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City of Greenville, NC Small Business Relief Program Applicant Checklist

Business Name:	
Business Address:	
Owner Name:	
Applicant Phone:	
Applicant Email:	
Business is within Greenville city limits:	
Date Established:	

Eligibility

Items required	Status
<input type="checkbox"/> Proof of Business Bank Account (copy of cancelled check)	
<input type="checkbox"/> Verification that owner(s) is at least 18 years of age (copy of Driver's License)	
<input type="checkbox"/> Social Security Number for owner (if not included on tax returns)	
<input type="checkbox"/> Business Employer Identification Number	
<input type="checkbox"/> Proof of DUNS number	
<input type="checkbox"/> Completed and signed W9 form	
<input type="checkbox"/> Owner/Applicant is current with property taxes and fees or has payment plan in place	
<input type="checkbox"/> Verification that business has active liability insurance	
<input type="checkbox"/> Number of Employees and show full time and part time totals and if they are 1099s (independent contractors) or company paid employees	

Eligible Use of Funds

Verification that funds will be used for the following eligible uses:

Eligible Use	Amount Requested:
Rent or Mortgage for the business:	
Payroll	
Business Insurance	
Total Request:	

The (6) six months of expenses covered by this grant are: **December 1, 2020 through May 31, 2021.**

Please provide proof of payment in the form of paid receipts, canceled checks, expenses highlighted and annotated on bank statements.

Please use the enclosed **Excel Expenses Spreadsheet** to input your expenses and be sure to include the date paid, check number or ACH for method of payment and the amount paid.

For payroll expenses include the **monthly payroll (do not include independent contractors, they are not employees)** and provide a monthly payroll statement from your accounting software, Third Party Payroll Company or your accountant/bookkeeper

Please submit the completed Excel Expenses Spreadsheet in Excel format.

Applicant Capacity and Business Viability

Item	Status
<input type="checkbox"/> Two years of tax returns. If 2020 returns are not available, 2019 and 2018 returns and internally prepared financial statement for 2020.	
<input type="checkbox"/> Internally prepared financial statements for 2020 showing reduction in monthly revenue as a result of Covid-19.	
<input type="checkbox"/> Internally prepared financial statements for 2021 year to date (May 31, 2021)	
<input type="checkbox"/> Applicant has provided business financial projections by month for the next 4 months (November 2021 through February 2022) that includes Profit & Loss Statements and balance sheets. Please use the Excel Spreadsheets provided and return them in Excel format	

Covid-19 Funding Received

Submit a copy of the documentation of the funds received (letter from funding source, copy of check, etc.) from any COVID 19 relief programs (i.e. Paycheck Protection Program (PPP), Economic Injury Disaster Loan (EIDL), SBA Relief Program, CARES Act unemployment benefit).