

**CITY OF ONEONTA 2020
MICROENTERPRISE ASSISTANCE PROGRAM**

PROGRAM PACKAGE

**GUIDELINES
APPLICATION**

**Funding is conditional upon continued availability of New
York State funds.**

City of Oneonta Representatives:
Gary Herzig – Mayor
Judy Pangman – Community Development Director

Funded By: NYS Office of Community Renewal

**CITY OF ONEONTA
FINAL MICROENTERPRISE PROGRAM GUIDELINES - 2020**

Funded by: The New York State Office of Community Renewal under the
Community Development Block Grant Program

MICROENTERPRISE DEFINITION:

A microenterprise is a business that employs or will employ five or fewer persons, including the business owner or owners. To be eligible for assistance, an existing microenterprise or newly formed microenterprise must meet a low-to-moderate income test; that is the business owner(s) must be low-to-moderate in income (based on family size and gross, annual income) or a majority of the jobs to be created must be low-to-moderate income jobs and/or available to low-to-moderate income persons. Low-to-moderate income limits are provided in Attachment 1. The determination of whether a job meets the low-to-moderate income test is discussed in Attachment 2.

PROGRAM PURPOSE:

The purpose of the Microenterprise Program is to provide financial assistance to entrepreneurs, start-up businesses, and existing microenterprises that will increase economic opportunity and/or create jobs for persons who are low-to-moderate in income. The Program is especially interested in assisting entrepreneurs who are, or businesses that are owned by low-to-moderate income persons.

LOCATION OF PROGRAM:

To be eligible for assistance the microenterprise must be located in the City of Oneonta, and the business location must be zoned appropriately for the proposed business use.

ELIGIBILITY:

1. At the time of application an existing business must have no more than five (5) employees, including the owner(s). The project must meet a low-to-moderate income test; that is, either the owner(s) must be low-to-moderate in income based on family size and gross, annual income; or the project must result in the creation of jobs, the majority of which meet the low-to-moderate income test. This determination will be made by the City with information provided by the applicant (See the Application, Section VII for submission requirements for documenting a low-to-moderate income owner).

2. Jobs that require 37.5 to 40 hours a week are considered full-time jobs. If a business has part-time employees, the number of full-time equivalent jobs (FTEs) will be calculated by dividing the total hours worked per week by all part-time employees by 40. If the number of part-time hours varies week to week, the weekly average of part-time hours over the most recent three months will be used to calculate FTE jobs.
3. The business owner(s)' and the business's City payments, including but not limited to taxes and water and sewer charges, must be current.
4. All businesses, new and existing, must have a current business plan. Existing businesses will be required to provide a current business plan. Assistance in creating a business plan may be provided.

ELIGIBLE USES OF FUNDS:

1. **High Priority:** Funds can be used to purchase capital equipment and fixtures including but not limited to manufacturing, processing, or display equipment; computer hardware; office furniture, display fixtures, or other equipment/fixtures that directly support the business activities of the applicant. All equipment and fixtures acquired with City funds shall be stored and used at the business's primary City location and will be secured by the City via a UCC filing.
2. **Low Priority:** Funds can be used for working capital purposes. The specific use(s) of working capital must be detailed in the microenterprise application for assistance and in any commitment or agreements/documents provided by the City. In general, working capital will only be considered for new businesses or expansion of an existing business's services, capabilities, or employment. The City reserves the right to file a UCC lien on the business.
3. **Low Priority:** Funds can be used for the purchase of inventory. The general type and amount of inventory must be detailed in the microenterprise application for assistance and in any commitment or agreements/documents provided by the City. The City reserves the right to file a UCC lien on the business.
4. **Low-Moderate Priority:** Software that is specifically related to the business activity of the applicant may be purchased under the Microenterprise Program. If the software is being purchased for general business use it will be considered low priority, businesses utilizing software to directly increase sales and/or improve customer satisfaction will be considered moderate priority. The City reserves the right to file a UCC lien on the business.
5. **Low-Moderate Priority:** Other uses, not specifically noted above and deemed appropriate by the City, will be considered. Points will be awarded depending upon relevance of items to the business.

INELIGIBLE USES OF FUNDS:

1. The refinancing of existing debt and payment of interest as a result of interim financing is ineligible under the Microenterprise Program.
2. Any activity(ies) that will result in the loss of a job or jobs or the reduction of hours for any existing employee is ineligible under the Microenterprise Program.
3. Motor vehicles cannot be purchased or leased under the Microenterprise Program.
4. Construction, renovations and building repairs.
5. Any illegal activities; activities that are inconsistent with, or will detract from the character of the City; activities that are reasonably objectionable to the City or do not comply with local zoning regulations or other municipal plans are ineligible for funding under the Microenterprise Program.

FINANCIAL ASSISTANCE:

1. The total amount of assistance available per project is \$5,000 to \$35,000. The amount to be provided per project will be determined by the City's Grant Review Committee based on a review of the application and supporting documentation. The determination of the Review Committee is final.
2. All assistance is in the form of a grant, which is subject to recapture if the business closes or relocates outside the City within five (5) years of the date of the grant agreement. The amount of funds recaptured is determined by the terms of the grant agreement and is generally based on the amount of time the business operated in the City and the amount of funds provided.
3. A minimum of 10% of the total project cost must be provided as owner's equity. Equity must be in the form of cash, not loan funds.
4. If the total project cost exceeds the maximum amount of assistance provided by the City, the owner is responsible for providing the balance. The balance of the project cost and the source of funds must be documented prior to City review and approval and can be in the form of owner's cash or a loan.

TRAINING:

Training is a required part of the Microenterprise Program. The NYS Office of Community Renewal (OCR) requires a participating business owner to complete a Business Ownership or Entrepreneurial training course that is NYS OCR approved. The business training must be completed prior to incurring project costs and requesting

CDBG grant funds. The applicant must provide proof of successful completion of such training. The City will provide information on acceptable training programs.

DISBURSEMENT OF FUNDS (reimbursement process):

This is a reimbursement program. Documentation of purchases, i.e. PAID receipts or comparable, must be provided before the request for the reimbursement funds is submitted. The request for funds is submitted to the State no more than two times for each business awarded grant funds. In no case will assistance be paid in advance of purchases. The accepted documentation of payment is generally a PAID invoice and copy of both sides of the check. For cash payments, the invoice should be clearly marked, PAID CASH. The equity contribution must be documented prior to complete disbursement of all microenterprise funds. Disbursement procedures are subject to change.

OTHER TERMS AND CONDITIONS:

- 1) The microenterprise owner agrees to repay any grant funds in full or in part if the business ceases operation or moves outside the City prior to the end of the 5 -year regulatory period.
- 2) A Grant Agreement between the City and the microenterprise owner(s) will be executed prior to the disbursement of any funds. This Agreement will detail the terms and conditions of the funding.
- 3) All low-to-moderate income jobs to be created through this Program will be verified pursuant to a process established by OCR. The process requires the scheduled completion and submission of certain forms and reports to which the microenterprise must agree. The employment monitoring will continue until the jobs obligation is met.
- 4) The microenterprise is required to comply with all local, State, and national laws, regulations, or requirements that would normally and routinely apply to such businesses, and as may be required of recipients of State and/or federal funding.
- 5) All of the above Terms and Conditions will be included in a Grant Agreement, which the business owner will execute with the City.

Attachments:

1. Income limits for Otsego County as determined by the US Department of Housing and Urban Development
2. Determining “low-to-moderate income” jobs
3. Project Scoring and Funding Priorities
4. Obtaining a DUNs number for your business
5. Application

**ATTACHMENT #1
 LOW-TO-MODERATE INCOME LIMITS FOR OTSEGO COUNTY
 MARCH 2020 THROUGH MARCH 2021
 AND FAMILY INCOME FORM**

FAMILY SIZE	MAXIMUM INCOME LIMIT
1	\$38,150
2	\$43,600
3	\$49,050
4	\$54,500
5	\$58,900
6	\$63,250
7	\$67,600
8	\$71,950

*The Applicant/Business Owner or the employees will be considered low-to-moderate (LMI) in income if the family’s **gross annual** income does not exceed the maximum income noted for that family size. For example, if a family has two adults and three children (total five persons) the income opposite the number “5”, which is \$58,900, is the maximum income that family can earn on an annual basis and be considered LMI eligible. If the family’s gross annual income is less than \$58,900 they are considered a “low-to-moderate” income family. If the family’s gross annual income is greater than \$58,900, they do not meet the low-to-moderate income test. Family is defined as those persons in household that are related by marriage, birth or adoption.

ATTACHMENT #2
DETERMINING LOW-TO-MODERATE INCOME JOBS

To be eligible for funding under the City's Microenterprise Program, the project must meet the low-to-moderate income benefit test in one of two ways; either (1) the business owner(s) must be low-to-moderate in income, or (2) the jobs to be created must be filled by or available to low-to-moderate income persons. If the business owner is low-to-moderate in income, this section can be ignored.

If a business owner is not low-to-moderate in income, their project must result in the creation of jobs, 51% of which are considered low-to-moderate income jobs. In addition, the business owner must provide first consideration for the jobs to be created to those persons who are low-to-moderate in income. Jobs may be claimed to be available to low-to-moderate income persons when both the following conditions are met:

- 1) The jobs do not require special skills that can only be acquired with substantial (i.e. one year or more) training or work experience, and/or education beyond high school is not a prerequisite to fill such jobs, unless the business agrees to hire and train unqualified persons; **and**
- 2) Actions are taken by the business owner to insure that low-to-moderate income persons receive "first consideration" for filling such jobs.

Principles involved in providing "first consideration" are as follows:

- 1) The business owner must use a hiring process that under normal circumstances would result in at least 51% of those interviewed meeting the low-to-moderate income status test;
- 2) The business owner must consider a sufficient number of low-to-moderate income job applicants to give reasonable opportunity to fill the position with a low-to-moderate income person;
- 3) The business owner must give consideration to the distance from the residence of a low-to-moderate income job applicant and the availability of transportation to the job site in order for the job applicant to be considered a serious applicant for the job.

The City is required to monitor job creation activities to determine if the jobs to be created are filled by persons low-to-moderate in income, or meet the first consideration test. To meet this obligation, the City is required and, therefore, the business owner agrees to follow a plan approved by the NYS OCR. Information on and the forms for completion included in the plan will be provided at a later date.

**ATTACHMENT #3
SCORING AND PRIORITIES**

The City will prioritize Microenterprise projects that assist businesses that are located or will be locating in the Downtown Revitalization District (see map that follows).

Depending on the level of Program demand, projects will be ranked and funded according to the following scoring system;

Measure		Point(s) Award
1	The creation of jobs measured in full-time equivalents (FTE)	1 pt for each FTE job
2	The Microenterprise owner is low-to-moderate in income	3 pts
3	The microenterprise is a State-certified Minority or Women owned Business Enterprise (MWBE)	2 pts
4	Veteran Owned Business	2 pts
5	Overall feasibility of the business*	0 – 5

*Overall feasibility of the business: the City’s MAP Review Committee will review all projects to determine the financial feasibility of a project and what, if any, other feasibility issues exist. New businesses (6 months old or less at time of application) may be awarded points in this category. This will be a comparative measure of all projects in the eligibility pool with the greatest number of points being awarded to the project with the greatest feasibility (or least number of feasibility issues). The long-term feasibility of the microenterprise will be assessed under this scoring criteria. Point award will range from 0 to 10+ points.

ATTACHMENT #4
OBTAINING A DUNS NUMBER FOR YOUR BUSINESS

The Microenterprise funds for which you are applying were awarded to the City from the New York State Office For Community Renewal (OCR) as part of the federal Community Development Block Grant Program (CDBG). In keeping with federal regulations, the OCR requires that recipients of CDBG funds secure a DUNS number. If awarded funding, we cannot disburse any funds until you obtain a DUNS number. If you are an existing business and already have a DUNS number at your current location, you do not need to obtain another one.

DUNS stands for Data Universal Numbering System. A DUNS is a unique nine-digit identification number provided by Dun and Bradstreet (D&B). All Microenterprise Program participants **must** have a DUNS number. This requirement is part of the Patriot Act and the federal government's determination that there is a need for improved statistical reporting for businesses that receive federal funds, such as the Microenterprise funds. There is no cost to obtain a DUNS number and it can be obtained at the website address listed below or by phone.

DUNS numbers are site-specific. Therefore, if your business has more than one location, you may have more than one DUNS number. If you are not sure if you have a DUNS number or if you have misplaced the number you can search the website. If it is determined that you do not have a DUNS number, you will be requested to enter certain information about your business and will be assigned a number, free of charge. Enter this number on the application (Attachment 5) in the area requested and keep it in a safe place for future reference.

You can request a DUNS number online at the following web address: <http://fedgov.dnb.com/webform/displayHomePage.do> (when you get to the home page, click on "Begin the D-U-N-S Search/Request Process" option located on the left hand side of the home page) **OR** <http://www.dnb.com> (click on D&B D-U-N-S Number in the upper right hand corner to begin) **OR** by phone at 1-866-705-5711.

**CITY OF ONEONTA
PROJECT APPLICATION**

PLEASE SUBMIT THIS APPLICATION TO:

Mail to:
JUDY PANGMAN
DIRECTOR OF COMMUNITY DEVELOPMENT
CITY OF ONEONTA
258 MAIN STREET
ONEONTA NY 13820

Or email to:
jpangman@oneonta.ny.us

**Applications must be received by 4:00 pm on
WEDNESDAY, NOVEMBER 25, 2020**

**Funding is conditional upon continued availability of New
York State funds.**

Business Training:

IF AWARDED A GRANT, THE GRANTEE MUST COMPLETE AN ENTREPRENEURIAL TRAINING CLASS PRIOR TO INCURRING PROJECT COSTS AND REQUESTING CDBG GRANT FUNDS.

The local Small Business Development Center (SBDC) offers an online entrepreneurial training course called EntreSkills. It is FREE to all SBDC clients. Applicants need to register as a client with SBDC first. Applicants will go through the chapters within the online course, complete the worksheets in each chapter, and then be certified by SBDC for the training required for the Microenterprise grant. It is self-paced so applicants can work on it when they have time. The completion certificate should be included in the grant application.

The applicant should use the following link to register as a new client and add in the comment section that the applicant is working with Michelle Catan so she can be assigned as the advisor.

<http://www.nyssbdc.org/selector/ReqForCons/formo.aspx>

**PLEASE COMPLETE THE FOLLOWING APPLICATION AND
SUBMIT WITH REQUIRED INFORMATION**

**CITY OF ONEONTA
MICROENTERPRISE PROGRAM**

PROJECT APPLICATION

I. GENERAL INFORMATION

(TO BE COMPLETED BY ALL APPLICANTS – CORPORATION AND PARTNERSHIPS SHALL ATTACH A SEPARATE SHEET WITH THE FOLLOWING INFORMATION PROVIDED FOR ALL CORPORATE OFFICERS AND PARTNERS; SPECIFY POSITION IN CORPORATION)

Applicant Name: _____

Mailing Address: _____

Business Name: _____

Business Owner(s) _____

and Social Security #: _____

Property Address: _____

Business Phone #: _____ Cell Phone #: _____

DUNS # (See Attachment #4): _____

E-Mail Address: _____

Applicant/Business is:

- State Certified Minority or Women-Owned Business Enterprise
- Veteran Owned
- New (Created within 6 months of submittal of this application)

**II. LOW-TO-MODERATE INCOME QUALIFYING CRITERIA:
CHECK ONE**

- Applicant/Business Owner is low-to-moderate in income (proceed to Part IV)
- Project will result in creation of new low-to-moderate income jobs; specify number of new FTE jobs _____; complete appropriate chart below

III. JOBS INFORMATION: EXISTING/NEW

EXISTING BUSINESS: Check here if project involves an existing business and list all jobs currently at the business. Indicate the number of full-time jobs by position below (full-time jobs are 37.5 hours or more); indicate the number of part-time jobs by position below and the number of hours worked for each part-time position entered; City will determine the total number of full-time equivalents, which must be five or less to qualify for Microenterprise assistance:

Summary of Existing Jobs:

Position	# Full-time jobs	# Part-time jobs	Total part-time hours worked	Wages
For office use only Total FTEs				

Date Business was established: _____

NEW BUSINESS/NEW JOBS: Check here if project involves the creation of a new business OR if an existing business is going to create new jobs. Indicate the number of full-time jobs to be created by position below (full-time jobs are 37.5 hours or more); Indicate the number of part-time jobs to be created by position below and the number of hours to be worked for each part-time job to be created:

Summary of New Jobs to-be-created:

Position	# Full-time jobs	# Part-time jobs	Total part-time hours worked	Wages
For office use only Total FTEs				

VII. SUBMISSION REQUIREMENTS CHECKLIST

A. FOR THOSE QUALIFYING AS A LOW-TO-MODERATE INCOME OWNER:

The following information is required for **only** those Applicants/Business Owners that qualify for Microenterprise funds as a member of a low-to-moderate income family. Family in this context is defined as all persons that reside in the same household that are related by birth, marriage or adoption. Please check items included with application submission.

- Completed and signed family income verification form (following Part VIII);
- Complete NYS and federal income tax returns for the past three years;
- Documentation of wages for all employed family members of Applicant's family (including Applicant if paid as an employee of the business);
- Copies of birth certificates or adoption documentation for all family members of Applicant's family;
- Copies of personal bank statements (both checking and savings) for the last two months.

B. THE FOLLOWING INFORMATION IS REQUIRED FROM ALL APPLICANTS: (Please check items included with application submission)

- 1. Documentation of source of owner's 10% equity in project;
- 2. Documentation of source of all others funds required to complete the project if total project exceeds \$35,000 maximum;
- 3. Cash flow projections (Income and expenses) for one year; should be provided on a monthly basis;
- 4. Vendor and/or contractor quotes for all components of the project;
- 5. Proof of site control for project (i.e. deed, long-term lease, executed purchase option, etc.);

- 6. For projects that involve job creation, provide title and number of each position to be created; timetable for hiring, salaries or wages for each position; description of each position; and number of hours for each position;
- 7. List of all properties owned by the Applicant/Business in City of Oneonta;
- 8. For existing businesses: copy of last two quarters NYS-45 (Quarterly Combined Withholding, Wage Reporting, And Unemployment Return) or NYS- 45-ATT (Quarterly Combined Withholding, Wage Reporting, and Unemployment Insurance Return – Attachment); these forms are needed to document that you are qualified as a microenterprise (5 or fewer employees including the owner(s));
- 9. Resume(s) of Applicant/Business Owner/partners/corporate officers; resumes should include (at a minimum) education and employment histories;
- 10. Current financial statements of applicant business (within last two months), to include: balance sheet and income statements;
- 11. Complete copies of the last three income tax statements filed (NYS and federal). Both personal and business tax statements are required. Partnerships also shall provide personal income tax statements for all partners, and corporations shall provide personal income tax statements from all corporate officers;
- 12. List of credit references to include banks and suppliers. The applicant should note that credit references will be verified. Also, a full credit report will be requested.

VIII. CERTIFICATION/CREDIT AUTHORIZATION/SIGNATURE

By signing below, I certify that all information, which has been or will be furnished in support of this application, is given for the purpose of obtaining funds under the City of Oneonta’s Microenterprise Assistance Program. I further certify that all information submitted has been examined and approved by me and is true, correct, and complete. I understand that this information will be used to asses my proposed project and that additional information may be needed in order to rate and rank my project in accordance with funding criteria. I agree to abide by all requirements to be set forth in connection with said Program. In addition, I understand that falsification of any item contained herein or fraudulent misrepresentation of my business could result in criminal and/or civil penalties applicable to local, state, and federal laws. Lastly, I agree that verification of any information contained herein, or to be provided in support of this funding request, may be obtained, and a formal credit check may be undertaken by any source deemed appropriate by the City.

SIGNATURE: _____ DATE: _____

SIGNATURE: _____ DATE: _____

Return to City of Oneonta, 258 Main Street, Oneonta, NY 13820. Questions? Contact Judy Pangman, Community Development Director – jpangman@oneonta.ny.us (607) 432-0114

CITY OF ONEONTA
FAMILY INCOME VERIFICATION FORM
Effective April 2020

The following information is required from the New York State Office of Community Renewal that either provided the funds for the job you are applying for or the assistance for your business. Information will be used to determine applicability of the person status as a member of a low-to-moderate income family and for statistical purposes only. All information is required to be kept confidential by the State.

Name: _____ Soc. Security # _____

Address: _____

- Check all that apply to your household: Female Headed Household
 Elderly person(s)
 Disabled person(s)

INSTRUCTIONS: (1) Determine your family size by counting yourself and each family member who *currently* resides with you in the same housing unit. A family member is a person who is related to you by birth, marriage, or adoption only. (2) Circle the appropriate family size below. (3) Total the income from all sources received during the last calendar year (January through December) by yourself and each member of your family who *currently* resides with you. Income includes wages, salaries, tips, business income, interest, dividends, the taxable portion of pensions and annuities, IRA distributions, rents, royalties, partnership income, unemployment compensation, and social security; less alimony paid and un-reimbursed employee business expenses calculated consistent with IRS Form 2106. (4) On the same line for the number of family members you circled, place a check next to the income range that represents your family's total gross income for the year. **EXAMPLE:** You are a family of four people and the total income of the four family members is \$27,000 per year. You will circle the number "4" in the far left-hand column and across from the number 4, you will place a check next to the income range "\$25,100– 32,150" since \$27,000 falls within that range.

Family

Size (circle)

My Family Income is (check one)

1	___ < \$14,350	___ \$14,351–23,850	___ \$23,851–38,150	___ > \$38,150
2	___ < \$17,240	___ \$17,241–27,250	___ \$27,251–43,600	___ > \$43,600
3	___ < \$21,720	___ \$21,721–30,650	___ \$30,651–49,050	___ > \$49,050
4	___ < \$26,200	___ \$26,201–34,050	___ \$34,051–54,500	___ > \$54,500
5	___ < \$30,680	___ \$30,681–36,800	___ \$36,801–58,900	___ > \$58,900
6	___ < \$35,160	___ \$35,161–39,500	___ \$39,501–63,250	___ > \$63,250
7	___ < \$39,640	___ \$39,641–42,250	___ \$42,251–67,600	___ > \$67,600
8	___ < \$44,120	___ \$44,121–44,950	___ \$44,951–71,950	___ > \$71,950

9 or more - # _____ Actual income = \$ _____

Are you currently unemployed (circle answer)? YES NO

Racial Group (Check one): White Black/African American Asian American Indian/Alaskan Native Native Hawaiian/Other Pacific Islander American Indian/Alaskan Native and White Asian and White Black/African American and White American Indian/Alaskan Native & Black/African American Other Multi-Racial

Hispanic (HUD has designated Hispanic as an Ethnic Group. If you check this ethnic origin, please also check one of the racial groups above)

The information provided herein will be confidential and will only be used to provide statistical data required under the Community Development Block Grant Program. It is subject to verification pursuant to the rules and regulations of the New York State Office of Community Renewal and the U.S. Department of Housing and Urban Development.

I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE, THE INFORMATION PROVIDED HEREIN IS TRUE, CORRECT, AND COMPLETE.

Signature: _____

Date: _____