City of Des Moines Grant Relief Opportunity (G.R.O.) Program Application (Paper Version)

The City will be providing financial assistance in the form of grant awards to small businesses through the new G.R.O. (Grant Relief Opportunity) Program. The program will provide relief to businesses that are impacted financially by the Stay Home, Stay Healthy mandate by the State of Washington. Funding is designated for businesses that have been impacted by the pandemic between March 1, 2020 and October 31, 2020. The maximum grant amount is \$25,000, and the awarded amount will be determined through administrative review of business applications. These resources; federal, state, and regional funds, are limited. Successful applicants will demonstrate that the funds will be utilized to enhance employment and increase economic activity in the City of Des Moines.

The G.R.O. Program will also award up to \$10,000 in adaptation/remodel grants for small businesses that are faced with retrofitting their brick and mortar locations to accommodate current and future social distancing requirements. If work is contracted, or products are procured, from local businesses in the City of Des Moines, then costs will be reimbursable up to 100%. All other related costs will be 50% reimbursable.

The City is focused on maximizing the impact of these programs by ensuring that the processes are efficient, informed, and effective.

After completing this form, please save and email it to mailto:GRO@desmoineswa.gov.

١	Background Information	
I.	Organization Name *	* Required
2.	Organization Address * Street Address, City, State, Zip Code	
3.	Owner Name(s) * First and last name	

Phone number *	
Business Category * Check all that apply.	
□ Accounting & Tax Services	
□ Arts, Culture & Entertainment	
□ Auto Sales & Service	
□ Banking & Finance	
□ Business Services	
□ Community Organization	
 Dentist or Orthodontist 	
□ Education	
□ Health & Wellness	
□ Health Care	
☐ Home Improvement	
□ Insurance	
☐ Internet & Web Services	
□ Legal Services	
Lodging & TravelMarketing & Advertising	
□ News & Media	
□ Pet Services	
□ Real Estate	
□ Restaurants & Nightlife	
☐ Shopping & Retail	
□ Sports & Recreation	
□ Transportation	
□ Utilities	
Wedding, Events & Meetings	
□ Other:	

8.	Number of Employees After COVID-19 (including the owner) *
9.	Number Years in Business/Operation *
10.	Does the business have a current business license to operate in the City of Des Moines? * Mark only one option. Yes No
11.	Please discuss how your small business has been affected by the COVID-19 pandemic. *
R	equest for Assistance
12.	Please indicate which funds you are requesting: * Mark only one option. Relief related to Stay Home, Stay Healthy Order Adaptation/Remodel Grant
13.	Amount Requested: *
14.	Provide detail on the use of the funds you are requesting. *

15.	I will provide two (2) quarterly reports over a period of six (6) months after the issuance of funding. * Mark only one option. □ Agree □ Do Not Agree
16.	The funds I am requesting are not being used for expenses already covered by Federal, State, or other local CARES funding (i.e. double-dipping). * Mark only one option. Agree Do Not Agree
17.	Please attach to the email relevant information related to your request (e.g. copies of receipts, itemized charges, etc.) * List the files submitted:
18.	Please attach to the email your most recent W-9. *

Thank you for your application.

After completing it, please save and email it to GRO@desmoineswa.gov.