## State of Oregon COVID-19 Emergency Business Assistance Grant Program Processing Checklist

1.	Verify that all application fields are complete and legible
	Page 3 – Applicant information Page 6 – Applicant certifications
	*Proceed to step 2
2.	Does the applicant indicate they had more than 5 employees as of February 29, 2020?
	Yes No
	Verify job retention estimate was provided
	*Proceed to step 3
3.	Is the businesses properly registered to do business in Oregon?
	To confirm go to: http://egov.sos.state.or.us/br/pkg_web_name_srch_inq.login Search for the business name, verify the Entity Status is "ACT" Is the Entity Status "ACT"? Yes No
	*If Entity Status is anything other than ACT the company is not currently registered to do business in Oregon
	Is the Principal Place of Business in Oregon? Yes No
	*Proceed to step 4
4.	Determine amount of eligible award *verify employee head-count per the Q1 2020 Form 132 to determine minimum and maximum amount eligible based upon tiers
	a. Based on number of employees determine minimum and maximum award:
	1-5 employees
	• \$2,500 to \$5,000
	6-10 employees
	• \$5,000 to \$10,000 11-15 employees
	• \$7,500 to \$15,000
	16-20 employees
	• \$10,000 to \$20,000
	21-25 employees
	• \$12,500 to \$25,000
	More than 25 – Ineligible

b.	Does the applicant award amount exceed the minimum award based on FTE headcount?
	○ No – eligible award amount is as requested
	Yes – further verification required
	<ul> <li>Eligible lease expenses (*two months of lease/rent payments are eligible)</li> </ul>
	Two months of lease/rent payments attached?
	Total eligible lease/rent payment?
	<ul> <li>Eligible utility expenses (power, water/sewer, natural gas, phone, garbage, broadband, and cell expenses – for additional expenses contact Business Oregon to determine if they are eligible) (*two months of utility expenses are eligible).</li> </ul>
	Two months of utility expenses are attached?
	Total eligible utility expenses?
	\$ 0.00 Total verified eligible expenses
	<ul> <li>Applicant is eligible for the greater of (a) or (b):</li> </ul>
	a. The minimum award based on FTE; (a) or (b)
	Minimum Award Amount
	<ul> <li>b. If expenses were verified, enter the lesser of "Total verified eligible expenses" calculated above or the maximum award based on FTE.</li> </ul>
	Maximum Award Amount
	\$ 0.00 Total Award Amount
C.	Is the primary revenue activity of the applicant one of the following?: Amusement parks; aquariums; arcades; art galleries (to the extent that they are open without appointment); barber shops and hair salons; bowling alleys; cosmetic stores; dance studios; esthetician practices; fraternal organization facilities; furniture stores; gyms and fitness studios (including climbing gyms); hookah bars; indoor and outdoor malls (i.e., all portions of a retail complex containing stores and restaurants in a single area); indoor party places (including jumping gyms and laser tag); jewelry shops and boutiques (unless they provide goods exclusively through pick-up or delivery service); medical spas, facial spas, day spas, and non-medical massage therapy services; museums; nail and tanning salons; nontribal card rooms; skating rinks; senior activity centers; ski resorts; social and private clubs; tattoo/piercing parlors; tennis clubs; theaters; yoga studios; and youth clubs.   Yes – applicant is eligible
	No – the business must meet the 50% decline in sales test

	d.	50% decline in sales documentation review:
		Acceptable documentation is an internally generated Profit & Loss Statement or Sales Report: Check if Attached.
		Determine gross 2020 sales/revenues as reported by applicant for a specified period (e.g. April 1 to April 30, 2020)
		Determine sale for a comparable period (either a period of 2020 pre-COVID or for the previous calendar year – e.g. for the example above either March 1 through March 31, 2020 or April 1 to April 30, 2019)
		Comparable Sales Amount = X COVID Sales Amount = Y % Sales Decline = ((X-Y) / X) * 100
		COVID Impact Sales Dates: to
		Comparable Sales Period Dates: to
		NaN % Sales Decline
	$\circ$	Sales decline is 50% or greater = qualified
	$\bigcirc$	Sales decline is less than 50% = not qualified
		*Proceed to step 5
5.		Verify all certifications were complete and initialed
		*Proceed to step 6
6.		Verify that an authorized representative of the applicant signed and dated the application (bottom of page 2) and included their position/title with the company.
	•	eets all eligible requirements, before making an offer, the administrator must

If con provide company data as requested in the document titled "Pre-award Report". The Pre-award Report is to be emailed to Pamela Brunell at: pamela.brunell@oregon.gov

Once notified by the department that the company is eligible to receive an award, an award notice and certification acceptance will be prepared.

The company must provide the following prior to funds being disbursed:

- A copy certification acceptance by an authorized official of the business,
- A completed demographic questionnaire for all business owners with 20% or more ownership with a selection made for race, ethnicity and gender, and
- A complete and executed W-9 for the business (required for the 1099-G which will be issued by the administrator).