



**HURRICANE HARVEY
RELIEF PROGRAM FOR
TEXAS SMALL BUSINESS**

HARVEY SMALL BUSINESS APPLICATION
Grants from \$50,000 to \$250,000

FULL LEGAL BUSINESS NAME _____

COMPANY WEBSITE ADDRESS (if applicable) _____

COMPANY DBA _____ NAICS _____

PHONE _____ EMAIL _____

PREFERRED METHOD OF CONTACT _____ PREFERRED LANGUAGE _____

OWNER NAME _____

OWNER'S PHYSICAL ADDRESS (no PO Boxes) _____

BUSINESS PHYSICAL ADDRESS (no PO Boxes) _____

IS YOUR BUSINESS LOCATION OWNED _____ OR LEASED _____

TEXAS TAX ID# _____ FEDERAL EIN# _____

COUNTY _____

NAME OF CONTACT IF OTHER THAN OWNER _____

CELL PHONE _____ EMAIL _____

WERE YOU OPEN FOR BUSINESS ON AUGUST 24, 2017? YES _____ NO _____

IS YOUR BUSINESS A PRIVATELY-OWNED UTILITY? YES _____ NO _____

TOTAL EMPLOYEES ON YOUR PAYROLL AUGUST 24, 2017? _____

HOW MANY OF YOUR EMPLOYEES DURING THE WEEK OF AUGUST 24, 2017 WERE PART-TIME?

_____ HOW MANY WERE FULL-TIME EMPLOYEES? _____

CURRENTLY, HOW MANY FULL-TIME EMPLOYEES DOES YOUR BUSINESS EMPLOY? _____

HOW MANY PART-TIME EMPLOYEES DOES YOUR BUSINESS EMPLOY? _____

DESCRIBE YOUR BUSINESS AND WHAT SERVICES YOUR COMPANY OFFERS

ASSUMING HURRICANE HARVEY DAMAGED YOUR BUSINESS, WHAT IS THE AMOUNT OF FUNDING YOU ARE REQUESTING? _____

DESCRIBE IN DETAIL HOW YOU PLAN TO USE THE FUNDS TO SUSTAIN AND GROW YOUR BUSINESS TO CREATE AND/OR RETAIN JOBS. The more information you provide the better we are able to evaluate your request. (If needed you may attach extra pages).

HOW MANY NEW FULL-TIME EMPLOYEES _____ PART-TIME EMPLOYEES _____ JOBS COULD YOU CREATE WITH THE FUNDING?

HAVE YOU RECEIVED OR APPLIED FOR INSURANCE PROCEEDS, OTHER LOANS, GRANTS OR ANY OTHER FUNDING, ETC. SINCE AUGUST 25, 2017? If so, please explain and give the status (amount, pending, funded, etc.).

WHEN WAS YOUR BUSINESS FOUNDED? _____ (DATE)

WHAT TYPE OF PHYSICAL AND/OR ECONOMIC DAMAGE DID YOU SUFFER FROM HURRICANE HARVEY?

WHAT IS THE AMOUNT OF LOSS IN DOLLARS, AS A RESULT OF HURRICANE HARVEY?

IS YOUR BUSINESS CURRENT WITH LOCAL, STATE AND FEDERAL TAXES? _____

NOTE: The Texas General Land Office is committed to helping small business recovery from Harvey.

CERTIFICATION

I certify that I possess the legal authority on behalf of the business to submit this application.

I understand and agree that by participating in this program, my business will create and/or retain at least one job per \$50,000 awarded, if applicable.

I certify, under penalty of perjury, that my business suffered damages as a result of Hurricane Harvey, was in business at its address on August 25, 2017 and is located in one of the 49 eligible counties (see website for the list of the 49 CDBG-DR eligible counties). To the best of my knowledge and belief, I certify that the information provided in this application is true, complete and accurate. I am aware that any false, fictitious, or fraudulent information I provide, or my omission of any material fact, may subject me to criminal, civil, or administrative penalties for fraud, false statements, false claims, or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

Signature _____ Date _____

Printed Name _____

Title _____

Email to: info@texasbackinbusiness.com
Fax to: 281-677-3922

Or mail back to:
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