



**Town of Middleborough**  
**CDBG-CV Microenterprise Grant Assistance Program**  
**For Businesses Impacted by COVID-19**

Town of Middleborough is providing working capital grants to qualifying, for-profit microenterprises (5 or fewer employees, one or more being the owner) located in the Town of Middleborough, whose revenues have been negatively impacted by the pandemic. The assistance is in the form of a grant to pay for eligible business expenses that have not be paid or reimbursed through other special recovery assistance. The program budget is \$90,000 and grant awards will be between \$3,000 and \$8,000. Complete applications with supporting documentation will be considered for award on first come, first served basis until all grant funds are expended.

**INSTRUCTIONS**

**A. Who can apply**

- 1) For-profit businesses (Sole proprietorship, partnership, corporation, LLC) located in Middleborough that have 5 or fewer employees at the time of application, one or more of whom is the owner. Some business types are not eligible for these funds: Adult entertainment, cannabis, social clubs, fire arms businesses, real-estate and rental sales business, businesses owned by persons under 18, businesses that are chains, lobbyists. Any applicants with businesses who are also considered employees of the Town of Middleborough are responsible for contacting the Mass State Ethics Committee at (617) 371-9500 for COI guidance.
- 2) The business must serve multiple clients or customers.
- 3) Businesses must have been in operation before **10/1/2019\*** and have not permanently closed, gone out of business, nor filed for bankruptcy.
- 4) The Owner of the micro-enterprise must have a household taxable adjusted income that falls at or below 80% of MFI for their family size as adjusted after eligible business deductions. (1040 Schedule C) **Owner household incomes** will be established by submitting income documentation, such as 1040 filings or other financial documents, and a signed income certification statement on household income. **(See Attached)**
- 5) Businesses must be in good standing with all federal, state and local taxes, have active/valid state and municipal licenses, certifications and registrations, and are not a party to litigation involving the state or Town of Middleborough.

**B. What can funds be used for**

- 1) Grant funds can be used to pay for documented losses due to the pandemic up to the amount of the losses. Payments will be made for:
  - (a) Specific general business costs and operations, e.g., rent, utilities, payroll, inventory, supplies, raw materials, etc.
  - (b) Costs associated with compliance with COVID-19 guidelines, e.g. materials and minor equipment to convert business activities, needed safety materials, fixtures and supplies

\* New business operation date.

(such as PPE), etc. or to assist in the manufacture of materials and supplies to ensure a safe business environment.

- (c) Payments for technical assistance or professional advice or business services that will assist the business's recovery from COVID-19 losses, comply with or adapt to business changes resulting from COVID-19. (A corresponding loss under technical assistance is not required for this category).

### C. How to demonstrate business losses tied to the pandemic

- 1) A business must demonstrate that it has been adversely affected by COVID-19 and can document loss of income or revenues equal to or exceeding the amount of the request. **The applicant will submit** a written statement describing how it has been adversely affected by the pandemic and how assistance will prepare/prevent/respond to COVID-19.
- 2) Funds will be clearly applied to eligible uses. Assistance may directly or indirectly address the described COVID-19 losses and must be consistent with described business operations. **Supporting documentation of normal business operation expenses** include source/uses of funds, or cost estimate, or invoices that can be compared with known business operations. **Submitted documentation showing losses** can include personal or business tax returns, business financial statement, sales year/year, quarter/quarter comparisons, etc. Funds to be applied for costs incurred after March, 10, 2020.
- 3) Payments for sustaining business operations (e.g. rent, payroll, accounts payable) must be supported by business financial statements (e.g.: cash flow statements, or other comparative documentation) to illustrate the impact of COVID-19 losses.

### D. Other Assistance received?

**Businesses will sign and submit** with the application the attached Certification stating that there is no Duplication of Benefits: No other funding or other recovery monies were available to pay for requested expenses. Any duplication of benefits will require repayment of grant funds.

### E. Completing the application

Businesses can print out the on-line application and fill it out. The application is also available at the OECD office in the Town Hall Annex, 3<sup>rd</sup> floor. Completed applications and the supporting documentation can be returned in the following ways:

- Scan and email the completed application and supporting documents to [OECDWeb@middleborough.com](mailto:OECDWeb@middleborough.com);
- Mail or hand-deliver to:

Office of Economic and Community Development  
Town of Middleborough  
20 Centre Street, 3<sup>rd</sup> Floor,  
Middleborough, MA 02346

Please send any questions you may have about completing the application by email to [jakerstrom@middleborough.com](mailto:jakerstrom@middleborough.com) or call 508-946-2402.

\* New business operation date.

## **F. What is a DUNS number?**

If awarded a grant, the business must have or obtain a DUNS number from DUN & Bradstreet in order to utilize federal funds. A **DUNS number** is a unique nine-character number used to identify your organization. The federal government uses the DUNS number to track how federal money is allocated.

How to register for a DUNS number:

If your organization does not yet have a DUNS number, or no one knows it, visit <https://www.dnb.com/duns-number.html> or call 1-866-990-5845 to register or search for a DUNS number.

Registering for a DUNS number is free of charge.

You will need all of the information listed below to obtain a DUNS number:

- Name of organization
- Organization address
- Name of the chief executive officer (CEO) or organization owner
- Legal structure of the organization (e.g., corporation, partnership, proprietorship)
- Year the organization started
- Primary type of business
- Total number of employees (full and part-time)

## **G. Next Steps**

Grant applications will be reviewed for eligibility and completeness. Any missing information or other clarifications will be requested from the business, but to avoid delays in processing your application, please provide all requested information with your submittal. You can contact the department with any further questions via email at [OECDWeb@middleborough.com](mailto:OECDWeb@middleborough.com) or call 508-946-2402.

## **H. Awards**

Awarded businesses will acquire a DUNS number and execute a Program Assistance Agreement with the Town of Middleborough which will outline the terms and uses for the funding, reporting and any additional specifications or requirements.

\* New business operation date.

## **Duplication of Benefits Certification for CDBG-CV funds**

A duplication of benefits occurs when a person, household, business, government, or other entity receives financial assistance from multiple sources for the same purpose, and the total assistance received for that purpose is more than the total need for assistance. Duplication of benefits occurs when Federal financial assistance is provided to a person or entity through a program to address losses and the person or entity has received (or would receive, by acting reasonably to obtain available assistance) financial assistance for the same costs from any other source (including insurance), and the total amount received exceeds the total need for those costs.

The CARES Act requires HUD to ensure that there are adequate procedures in place to prevent any duplication of benefits as required by section 312 of the Stafford Act, as amended by section 1210 of the Disaster Recovery Reform Act of 2018 (division D of Public Law 115-254; 42 U.S.C. 5121 et seq.) and all applicable Federal Register notices, including FR-6218-N-01.

HUD requires each grantee to have procedures in place to prevent the duplication of benefits when it provides financial assistance with CDBG-CV funds. Grant funds may not be used to pay for a cost if another source of financial assistance is available to pay for the same cost.

**This certification must be completed by any subrecipient, individual or family, business, direct beneficiary, or other entity that receives assistance and serves to document compliance with the CARES Act requirement to ensure that there are adequate procedures in place to prevent any duplication of benefits as required by section 312 of the Stafford Act, as amended by section 1210 of the Disaster Recovery Reform Act of 2018 (division D of Public Law 115-254; 42 U.S.C. 5121 et seq.) and all applicable Federal Register notices, including FR-6218-N-01.**

I, \_\_\_\_\_ Hereby certify that:

(Name/title of business owner(s),

A. The Community Development Block Grant-CV Funds, awarded to the Town of Middleborough through the Coronavirus Aid, Relief and Economic Security Act (CARES Act) does not duplicate/replace any other funds, and/or any funds from the following sources:

1. The Paycheck Protection Program
2. Unemployment compensation benefits
3. Insurance claims/proceeds
4. Federal Emergency Management Agency (FEMA) funds
5. Small Business Administration funds
6. Other Federal, State or local funding
7. Other nonprofit, private sector, or charitable funding.

B. Further, this executed certification serves to acknowledge that any individual or family, business, direct beneficiary, or other entity understands and agrees that the CDBG-CV funds must be repaid if it is determined that such assistance is determined to be duplicative.

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Signature of Business owner(s), and date

\* New business operation date.



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The Federal CDBG program was designed to primarily benefit low and moderate income persons. This Microenterprise grant program will assist those Middleborough households that meet those income restrictions.

If you reside outside of Middleborough but own a business physically located in Middleborough, please notify the Office of Economic and Community Development and you will be sent the income limits for your community.

Please review the Middleborough income limits below. If your annual adjusted household income falls at or below the annual limits for assistance for your household size, please indicate your household income range below and sign the certification.

You must include supporting documentation on household income with your application. Examples of documentation can include one of the methods below:

- 2019 or 2020 tax returns
- 6-8 consecutive paystubs from household income earners
- personal financial statements
- retirement account statements
- other

| FY 2020 Income Limit Category | Middleborough Maximum Annual Income allowed per Household size for Microenterprise Grant Assistance |           |           |           |           |           |           |            |
|-------------------------------|---|-----------|-----------|-----------|-----------|-----------|-----------|------------|
|                               | 1   | 2         | 3         | 4         | 5         | 6         | 7         | 8          |
| (80% MFI) Income Limit        | \$ 53,350   | \$ 60,950 | \$ 68,550 | \$ 76,150 | \$ 82,250 | \$ 88,350 | \$ 94,450 | \$ 100,550 |

| *Indicate Your Annual Household Income √                              |                   |                   |                   |                   |                   |  |
|---|-------------------|-------------------|-------------------|-------------------|-------------------|--|
| 1 PERSON<br>HH \$   | 2 PERSON<br>HH \$ | 3 PERSON<br>HH \$ | 4 PERSON<br>HH \$ | 5 PERSON<br>HH \$ | 6 PERSON<br>HH \$ |  |
| \$ 0-20,000   | \$0-22,850        | \$0-25,700        | \$0-28,550        | \$0-30,850        | \$0-33,150        |  |
| 20,001-33,350   | 22,851-38,100     | 25,701-42,850     | 28,551-47,600     | 30,851-51,450     | 33,151-55,250     |  |
| 33,351-53,350   | 38,101-60,950     | 42,851-68,550     | 47,601-76,150     | 51,451-82,250     | 55,251-88,350     |  |
| 53,351 and up   | 60,951 and up     | 68,551 and up     | 76,151 and up     | 82,251 and up     | 88,351 and up     |  |
| *includes income of all household members over 18 except F/T students |                   |                   |                   |                   |                   |  |

Each business owner is also required to complete both the “Ethnicity” and the “Race” selections for federal reporting requirements:

**ETHNICITY** (please select one):

\_\_\_\_\_ Hispanic or Latino \_\_\_\_\_ Not Hispanic or Latino

\* New business operation date.

**RACE** (please select one):

- American Indian or Alaska Native;
- Black or African American;
- American Indian/Alaska Native & Black/African American
- Black/African American & White
- American Indian/Alaska Native & White
- Native Hawaiian or Other Pacific Islander
- Asian
- White
- Asian/White
- Other Multi-Racial (not listed above)

4. MISCELLANEOUS:

Female Head of Household     62 years of age or over     Person with disability

I certify, under the penalties of law, this income information is correct and I understand that the information I have provided on my household income is subject to verification by authorized representatives of the Town of Middleborough and the U.S. Department of Housing and Urban Development.

*Signature:* \_\_\_\_\_ *Date:* \_\_\_\_\_



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This information provided will remain confidential and will be used only to meet the record keeping requirements of US HUD and the Mass Department of Housing and Community Development, which is providing the CDBG-CV funds to assist businesses.

Please answer the questions as completely as possible and include copies of the requested documentation. If you need additional space for your responses or statements, you can add additional pages.

**1. Describe the Business:**

|  |  |
|--|--|
| <b>Business Name:</b>  |  |
| Street Address:  |  |
| Mailing Address:   |  |
| Work Phone Number:   |  |
| Email Address:   |  |
| Composition of Business: (Sole Proprietorship, Partnership, Limited Partnership, Corporation, LLC, etc.) |  |
| Business DUNS Number:  |  |
| Business Employer ID:  |  |
| <b>Business Owner Name:</b>  |  |
| Mailing Address:   |  |
| Work Phone Number:   |  |
| Cell Phone Number:   |  |
| Email Address:   |  |

\* New business operation date.

|   |    |
|---|----|
| Type of Business:                                       |    |
| Services provided:                                      |    |
| Number of Employees:<br>(including Owner(s))            |    |
| <b>Grant Funding request:</b>                           | \$ |
| <b>Proposed Use of Funds:</b><br><b>(Be specific) :</b> |    |
|   |    |

Is the business a Woman or Minority-Owned Enterprise? Yes  No

Is the business in good standing with the Commonwealth of Massachusetts? Yes  No

Is the business in good standing with the Town of Middleborough? Yes  No

I, \_\_\_\_\_ declare that neither myself nor the business represented in this application are party to litigation involving the State of Massachusetts nor the Town of Middleborough.

By signing this application I affirm that the information submitted to the Town of Middleborough regarding the business is complete and factual to the best of my knowledge:

Business Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Business Owner Name: \_\_\_\_\_

\* New business operation date.



## APPLICATION CHECKLIST

Did you...

Fully complete and sign the application; and

Include the following documentation:

- Your statement of COVID-19 adverse impact and how assistance will address it;
- Include records documenting loss of revenue or loss of income equal or greater to your request;
- Include your household income documentation;
- Include supporting documentation for stated expenses or ongoing operating costs; and

Sign and include all additional certifications