

**Small Business Investment Grant Fund
Business Application and Certification**

Business Name: _____ **EIN:** _____
Address: _____ **Phone:** _____
Address: _____ **Fax:** _____
City: _____ **State:** _____ **Zip:** _____
County (if applicable): _____
Contact Name: _____ **Email:** _____
Business Legal Structure: General Partnership LLC LLP C Corp Subchapter S Corp
 Other _____
Business Description: _____
Date Business Established: ___/___/___ **NAICS:** _____ to search: <https://www.census.gov/eos/www/naics>

Certification of Eligible Small Business

Does the Business: (including any parent or subsidiary corporation or affiliated entity):

1. Have annual gross revenues of less than \$5 million in its most recent fiscal year? Yes No
2. Have its principal office or facility in Virginia? Yes No
3. Have other offices or facilities outside of Virginia? Yes No If yes, please provide location(s) outside of Virginia

4. Engage in business primarily in, or does substantially all, of its production in Virginia? Yes No
If no, please explain: _____
5. Have, during its existence, obtained less than \$5 million in aggregate gross cash proceeds from the issuance of its equity or debt investments, not including commercial loans from national or state chartered banking or savings loan institutions?
 Yes No
6. Have less than 50 employees who are employed within Virginia? Yes No
Current # of full-time employees in Virginia: _____ Outside of Virginia: _____
7. Will any full-time jobs at the business be retained or created as a result of this investment? Yes No
Full Time Jobs Retained as the result of this Investment _____
of Full Time Jobs Created with this Investment _____
Please provide a description of how this investment will create and/or retain the number of jobs listed above:

8. Has any manager, director, or owner of the business been convicted of, or currently the subject of an investigation, relating to violations of state or federal securities laws? Yes No
9. Is the business or any owners, officers, directors, general partners, stockholders or limited partners owning 20% or more of the business involved in any pending lawsuits? Yes No
If you answered yes to questions 8 or 9, please explain below: _____

10. Is the Business delinquent on Virginia State taxes? Yes No
If delinquent, does the business have an approved repayment plan with the Virginia Department of Taxation? Yes No If no, please provide explanation: _____

The Business hereby Acknowledges and Certifies:

1. Receipt of cash investment(s) in the form of equity or subordinated debt made on or after July 1, 2019 but prior to January 1, 2022.
2. The cash equity investment(s) will be held by the Investor(s) for a minimum of two years to qualify for the grant. Unless the investor transfers the equity in connection with the qualified investment as a result of:
 - the liquidation of the Business issuing such equity,
 - the merger, consolidation, or other acquisition of such business with or by a party not affiliated with such business, or
 - death of the Investor,
the Investor shall forfeit the grant and shall pay the Authority interest on the grant at the rate of one percent per month, compounded monthly, from the date the grant was awarded.

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3. If within two years of the grant award, the Qualified Business:

- relocates outside of Virginia or
- closes as a result of criminal conviction on the part of any officer, director, manager, or general partner of such business relating to his involvement with the business,

the Investor shall forfeit the grant and shall pay the Authority interest on the grant at the rate of one percent per month, compounded monthly, from the date the grant was awarded.

4. If cash investment(s) are in the form of subordinated debt:

- the terms of such debt shall not require repayment of principal for the first three years after issuance,
- the debt is not guaranteed by any other person or secured by any assets of the issuer or any person,
- is subordinated to all indebtedness and obligations of the Business to national or state-chartered banking and savings and loan institutions.

If any of the above conditions for the Subordinated Debt are not met and maintained for the full three years, the Business must notify the VSBFA in writing within 30 days of such violation.

5. The Business authorizes VSBFA to investigate all information required to process this application and as it deems necessary in the future.
6. The Business agrees to provide monitoring information regarding the business, the qualified investments any information deemed necessary regarding the grant award.
7. The Business hereby certifies that all information contained herein and contained in attachments which make up this grant application are true to his/her best knowledge and belief, and are submitted in furtherance of this application.

Name of Business: _____ **Date:** _____

By: _____ **Title:** _____

Include the following documents in your application package:

1. Complete and executed copy of this Application;
2. Copy of Organizational Documents in order to evidence Business Legal Structure:
 - Articles of Incorporation required for: stock corporations, non-stock corporations, or professional corporations.
 - Articles of Organization required for: Limited Liability Companies, Professional Limited Liability Companies.
 - Certificate of Limited Partnership for a Limited Partnership.
 - Statement of Partnership Authority or Partnership Agreement is for a General Partnership.
 - Articles of Trust Agreement is for a Business Trust.
 - Statement of Registration as a Domestic Limited Liability Partnership for a Registered Limited Liability Partnership.
 - Sole Proprietorships are not eligible for the grant.
3. Copy of business applicant's Federal or Virginia Income Tax Returns for most recent year end in order to evidence revenues less than \$5 million.
4. Certificate of Good Standing or Certificate of Fact from the SCC or local licensing authority for the Applicant Business;
5. Most recent Quarterly Payroll Report from the Virginia Employment Commission (VEC FC-20 and FC -21) <http://www.vec.virginia.gov/employers/VEC-FC-2120>. Required in order to evidence less than 50 employees in Virginia.
6. List of all equity investors in the Small Business as of the date of the Application including:
 - Full Name
 - Mailing Address
 - EIN or SSN
 - Amount and Date of Cash Investment(s)
 - Type of Investment: Equity or Subordinated Debt (if subordinated debt, please include copy of the executed subordinated note)
 - Percentage of Ownership in the business
7. A copy of the executed legal document (stock offering, stock subscription, stock certificate, capital ledger) used to evidence the cash equity investment and the date of the investment for each Applicant Investor. For subordinated debt, please include copy of the executed subordinated note.
8. Evidence of cash investment and date for **each Applicant Investor** (copy of cancelled checks; bank statements). In-kind investments do not qualify for the grant.

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Contact and Mailing Address:

Virginia Small Business Financing Authority – *Small Business Investment Grant Processing*
P. O. Box 446 Richmond, VA 23218-0446
Telephone: 804-371-8254 Fax: 804-225-3384 Email: VSBFBA@sbsd.virginia.gov

Data Collection for Government Monitoring Purposes:

The Virginia Small Business Financing Authority (VSBFBA) is requesting information on the ownership of the applicant businesses. **You are not required to provide this information, but are encouraged to do so. VSBFA does not discriminate on the basis of this information and this information will have no bearing on VSBFA's decision for this application. If you do not wish to provide the information, please check here: Applicant: I do not wish to provide this information**

If you will provide this information, complete the section below:

Ethnicity: Hispanic or Latino Not Hispanic or Latino

Race: You may select one or more designations

- American Indian or Alaska Native Asian White
 Black or African American Native Hawaiian or Other Pacific Island

Sex: Female Male

Veteran Status:

- Yes, I am a veteran of the U.S. Armed Forces No, I am not a veteran of the of the U.S. Armed Forces

Woman-Owned Business: Select "yes" if at least 51% of business is owned by one or more women or in the case of a corporation, partnership, or LLC, or other entity, at least 51% of the equity ownership is by one or more women who are U.S. citizens or legal resident aliens Yes No

Minority-Owned Business: Select "yes" if at least 51% of business is owned by one or more minority individuals or in the case of a corporation, partnership, of LLC, or other entity, at least 51% of the equity ownership interest in the entity is owned by one or more minority individuals who are U.S. citizens or legal resident aliens Yes No

For Internal Use Only:

Time and Date Received by VSBFA: _____