



Funding Provided by:



City of Albany COVID-19 Small Business Adaptation Program (SBAP)

Reopening. Retraining. Restocking. Reorganizing. Reimagining.

www.CapitalizeAlbany.com



Agenda

1. Staff Introduction
2. Program Overview
 - a) Eligible Applicants
 - b) Funding Sources
 - c) Qualifying Program Expenditures
 - d) Assistance Terms
3. Application Process
 - a) Overview
 - b) Pre-Application
 - c) Application
 - d) Required Forms
 - e) Application Completion
4. Question & Answer





Meet the Team

- **Ashley Mohl**, Director of Economic Development
- **Christopher Medve**, Senior Economic Developer II
- **Virginia Rawlins**, Program Assistant
- **Nora Culhane**, Program Assistant





Program Overview

Eligible Applicants

Has your business been affected by the COVID-19 health emergency?

*Do you have business expenses necessary to resume regular operations **or** do you need to adapt your business for the new safety regulations?*

This program can provide **direct reimbursement grants** designed to assist with the **recovery efforts of small businesses** in the City of Albany!





Program Overview

Eligible Applicants

- Applicant must be a legal entity, which is registered and licensed (if required) to operate in New York State.
- Applicant must be a small business or not-for-profit corporation, with no greater than 50 full-time equivalent employees, that was open and operating prior to March 7, 2020.
- Applicant must have a physical office or commercial storefront located in the City of Albany, New York and conduct operations in the City of Albany, New York.





Program Overview

Eligible Applicants

- Applicant **must have been negatively affected by the COVID-19 state disaster emergency** and have a documentable negative impact on their business or organization - this can be established through the application and supplemental documentation detailing volume of business loss and impacts.
- Project costs requested under this program **must not have been incurred prior to August 18, 2020**, or as required by the funding sources.

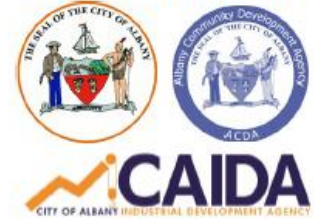




Program Overview

Funding Sources

Funding Provided by:



- Capitalize Albany Corporation, through financial assistance from the **Albany Community Development Agency (ACDA)** and the **City of Albany Industrial Development Agency (CAIDA)**, will provide direct reimbursement grants through this program.
- Certain eligibility criteria must be met in order to be eligible for the program, **as determined by federal and/or state regulations** pertaining to each of the funding sources.
- Funding through ACDA has been made possible per the U.S. Department of Housing and Urban Development (HUD) Community Development Block Grant - Coronavirus funding (CDBG-CV), and therefore **must meet a HUD national objective such as benefit to low- and moderate-income persons.**





Program Overview

Qualifying Project Expenditures

- **Reopening:** The purchase of personal protective equipment (PPE) such as face coverings, disposable gloves and protective gowns necessary to minimize the spread of COVID-19
- **Retraining:** The development and implementation of programs to train new employees, or re-train existing workforce on new business practices
- **Restocking:** The purchase of perishable goods to replace those that were lost due to COVID-19 and those that were used to supply recovery efforts
- **Reorganizing:** The purchase of furniture, fixtures, and equipment (FFE) necessary to adapt a business' space to minimize the spread of COVID 19
- **Reimagining:** The development and implementation of new programs or product lines to expand/adapt operations to meet new market demands





Program Overview

Qualifying Project Expenditures

Funding allocated by the **City Of Albany Industrial Development Agency (CAIDA)** will be used solely for reimbursement of the purchase of Personal Protective Equipment (PPE).

Adaptation Project Type	Examples of Qualifying Project Expenditures
Reopening: The purchase of personal protective equipment (PPE) necessary to minimize the spread of COVID-19	<ul style="list-style-type: none">• Face coverings (including N95 masks, cloth, disposable, face shields)• Disposable gloves• Protective gowns or uniforms• Protective eyewear• Hand sanitizer• Cleaning materials and disinfecting supplies• No-contact thermometers for employees and customers• Specialized packaging for shipping• COVID testing kits• Other forms of PPE, as approved by Capitalize Albany and the CAIDA Board

NOTE:

All completed and eligible applications for Reopening activities will be reviewed and approved/denied by the CAIDA Board. This means:

- Submitted applications will be posted to the CAIDA website (with confidential information redacted)
- Submitted applications will be discussed during a public meeting
- Submitted applications will be subject to a public comment period
- Awarded applications will be reported in CAIDA's annual filing to the publicly-posted Public Authorities Reporting & Information System (PARIS)



Program Overview

Qualifying Project Expenditures

Funding allocated by the **Albany Community Development Agency (ACDA)** will be used for fixtures, furniture and equipment and other non-PPE adaptation projects/activities.

Adaptation Project Type	Examples of Qualifying Project Expenditures
Retraining: The development and implementation of programs to train new employees, or re-train existing workforce on new business practices	<ul style="list-style-type: none">• Registration fees and/or supplies costs to complete approved disinfection, health, and safety training programs or certifications (such as ServSafe, Barbicide or other similar trainings or certifications relevant to the industry of the Applicant and prevention of COVID-19)
Restocking: The purchase of perishable goods to replace those that were lost due to COVID-19 and those that were used to supply recovery efforts	<ul style="list-style-type: none">• Food and beverage service inventory (not including alcohol or tobacco products)• Personal care products inventory (including those for hair, face, nails, etc.)
Reorganizing: The purchase of furniture, fixtures, and equipment (FFE) necessary to adapt a business' space to minimize the spread of COVID -19	<ul style="list-style-type: none">• Physical barriers/sneeze guards• Hand sanitizer stations• Respiratory devices such as air purifier systems installed in the business• Signage• Café tables and chairs or planter boxes/barriers required to define and/or protect a cafe space• Point of Sale (POS) payment equipment• Other expenses related to the reconfiguring of the business to meet required or recommended health and safety guidelines, and as approved by Capitalize Albany
Reimagining: The development and implementation of new programs or product lines to expand/adapt operations to meet new market demands	<ul style="list-style-type: none">• Equipment and/or materials and supplies costs for new product lines or services• Costs of developing a website and/or online payment platform to enable contactless orders, payment and/or delivery• Marketing expenses related to reopening and/or restoring consumer confidence



Program Overview

Assistance Terms

- Assistance is in the form of a grant.
- Grants may be required to be repaid, if the terms of the grant agreement are not met.
- Grants will be on a reimbursement basis for expenses incurred on or after August 18, 2020.
- The maximum grant is up to \$10,000 total, not per funding source, unless your business qualifies as a Disadvantaged Business Enterprise (minority, woman, or veteran-owned business).
- DBEs are eligible for up to \$20,000 total, \$10,000 per funding source.





Application Process Overview

- Two-part application process – pre-application and full application (with all required forms).
- Available online and in paper form (by request).
- A single application may be submitted to request both eligible PPE and non-PPE business expenses.

NOTE:

Pre-Applications were due Friday, August 28 at 4 p.m. You must have submitted a pre-application by deadline to be considered.





Application Process

Pre-Application

Go to:

www.capitalizealbany.com/grants

Click on the Pre-Application button on the webpage to access the SurveyMonkey questionnaire.

The pre-application deadline was 4 PM Friday, August 28, 2020.

GRANT PROGRAMS & BUSINESS RESOURCES

CONTACT OUR PROGRAMMING STAFF TO APPLY OR LEARN MORE

E: Development@CapitalizeAlbany.com | P: (518) 434-2532

COVID-19 SMALL BUSINESS ADAPTATION PROGRAM

City of Albany small businesses impacted by the ongoing pandemic that need assistance in covering costs related to operating in accordance with health and safety requirements can now apply for a COVID-19 Small Business Adaptation Program (SBAP) grant.

Eligible applicants may apply for up to \$10,000 and eligible disadvantaged business enterprises (woman, minority and veteran-owned businesses) may apply for up to \$20,000 in direct-reimbursement grants. Up to \$500,000 in grant resources will be made available.

APPLICATION PROCESS

1. If you haven't already, applicants must complete the [pre-application questionnaire](#) prior to completing the full application to be eligible for funding. This takes approximately 10-15 minutes to complete. The pre-application process will be closed to new applicants and pre-applications will not be accepted after 4 p.m. on Aug. 28.
2. Applications were made available starting, Aug. 18.
3. Below, please find the application, links to required forms and application resources. Applicants must submit completed full applications and all required documents by 4 p.m. on September 18.

Pre-Application

SBAP Application



Application Process

Pre-Application

Click on the Program Guidelines link and read the guidelines.

TIP:

Read the questions carefully: for example, “50 full-time equivalent employees (FTEs) or less”.

Pre-Application

SBAP Application

[CLICK HERE TO READ THE PROGRAM GUIDELINES](#)

REQUIRED FORMS & APPLICATION RESOURCES

- [Application Attachment Checklist](#)
- [Application Budget Worksheet Form \(Printable PDF\)](#)
- [Application Budget Worksheet Form \(Fillable PDF\)](#)
- [Family Income Form](#)
- [Property Owner Declaration and Consent Form \(Required only for lessee applicants\)](#)
- [Sample Application](#)
- [Sample Budget Worksheet](#)

A printable PDF version of the full-application is [available here](#) for your reference.





Application Process

Application

This application will take about 40 minutes to complete if you have all of your necessary documentation available and at your disposal.

Click on the SBAP Application button to access the full application.

The application deadline is 4 PM Friday, September 18, 2020.

GRANT PROGRAMS & BUSINESS RESOURCES

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2. Application will be made available starting, Aug. 18.
3. Below, please find the application, links to required forms and application resources. Applicants must submit completed full applications and all required documents by 4 p.m. on September 18.

Pre-Application

SBAP Application



Application Process

Application

TIP:
Review the Application Checklist and other Application Resources prior to beginning the application.

Pre-Application

SBAP Application

[CLICK HERE TO READ THE PROGRAM GUIDELINES](#)

REQUIRED FORMS & APPLICATION RESOURCES

- [Application Attachment Checklist](#)
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- [Sample Application](#)
- [Sample Budget Worksheet](#)

A printable PDF version of the full-application is [available here](#) for your reference.





Application Process

Application

The application home page will open when you click the button on the Capitalize Albany website (it should look like the image to the right).

TIP:

Applications in progress do not save until you advance to the next page.

City of Albany COVID-19 Small Business Adaptation Program Application

Welcome to the Small Business Adaptation Program Home Page

Capitalize Albany Corporation, in partnership with the City of Albany, has developed the COVID-19 Small Business Adaptation Program ("Program") in direct response to the state disaster emergency declared on March 7, 2020 and the impacts that COVID-19 has made on businesses and their continuing operations. Capitalize Albany Corporation, through financial assistance from the City of Albany Community Development (ACDA) and Industrial Development Agencies (CAIDA), will provide up to \$10,000 in direct reimbursement grants to assist with the recovery efforts of City of Albany small businesses, helping businesses affected by the COVID-19 health emergency with distinct business expenses necessary to resume regular operations of the business or adapt their business for the new regulatory environment and strengthen or expedite their growth and recovery, while maintaining the health and safety of their employees and customers. Disadvantaged business enterprises (minority, woman or veteran-owned businesses) may be eligible for up to \$20,000.

Specifically, this program is designed to provide reimbursement grants of up to \$10,000 (\$20,000 for qualifying DBE's) to help small businesses with the following COVID-19 adaptation-related expenses in order to avoid job loss caused by potential business closure related to social distancing:

- Reopening: The purchase of personal protective equipment (PPE) such as face coverings, disposable gloves and protective gowns necessary to minimize the spread of COVID-19
- Retraining: The development and implementation of programs to train new employees, or re-train existing workforce on new business practices
- Restocking: The purchase of perishable goods to replace those that were lost due to COVID-19 and those that were used to supply recovery efforts
- Reorganizing: The purchase of furniture, fixtures, and equipment (FFE) necessary to adapt a business' space to minimize the spread of COVID -19
- Reimagining: The development and implementation of new programs or product lines to expand/adapt operations to meet new market demands



Application Process

Application

- Your EIN will enable staff to track your application through the process. It is a 9-digit number provided by the Internal Revenue Service (IRS).
- A DUNS number will be required of CDBG-CV grantees. The number can be looked up or obtained at the link below.

* 7. Business Federal Employer Identification Number (EIN):

12-3456789

8. DUNS Number (if known):

Obtain a DUNS # here or look yours up: <https://www.dnb.com/duns-number.html>

Funding may require grant recipients to obtain a DUNS number.





Application Process

Application

* 21. Please provide a brief explanation of the adverse economic impacts COVID-19 has had on your business. Additionally, please provide a summary of the measures your organization has taken to date, or plan to take in the next 30-90 days, to address the effects of the pandemic, and any ways you have been required to adapt to the current climate.

Note: Applicants may be asked to provide evidence to further demonstrate these impacts. Quantify and/or explain the following (if not applicable, please type N/A):

1) Actual revenue loss over the last several weeks

I estimate \$50,000 in revenue loss over the past four months.

2) Any reduction in the volume of customers/consumers and transactions

I estimate a 45% reduction in volume of customers and transactions daily. Lunch business has nearly completely disappeared.

3) The number of canceled events resulting in direct or indirect loss

Three private events (totaling 260 customers) had to be canceled and one 40 person event has been indefinitely postponed.

4) Details on how your business has been disproportionately affected by travel or logistics

Logistically, I have had to figure out how to manage with less part-time staff. During the mandated closure, nearly \$1,000 in stock spoiled.

5) Details on how your supply chain has been substantially disrupted by the coronavirus

Our incoming and outgoing deliveries take much longer in transit than they used to. Lead-time on and cost of new product from vendors has been increased significantly.



Application Process

Application

* 22. Please provide a description of the proposed project to be completed with the requested grant assistance below.

In the description, please identify as much information as you can about the proposed project and the desired results. At a minimum, the project description should provide details on the entire scope of any purchases to be made with the grant and other available funds (if applicable), and identify the specific aspects of the work for which grant assistance is being requested. This description should match the detailed budget attachment to be submitted along with the application. (350 word limit in each box)

Reopening Activities: The purchase of personal protective equipment (PPE) necessary to minimize the spread of COVID-19 (These activities are eligible for funding through the City of Albany Industrial Development Agency):

The purchase of 500 disposable face coverings for employees. This funding will also help to purchase 10 gallons of hand sanitizer to refill sanitizer stations and 250 count of bleach wipes for seating maintenance. I will buy them from Mask Inc. and an online retailer.

Due to being located in same lobby as a physician's office, I will buy 4 specialized thermometers to help employees and customers feel comfortable entering the business.

Retraining, Restocking, Reorganizing and Reimagining Activities: The purchase of non-PPE products and services (These activities are eligible for funding through the Community Development Block Grant –CV Program):

In order to build back better and meet consumer demands, we need to launch a web-based social media marketing campaign and online, touchless sales platform. I need a consultant to design the sales system and hardware (POS equipment, tablet, printer) as well as consultant-led training to get staff acclimated to the new system and marketing methods. We have a grant to cover 50% of training costs.

We are currently take-out only. In order to open indoor seating with existing guidelines, we need a new hostess stand, sanitizer stations, plastic partitions, signage and smaller chairs to maximize social distancing.

While we've already replaced more than \$300 of the spoiled inventory, we need to purchase \$600 in additional perishable goods (dairy, produce, bread, frozen stock) to replace previous inventory reopen at adequate levels.

TIP:

Questions 22 and 23 should tie directly to the activities and costs listed in your Budget Worksheet



Application Process Application

NOTE:

These themes, found on pages 6 & 9 of the Program Guidelines should inform your responses to the application

Priorities

- 51% owned by a disadvantaged business enterprise (DBE) (e.g. minority, woman or veteran-owned).
- Microenterprises at least 51% owned by a low- to moderate-income person(s)
- 51% of employees of the business qualify as low- to moderate-income persons
- Serving target geography
- 25%+ revenue loss due to the impacts of COVID-19
- Projected tangible benefits to the City, such as annual sales, number of jobs created, etc.
- Businesses in a target cluster/industry (e.g. restaurant, hospitality)

General Evaluation Rubric

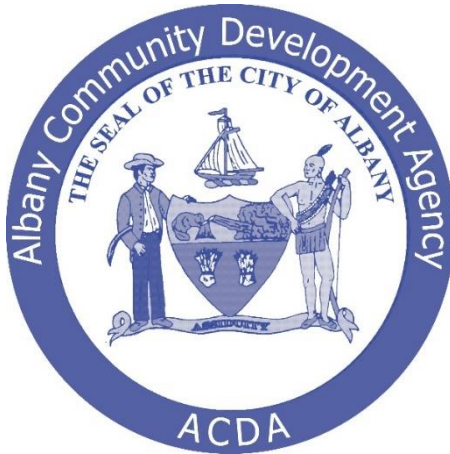
- Eligibility
- Businesses of Strategic Priority
 - DBE/MWBE designation
 - Target geography
 - Low/Mod Owned Microenterprises
 - 25%+ revenue loss due to the impacts of COVID-19
- Anticipated Econ./ Employment Impacts
- Target cluster/industry
- Project Need & Avail of Other Funding
- Strength of Proposed Adaptation
- Business Viability/Operational Experience/Project Feasibility
- Project Readiness & Reasonableness of Project Costs





Application Process

Application



TIP:

Online application will automatically send you to required questions based on your prior answers.





Application Process

Application

Applications for Reopening (PPE) activities funded by CAIDA will be reviewed for:

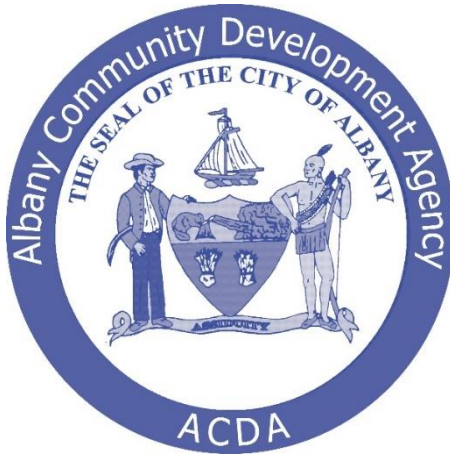
- Creditworthiness prior to the emergency;
- Level of negative impact of the emergency on operations & finances;
- Proposed plan to use the funds;
- Ties to their community & impact of their work in Albany;
- Assurance that efforts will be made to retain jobs; and
- Other potential sources of funding available to the applicant.





Application Process

Application



Applications for non-PPE activities funded by ACDA/ CDBG-CV will be reviewed for:

- Reasonable costs
- Financing commitments from other sources;
- Not substituting non-Federal financial support;
- Financially feasibility;
- Owner's return on equity investment will not be unreasonably high;
- Disbursement is pro-rata with other sources;
- Benefit to any of ACDA's target neighborhoods, Arbor Hill, West Hill/West End, North Albany, and The South End; and/or
- Meets a HUD National Objective by benefiting low- to moderate- income individuals





Application Process

Application

- **Low- to Moderate-Income Microenterprise:** For the purposes of this program, a microenterprise is a commercial enterprise that has five (5) or fewer employees, one (1) or more of which is the principal and owns the enterprise at the time of application.
- Applicants seeking to qualify under this track must be microenterprises majority-owned by low- to moderate- income individuals, as defined as at or below 80% of area median income (AMI).

*2020-2021** HUD Low to Moderate Income Guidelines for Albany:*

Number in Family	1	2	3	4	5	6	7	8
80% AMI	54,350	62,100	69,850	77,600	83,850	90,050	96,250	102,450
50% AMI	33,950	38,800	43,650	48,500	52,400	56,300	60,150	64,050
30% AMI	20,400	23,300	26,200	29,100	31,450	33,800	36,100	38,450

** For the purposes of this program, family is defined as all persons living in the same household who are related by birth, marriage, or adoption.





Application Process

Application

- **Low and Moderate Income Job Creation and Retention:** Applicants seeking to qualify under this track must commit to retaining or employing low- to moderate-income individuals, as defined as at or below 80% of area median income (AMI).

TIP:

See FAQ's for link to how to calculate Family Income.

2020-2021** HUD Low to Moderate Income Guidelines for Albany:

*2020-2021** HUD Low to Moderate Income Guidelines for Albany:*

Number in Family	1	2	3	4	5	6	7	8
80% AMI	54,350	62,100	69,850	77,600	83,850	90,050	96,250	102,450
50% AMI	33,950	38,800	43,650	48,500	52,400	56,300	60,150	64,050
30% AMI	20,400	23,300	26,200	29,100	31,450	33,800	36,100	38,450

** For the purposes of this program, family is defined as all persons living in the same household who are related by birth, marriage, or adoption.





Application Process

Application

City of Albany COVID-19 Small Business Adaptation Program Application

Other Financial Assistance

* 41. Has the business or its owner applied for and/or received assistance related to the impacts of COVID-19 or any expenses applied for in this application's budget through the Small Business Administration, Federal Emergency Management Program, or any other federal, state, local or private entity?

☒ Yes

☐ No

* 42. If yes, list the entities that the business has applied to and/or received funding from below. If you have applied to and/or received funding from more than three funding sources, please submit information on the additional assistance to Capitalize Albany at development@capitalizealbany.com.

Note: if the business or its owner applies for such assistance or receives an award after the date of its application or award from the COVID-19 Small Business Adaptation Program (SBAP), it must immediately disclose such application and/or award to Capitalize Albany Corporation. An applicant may not request funding for expenses covered by previous assistance received. Applicants must disclose other assistance applied for or received for the expenses detailed in this application. If the funding is deemed by Capitalize Albany Corporation to be duplicative to the use of SBAP grant funds, grant funds may be recaptured up to the full amount of the grant request.

Program/Agency 1	EIDL	
Date of Application	05/05/2020	
Amount of Application	\$10,000	
Purpose of Application	Loan for Operating Expenses	
Amount of Award	\$6,000	



Application Process

Application

This is the Certification section at the end of the application. The authorized signatory for the applicant should read this section carefully and sign virtually by typing their name, title and the date.

TIP:

Re-read your submitted pre-application to ensure accuracy.

City of Albany COVID-19 Small Business Adaptation Program Application

Certification

By submitting this grant application, the undersigned hereby certifies to Capitalize Albany Corporation that he/she is authorized to sign on behalf of the applicant entity, has read the program guidelines and supplemental program materials, understands the terms and conditions of the grant, and agrees to abide by the program rules and requirements, if awarded funds from the program. Further, the applicant certifies that it has disclosed all sources of assistance for which it has applied for the expenses and activities included in the SBAP application and budget; and that the applicant has not requested funding for expenses for which it has already received financial assistance from any federal, state, local or private source. The applicant further certifies that he/she is not in arrears for any federal, state, local, business, property, sales and payroll taxes. The applicant further certifies that the grant pre-application, application and supporting documents are true, complete, and accurate in all respects as of the stated date. The applicant understands that the application will not be accepted unless deemed complete by staff. The applicant agrees that the acceptance of this grant application does not commit Capitalize Albany Corporation to enter into an agreement to pay any costs incurred in its preparation or to participate in subsequent negotiations. Further, the acceptance of this grant application does not constitute an agreement by Capitalize Albany Corporation that any grant will actually be approved. Capitalize Albany Corporation expressly reserves the right to reject any or all grant applications for any or no reason, or to request more information from the applicant.

*52. Additionally, the applicant certifies that he/she understands that the following will be conditions of the grant, upon award:

- Grantees will be required to execute a grant agreement and other security documents, as determined by Capitalize Albany Corporation in its discretion.
- Grantee must commit to remain in the location and create/retain any required positions for at least one (1) year, at the sole discretion of Capitalize Albany Corporation.
- The approved project must be in compliance with all federal, state, and local laws.
- The undersigned hereby waives any claim against Capitalize Albany Corporation, City of Albany Industrial Development Agency (CAIDA), and Albany Community Development Agency (ACDA) arising out of the use of said grant funds for the purposes set forth in the Application. Additionally, the undersigned agrees to indemnify, defend, and hold Capitalize Albany Corporation, CAIDA, and ACDA, and their officers, directors, employees, and agents harmless from any charges, damages, claims or liens related in any way to or arising out of the applicant's participation in the grant program.
- Capitalize Albany Corporation has the unrestricted right to use, for any lawful purpose, any photographs or video footage taken of the property at the approved project location, and the grantee owns and/or for which the grantee has the authority to grant such permission, and to use the grantee's name in connection therewith if it so chooses.
- The applicant will notify Capitalize Albany Corporation of any public announcements or events in relation to the approved small business adaptation project, and Capitalize Albany Corporation will have the right to participate in and/or publicize the event in coordination with the grantee, if Capitalize Albany Corporation so chooses.
- The grantee will consent to display signage at the project location indicating participation in the City of Albany COVID-19 Small Business Adaptation Program if requested (Capitalize Albany Corporation to provide sign specifications).

Signature (Please Type)

John Doe

Title

President

Date

08/18/2020



Application Process

Required Forms

Do not forget to submit your required documents - the Application Checklist available on the Capitalize Albany website identifies the forms required to complete your application. Required forms must be submitted to:

development@capitalizealbany.com.

City of Albany COVID-19 Small Business Adaptation Program Application Checklist

RETURN APPLICATION TO:

Development@CapitalizeAlbany.com

Capitalize Albany Corporation

21 Lodge Street, Albany, New York 12207

CHECKLIST OF REQUIRED DOCUMENTS

Required documents are identified below. Please use this checklist as a guide to the documentation necessary to complete your grant application. Incomplete grant applications will not be considered.

- ☐ Completed Pre-Application and Full Application (link available on website)
 - ☐ Completed Budget Worksheet Form (form available on website)
 - ☐ Copy of the front of the business owner's driver's license or other government-issued photo identification and most recent personal federal tax return (for any persons owning 20% or greater of business)
 - ☐ Most recent business federal tax return (if 2019 tax return is unavailable, provide 2018 business federal tax return and 2019 internally prepared year-end financial statements)
 - ☐ 2020 interim business financials (balance sheet, profit and loss statement, and cash flow statement)
 - ☐ Up to three (3) estimates for each requested budget line item from the Budget Worksheet to substantiate all proposed grant-funded project costs (at least one estimate per line item required)
- Additional documentation that may be required (dependent upon applicant and project specifics, and per discretion of Capitalize Albany Corporation staff):
- ☐ For lessees, a legally valid and binding lease for the business location for a period of 3 years or that, at a minimum, does not expire prior to anticipated project completion and monitoring period
 - ☐ For lessees with any proposed physical improvements to the real property, completed Property Owner Declaration and Consent Form (form available on website)
 - ☐ Proof of any U.S. Small Business Administration applications along with any related approval/denial or ineligibility declaration from all federal, state, local, and private funding sources and detailed budget of expenses covered by other funds
 - ☐ Documentation of commitment of funds for the project related expenses not covered by the grant request (bank statement(s) and/or commitment letter(s) per the discretion of Capitalize Albany)
 - ☐ If grant request utilizes CDBG funding and indicates job retention, completed Family Income Forms for any retained positions (form available on website)

Capitalize Albany Corporation has the right to request additional information if necessary during the application review process.



Application Process

Required Forms

This is the Budget Worksheet Form, which is required for all applications. Please provide details on each of the project expenses, by budget category.

TIP:

Any line item identified in your budget should be described in Q22. The total CAIDA & CDBG funds should equal Q23.

City of Albany - COVID-19 Small Business Adaptation Program (SBAP)

Contact Name: John Doe
Business Name: ABC Business
Business Address: 123 Business Street, Albany, NY 12210
EIN Number: 12-3456789

Date Submitted: 08/18/2020

BUDGET				
BUDGET CATEGORY	LINE ITEM ACTIVITY DESCRIPTION*	PREFERRED/ ANTICIPATED VENDOR	TOTAL ITEM COST	AMOUNT REQUESTED FROM SBAP
Reopening <small>The purchase of personal protective equipment (PPE) such as face coverings, disposable gloves and protective gowns necessary to minimize the spread of COVID-19.</small>				
	1. Purchase of face coverings (500)	Mask Inc.	\$ 600.00	\$ 600.00
	2. Purchase 4 specialized thermometers	OnlineRetailer.com	\$ 1,200.00	\$ 1,200.00
	3. Purchase of hand sanitizer (10) & wipes (250)	Sanitizer Inc.	\$ 800.00	\$ 800.00
	4.			
Total CAIDA Funds Requested:				\$ 2,600.00
Retraining <small>The development and implementation of programs to train new employees, or re-train existing workforce on new business practices.</small>				
	1. Training new/existing employees	SBA Consultant	\$ 900.00	\$ 450.00
	2.			
	3.			
	4.			
Restocking <small>The purchase of perishable goods to replace those that were lost due to COVID-19 and those that were used to supply recovery efforts.</small>				
	1. Purchase food inventory	ABC Distributor	\$ 600.00	\$ 600.00
	2.			
	3.			
	4.			
Reorganizing <small>The purchase of PPE such as physical barriers/bt workstations/ employees/customers, hand sanitizer stations, or safe tables & chairs to adapt a space to minimize the spread of COVID-19.</small>				
	1. Purchase of sanitizer stations (2)	Sanitizer Inc.	\$ 600.00	\$ 600.00
	2. Purchase of clear partitions (5)	OnlineRetailer.com	\$ 700.00	\$ 700.00
	3. Purchase of receptionist desk, chairs, & msg board	Furniture Inc.	\$ 1,500.00	\$ 1,500.00
	4. Production of COVID signage (12)	ABCSigns.com	\$ 500.00	\$ 500.00
Reimagining <small>The development and implementation of new programs or product lines to respond to market demands.</small>				
	1. Develop new web-based sales platform	Consultant ABC	\$ 2,000.00	\$ 2,000.00
	2. Purchase new web-based sales hardware	Telecom Inc.	\$ 1,800.00	\$ 1,050.00
	3.			
	4.			
Total CDBG Funds Requested:				\$ 7,400.00
*Please attach additional pages as necessary along with quotes/estimates correlating to each line item				
For Questions Please Contact Capitalize Albany Corporation at: Development@CapitalizeAlbany.com			Total Project Cost: \$ 11,200.00	
			Total SBAP Grant Request: \$ 10,000.00	

FOR INTERNAL USE ONLY

Date Received: _____ DBE? Y N Total Request Equal to App. Q23? Y N
All Estimates Provided? Y N CAIDA: _____ CDBG: _____ Total: _____ Reviewer: _____
All Uses Eligible? Y N Reviewer2: _____




Application Process

Required Forms

This is the Budget Worksheet Form, which is required for all applications. Please provide details on each of the project expenses, by budget category.

TIP:

Detailed quotes/ estimates & detailed description in Q22 can allow for more general line item descriptions.



LINE ITEM	ACTIVITY DESCRIPTION*	PREFERRED/ ANTICIPATED VENDOR	TOTAL ITEM COST	AM REQ FRO
1.	Purchase of face coverings (500)	Mask Inc.	\$ 600.00	\$
2.	Purchase 4 specialized thermometers	OnlineRetailer.com	\$ 1,200.00	\$
3.	Purchase of hand sanitizer (10) & wipes (250)	Sanitizer Inc.	\$ 800.00	\$
4.				
Total CAIDA Funds Requested:				\$
1.	Training new/existing employees	SBA Consultant	\$ 900.00	\$
2.				
3.				
4.				
1.	Purchase food inventory	ABC Distributor	\$ 600.00	\$
2.				
3.				
4.				
1.	Purchase of sanitizer stations (2)	Sanitizer Inc.	\$ 600.00	\$
2.	Purchase of clear partitions (5)	OnlineRetailer.com	\$ 700.00	\$
3.	Purchase of receptionist desk, chairs, & msg board	Furniture Inc.	\$ 1,500.00	\$
4.	Production of COVID signage (12)	ABCSigns.com	\$ 500.00	\$




Application Process

Required Forms

This is the Budget Worksheet Form, which is required for all applications. Please provide details on each of the project expenses, by budget category.

TIP:

At least one estimate or quote from a vendor is required for each identified expense. Multiple quotes are preferred.



LINE ITEM	ACTIVITY DESCRIPTION*	PREFERRED/ ANTICIPATED VENDOR	TOTAL ITEM COST	AM REQ. FRO
1.	Purchase of face coverings (500)	Mask Inc.	\$ 600.00	\$
2.	Purchase 4 specialized thermometers	OnlineRetailer.com	\$ 1,200.00	\$
3.	Purchase of hand sanitizer (10) & wipes (250)	Sanitizer Inc.	\$ 800.00	\$
4.				
Total CAIDA Funds Requested:				\$
1.	Training new/existing employees	SBA Consultant	\$ 900.00	\$
2.				
3.				
4.				
1.	Purchase food inventory	ABC Distributor	\$ 600.00	\$
2.				
3.				
4.				
1.	Purchase of sanitizer stations (2)	Sanitizer Inc.	\$ 600.00	\$
2.	Purchase of clear partitions (5)	OnlineRetailer.com	\$ 700.00	\$
3.	Purchase of receptionist desk, chairs, & msg board	Furniture Inc.	\$ 1,500.00	\$
4.	Production of COVID signage (12)	ABCSigns.com	\$ 500.00	\$



Application Process

Required Forms

This is the Budget Worksheet Form, which is required for all applications. Please provide details on each of the project expenses, by budget category.

TIP:

Eligible items under Reopening include specifically defined PPE as identified on page 2 of the Program Guidelines.

BUDGET		
BUDGET CATEGORY	LINE ITEM ACTIVITY DESCRIPTION*	PREFERRED/ ANTICIPATED VENDOR
Reopening		
<i>The purchase of personal protective equipment (PPE) such as face coverings, disposable gloves and protective gowns necessary to minimize the spread of COVID-19.</i>	1. Purchase of face coverings (500)	Mask Inc.
	2. Purchase 4 specialized thermometers	OnlineRetailer.com
	3. Purchase of hand sanitizer (10) & wipes (250)	Sanitizer Inc.
	4.	
<i>Total CAIDA Fund</i>		
Retraining		
<i>The development and implementation of programs to train new employees, or re-train existing workforce on new business practices.</i>	1. Training new/existing employees	SBA Consultant
	2.	
	3.	
	4.	
Restocking		
<i>The purchase of perishable goods to replace those that were lost due to COVID-19 and those that were used to supply recovery efforts.</i>	1. Purchase food inventory	ABC Distributor
	2.	
	3.	
	4.	
Reorganizing		
<i>The purchase of PPE such as physical barriers b/t workstations, employees/customers, hand sanitizer stations, or café tables & chairs to adapt a space to minimize the spread of COVID-19.</i>	1. Purchase of sanitizer stations (2)	Sanitizer Inc.
	2. Purchase of clear partitions (5)	OnlineRetailer.com
	3. Purchase of receptionist desk, chairs, & msg board	Furniture Inc.
	4. Production of COVID signage (12)	ABCSigns.com



Application Process

Required Forms

This is the Budget Worksheet Form, which is required for all applications. Please provide details on each of the project expenses, by budget category.

TIP:

If you have received/ applied for other funding to cover part of the total item cost identified in the budget, list it in Q42 & provide documentation of award or receipt.

LINE ITEM ACTIVITY DESCRIPTION*	PREFERRED/ ANTICIPATED VENDOR	TOTAL ITEM COST	AMOUNT REQUESTED FROM SBAP
ase of face coverings (500)	Mask Inc.	\$ 600.00	\$ 600.00
ase 4 specialized thermometers	OnlineRetailer.com	\$ 1,200.00	\$ 1,200.00
ase of hand sanitizer (10) & wipes (250)	Sanitizer Inc.	\$ 800.00	\$ 800.00
Total CAIDA Funds Requested:			\$ 2,600.00
ng new/existing employees	SBA Consultant	\$ 900.00	\$ 450.00
ase food inventory	ABC Distributor	\$ 600.00	\$ 600.00
ase of sanitizer stations (2)	Sanitizer Inc.	\$ 600.00	\$ 600.00
ase of clear partitions (5)	OnlineRetailer.com	\$ 700.00	\$ 700.00
ase of receptionist desk, chairs, & msg board	Furniture Inc.	\$ 1,500.00	\$ 1,500.00
ction of COVID signage (12)	ABCSigns.com	\$ 500.00	\$ 500.00



Application Process

Required Forms

This is the Budget Worksheet Form, which is required for all applications. Please provide details on each of the project expenses, by budget category.

TIP:

Make it clear that you are not requesting funds for ineligible activities by providing specific documentation. Strengthen your application by providing proof of the availability of funds for expenses not covered by your SBAP request.

Total CAIDA Funds Requested:			\$ 2,600.00
ng new/existing employees	SBA Consultant	\$ 900.00	\$ 450.00
ase food inventory	ABC Distributor	\$ 600.00	\$ 600.00
ase of sanitizer stations (2)	Sanitizer Inc.	\$ 600.00	\$ 600.00
ase of clear partitions (5)	OnlineRetailer.com	\$ 700.00	\$ 700.00
ase of receptionist desk, chairs, & msg board	Furniture Inc.	\$ 1,500.00	\$ 1,500.00
ction of COVID signage (12)	ABCSigns.com	\$ 500.00	\$ 500.00
op new web-based sales platform	Consultant ABC	\$ 2,000.00	\$ 2,000.00
ase new web-based sales hardware	Telecom Inc.	\$ 1,800.00	\$ 1,050.00
Total Funds Requested:			\$ 7,400.00
essary along with quotes/estimates correlating to each line item			
e Albany Corporation at:			
Total Project Cost		\$ 11,200.00	
Total SBAP Grant Request:		\$ 10,000.00	



Application Process

Required Forms

This is the Budget Worksheet Form, which is required for all applications. Please provide details on each of the project expenses, by budget category.

TIP:

Requests from each source must be min \$1k - max \$10k. General applicants may request up to \$10k total. DBE applicants may request up to \$20k total – max \$10k from each source.

Total CAIDA Funds Requested:			\$ 2,600.00
w/existing employees	SBA Consultant	\$ 900.00	\$ 450.00
ood inventory	ABC Distributor	\$ 600.00	\$ 600.00
of sanitizer stations (2)	Sanitizer Inc.	\$ 600.00	\$ 600.00
of clear partitions (5)	OnlineRetailer.com	\$ 700.00	\$ 700.00
of receptionist desk, chairs, & msg board	Furniture Inc.	\$ 1,500.00	\$ 1,500.00
of COVID signage (12)	ABCSigns.com	\$ 500.00	\$ 500.00
ow web-based sales platform	Consultant ABC	\$ 2,000.00	\$ 2,000.00
ew web-based sales hardware	Telecom Inc.	\$ 1,800.00	\$ 1,050.00
Total CDBG Funds Requested:			\$ 7,400.00
y along with quotes/estimates correlating to each line item			
any Corporation at:			
Total Project Cost:			\$ 11,200.00
Total SBAP Grant Request:			\$ 10,000.00



Application Process

Application Completion

- In order for an application to be considered for award, the **pre-application and the full application with any and all required documents** need to be submitted by the deadline and determined to be complete by Capitalize Albany, in its sole discretion.
- Pre-application deadline: **4pm on August 28, 2020.**
- Full application deadline: **4 pm on September 18, 2020.**





Application Process

A Note About Demand

- **Up to \$500,000 is currently available to this program through CAIDA and ACDA**
 - **\$250,000 for Reopening PPE purchases**
 - **\$250,000 for other adaptation activities**
- **There are hundreds of eligible businesses in the City of Albany**
- **Nearly all have been significantly negatively affected by COVID-19**
- **We have received more than 200 pre-applications for the SBAP program**
- **We will do our very best to have the most strategic impact, assist the greatest number of businesses possible, and advocate for additional resources.**





Questions?

- Please type any questions into the chat box now.
- Questions will be responded to live and/or added to the existing Frequently Asked Questions document on the Capitalize Albany website.
- Following the completion of this webinar, if you have any remaining questions, please contact us:

development@capitalizealbany.com

(518) 434-2532 ext. 25.

