to or greater than the grant amount approved for the Affected Business Owner by the Village; and c) verify the Affected Business Owner does not owe any outstanding debts or fines payable to the Village of the Peoria Heights, the State of Illinois, or any other local, state, or federal agency.
6. Affected Business Owners applying for utility reimbursement(s) must, in advance of receiving Program Grant funds: a) provide a copy of a written utility billings from the reimbursement month(s), b) submit proof of payment of the amount owed to the utility company for each month for which the applicant is seeking reimbursement of utility payments in an amount equal to or greater than the grant amount approved for the Affected Business Owner by the Village; and c) verify the Affected Business Owner does not owe any outstanding debts or fines payable to the Village of the Peoria Heights, the State of Illinois, or any other local, state, or federal agency.
7. All Program Grants awarded through the Peoria Heights Commercial Expense Reimbursement Grant Program shall be paid to the Affected Business Owner for the specified site address by the Village of Peoria Heights within ten (10) business days following grant approval.
8. The Village's obligation hereunder to award Program Grant funds for eligible commercial expenses is a limited obligation to be paid solely based on awarded funding from the DCEO Economic Support Payments Grant Program and is subject to the availability of such funds.
9. All Affected Business Owners receiving Program Grant funds must be in compliance with all Village Municipal Codes, State laws, and State funding requirements.

10. The Village of Peoria Heights reserves the right to approve Program Grant funds only to those Affected Business Owners engaged in commercial activities found by the Village to be compliant with the requirements of this Program. The rights and obligations of the Affected Business Owner under this Program Application shall not be assignable.

Applicant Certification:

The undersigned, individually and on behalf of the business entity for which this application is submitted ("Applicant"), hereby acknowledges and accepts all of the terms and conditions provided for herein, and further certifies and warrants that to the best of his/her knowledge, the information contained in and attached to this Application is true, correct and complete and the business for which this application is submitted was open and operating as of March 1, 2020. Nothing contained in this Application shall be construed by the Village or the Affected Business Owner or any third person to create the relationship of a partnership, agency, or joint venture between the Village and the Applicant. The Village is authorized to make all the inquiries deemed necessary to verify the accuracy of the information contained herein. Additionally, Applicant agrees that in the event funds are provided pursuant to this Application, the Village or its agent shall be entitled to access and audit such records as may be necessary to prevent fraud in this process or ensure compliance with federal requirements. I certify that the funding will be used for business purposes only and not for household, personal, or consumer usage. I hereby certify that I have read the eligibility requirements, that the business identified below is eligible for the grant and that I will fully comply with all grant requirements as stated in the Local CURE Program (14 Ill. Adm. Code 700.10 through 700.110 and 20 ILCS 605/605-1045), the CARES Act (15 U.S.C. § 9001 *et seq.*) and the related guidance published by the U.S. Department of the Treasury. I understand that I may be asked to provide additional information in order to process this Application. I understand that eligibility does not guarantee aid, and that funding is limited. I understand that any willful misrepresentation on this statement could result in disqualification from program funding. I certify any funds requested/received will not be a duplication of benefits. I certify I have not received any public sources of funds to cover expenses for which I am requesting funds. The Applicant hereby acknowledges that, in executing this Application, the Applicant has had the opportunity to seek the advice of independent legal counsel and has read and understood all the terms and provisions of the Program. Subject to Village approval (*Appendix A*), this Program Application shall become a binding Agreement. The undersigned hereby warrants that he/she has full authority to execute this Application on behalf of the entity for which they are signing.

Applicant Signature: _____ Date: _____

Print Name: _____ Title: _____

Entity/Business Name: _____

Privacy Protection Assertion:

_____ Check here if you assert the following: "Pursuant to Section 7(g) of the Illinois Freedom of Information Act (5 ILCS 140/7(1)(g)). I hereby assert that the following information submitted with this application constitutes commercial or financial information that I am filing under a claim that this information is proprietary, privileged or confidential and that disclosure of such information would cause competitive hardship to my business." This assertion applies to:

Please note: Signatures, Federal Employer ID Numbers or Social Security Numbers, tax return information, direct deposit routing numbers, signed W-9s and copies of driver's licenses and IDs are not subject to Disclosure under the Illinois Freedom of Information Act.

APPENDIX A
Village of Peoria Heights
Commercial Expense Reimbursement Grant Program

(For Use by the Village of Peoria Heights, Illinois)

Business Name: _____

Business Site Address: _____

Business Mailing Address: _____

Contact info: _____

Date application received by the Village of Peoria Heights: ____ / ____ / 2020 by _____

Admin:

- Application certified: yes no
- State business license: yes no
- FEIN verified as valid: yes no
- Tax filings included: yes no
- Copy of lease: yes no
- Copy of mortgage: yes no
- Copy of utility bills: yes no

Finance:

- Tax filings paid: yes no
- Verified did not receive BIG funding: yes no
- Verified did not receive other funding: yes no
- Verified costs not reimbursed by Village: yes no
- Verified decrease of at least 25%: yes no
- Verified applicable bills: yes no
- Verified proof of payment of all requests: yes no
- Verified grant total: yes no

Request Verified as Eligible Commercial Expense: Yes No (reason: _____)

Recommended by Village Staff: Yes, date: ____ / ____ / 2020 No (reason: _____)

Grant approved by Village: Yes _____ No (reason: *see attached letter of denial*)

APPROVED: _____ Date ____ / ____ / 2020

Village Administrator, Village of Peoria Heights

ATTEST: _____ Date: ____ / ____ / 2020

Village Clerk, Village of Peoria Heights

GRANT AWARD AMOUNT: \$ _____

Village grant payment issued to applicant on ____ / ____ / 2020

Check No. _____