



The Tuscola County EDC is working with eligible businesses in Tuscola County to apply for grants and loans under the Tuscola County Small Business Relief Program. This program is designed to assist businesses that have been negatively impacted by the COVID 19 virus and the recent Governor's Executive Orders.

The Tuscola EDC will award grants of between \$ 5,000 and \$ 10,000 in size under the Relief Grant Program. Businesses to receive the grants must have fewer than 50 employees. They must be located in a Downtown district or on a high impact corridor. The business must provide support to impacted employees. Applications under the grant program must be submitted by Sunday, March 29, at 11 59 pm to Steve Erickson at directorericson@tuscolaedc.org . The EDC may be reached by calling 989 673 2849 .

The Tuscola EDC will also assist with the Tuscola County Small Business Relief Loan Program. The loan program is for businesses with less than 100 employees. Loans are available in amounts between \$ 50,000 and \$ 200,000 in size at an interest rate of 0.25 %. The loan must be paid back within 120 months of the loan closing with interest-only payments allowed for 60 months. Loan applications must be submitted by Sunday, March 29, at 11 59 pm to Jim McLoskey at jmcloskey@tuscolaedc.org . The EDC may be reached by calling 989 673 2849 .

For those businesses that are not approved for a grant, the EDC will work with you to apply to the EDC Revolving Loan Fund program. This local program allows for loans of up to \$ 10,000 at an interest rate of 7 % to be paid back within six months.

More tax assistance information for small businesses is shown below.

Tax Assistance for Small Businesses The Michigan Treasury Department is providing small businesses that have experienced disrupted operations due to the COVID-19 additional time to make their sales, use and withholding tax monthly payment. Small businesses scheduled to make these payments on March 20 can postpone filing and payment requirements until April 20. Penalties and interest penalties will be waived for 30 days. [Learn more about penalties and interest online](#) or by calling the Treasury Business Tax Call Center at 517-636-6925.



Michigan Small Business Relief Program

Company Name:	
County:	Tuscola
Local Economic Development Organization	Tuscola County Economic Development Corporation

NOTE: If you meet the Program Eligibility AND one of the Business Qualifications sections, please complete the information on the Application tab. If you do not, please visit www.michigabusiness.org/covid19 or contact your Local Economic Development Organization for alternative resources.

Program Eligibility (must meet both of the following)	
Q1. Has the business experienced an income loss as a result of Executive Order 2020-20, or any subsequent Executive Order of similar intent ("EO")?	
Q2. Does the business have a need for working capital to support its payroll expenses, rent, mortgage payments, utility expenses, or other similar expenses that occur in its ordinary course of business?	
Funding Type Qualification, must complete one of the following Business Qualification sections:	
Business Qualification 1	Q3. Did the business have 50 employees or less as of March 16, 2020 AND is the business in an industry referenced by Executive Order 2020-20, or any subsequent Executive Order of similar intent. If yes, please provide industry type below:
	OR
	Q3. Did the business have 50 employees or less as of March 16, 2020 AND can the business demonstrate that it is otherwise affected by the COVID-19 outbreak: If yes, please describe the business and effect.
	AND meets one of the following:
	Q3a. Is the business located in a downtown district or high impact corridor. If yes, please explain:
	Q3b. Is the business providing support to impacted employees? If yes, please explain.
Q3c. Did the business have 50 employees or less as of March 16, 2020	
Q3d. Does the business provide goods or services directly to business types detailed in an EO and requires additional employees to support companies or employees impacted by an EO? If yes, please explain.	



Business Qualification 2	OR	
	Q4. Is the business in an industry referenced by Executive Order 2020-20, or any subsequent Executive Order of similar intent; or has otherwise been affected by the COVID-19 outbreak; or is a supplier of goods or services to one or more companies that have been impacted? If yes, please select business type.	
	Please describe how you meet this criteria:	
	AND meets both of the following:	
	Q4a. Did the business have 100 or less employees as of March 16, 2020?	
	Q4b. Is the business able to demonstrate it is unable to access credit through alternative sources?	

MICHIGAN SMALL BUSINESS RELIEF PROGRAM

Application for Financial Assistance

APPLICATION BACKGROUND			
Applicant Entity Legal Name (business entity including DBA if appropriate)		Amount of Funding Requested	
Address (Street/P.O. Box/City, State and Zip Code)		Applicant Entity Type	
Applicant Municipality (city, township, or village)		Applicant County	
Do you have multiple locations	If yes, include city/state of other location(s)		
Identify location(s) in need of support (City/State)	Do you operate under a franchise agreement?		
Applicant Industry	Type of Business (choose one)		
Describe the goods and/or services your business provides			
State Where Established	Year Established	How long has business been under current ownership	
Are you currently a client of the Small Business Development			
Do you rent or own the space your business operates from?			
	If rent, who is the building owner and how long is your lease for?		
	If own, do you own free and clear or do you have a mortgage or loan of any variety?		
	When is that mortgage or loan paid off (MM/YYYY)?		
Has the owner, or the Applicant, ever filed for bankruptcy with this business?			
	If yes, when (MM/YYYY)		
	Please Explain		
Have you applied for, or received, any other support through any other local, state and/or federal government, foundation, or any other business aid since the EO?			
If yes, please explain and provide status:			
Do you have any family, financial or close friend relationship to anyone related to EDO staff reviewing this			
If yes, please explain:			
How is your business currently operating?			
Please explain:			
EMPLOYMENT INFORMATION			
What is was your employment for the previous three years?	2017	2018	2019
Include all employees regardless of employment hours (Full/Part Time)			
How many employees did you have as of March 16, 2020 (Full or Part Time)			
How many employees do you have as of today's date?			
How many employees will be retained if your application is approved for funding?			
What changes have you made to your workforce?			
Please explain:			

FINANCIAL INFORMATION

What was your annual revenue for the previous three years? <i>Please attach a copy of your profit & loss statement for each year.</i>	2017	
	2018	
	2019	

Provide your estimated revenue loss since March 16, 2020.

Provide the estimated total capital investment made in business over last 3 years?

Provide your forecasted revenue loss for the next six months:

April	May	June	July	August	September

What are your immediate working capital needs (e.g. rent, mortgage, utilities, payroll, accounts payable, debt service, other):

Please Explain:

CERTIFICATION

I hereby certify that the information contained in this application and in the exhibits or attachments submitted are true and correct to the best knowledge of the Applicant and the undersigned.

Signature	Date

Typed Name	Title

APPLICANT CONTACT

Name & Title	Address	Telephone	Email

OWNER(S) CONTACT INFORMATION - attach additional pages as necessary

Name & Title	Address	Telephone	Email