



Rehire Furloughed Employees Grant Program Application

About the Grant

Purpose: To support businesses that rehire employees furloughed due to COVID19; up to \$2,000 for each full-time equivalent employee

Application Deadline: As soon as possible but no later than 12-31-21 or until funds exhausted

Criteria: Local business who furloughed one or more employees due to COVID19 for a minimum of two months (60 days) between 3/15/20 - 1/31/21 during a period the business was not covered by PPP. Eligible for up to \$2,000 per rehire. The rehire must be steadily employed during the subsequent and consecutive pay periods for a minimum of three months (90 days) after the date of rehire. If the length of furlough was less than 60 days, the applicant may qualify for a pro rata award based on the furloughed period.

Grant Funds may be used for:

- Working capital expenses (e.g., rent, utilities, payroll, insurance, inventory)
- Business related professional services (e.g., accounting, marketing, software, legal assistance)
- Employee Training

Grant Funds may not be used for:

- Refinance existing debt;
- Down Payment for other financing;
- Funds cannot be used to pay owner
- Interest expense, automobile expenses, supplies, existing credit card liabilities, meals, entertainment, travel, and uniforms

Application

Business Information

Business Name *

DBA (if any)

Principle Business Address *

City *

State *

Zip code *

Phone number *

Date Business Established *



Have you received a PPP Loan or Grant? *

Yes

No

Number of Full Time Equivalent Employees Applying For *

Full-Time Equivalent employee (FTE) is an employee who works 30 hours or more, on average, each week. The hours of employees who work less than 30 hours are calculated as proportions of a single FTE employee and aggregated.

Owner or Representative Contact Information

First name *

Last name *

Email address *

Street address *

Address line 2

City *

State *

Zip code *

Phone number *

Required Documentation

- Copy of your W-9
- Current Business Tax Receipt
- Proof of Employees prior to COVID-19
 - Example - Florida Q1 2020 RT-6- Employer Quarterly Report or Payroll Reports showing employees by name as of quarter prior to furlough
- Proof of Employee positions furloughed due to COVID-19
 - Example - Florida Q2 2020 RT-6- Employer Quarterly Report or Payroll Reports showing furloughed positions due to COVID-19
- Proof of Rehire three or more months after furlough dates
 - Example - 3 months of payroll reports that document the employee was returned to the payroll two or more months following the furlough date (or that a new employee was brought on to fill the furloughed position), and remained on the payroll for 3 months following rehire
- PPP confirmation if received

Attach Required Documentation *

- W-9
- Current Business Tax Receipt
- Proof of Employees prior to COVID-19
- Proof of Employee positions furloughed due to COVID-19
- Proof of Rehire three or more months after furlough dates
- PPP confirmation, if received

Applicant Certification

I certify that I am authorized to submit this application on behalf of the business, that the information provided in this application is true and accurate to the best of my knowledge and ability, and that no false or misleading statements have been made in order to secure approval of this application. I authorize the Citrus County Chamber of Commerce or its agents to make all inquiries deemed necessary to verify the accuracy of the information contained herein. Additionally, as the applicant, I agree that in the event that money is awarded pursuant to this application, the Chamber or its agent shall be entitled to access and audit such records as may be necessary to prevent fraud in this process or ensure compliance with federal requirements and that the funds will be used solely for activities outlined as eligible in this application. Under penalties of perjury, I declare that I have read the foregoing application and that the facts stated in it are true. I understand that knowingly making a false written declaration may be charged as felony of the third degree.

Applicant Name *

Applicant Title *

Applicant Signature *

Date *

Send completed application with all required documentation to:

Rehire Furloughed Employees Grant Program

c/o Citrus County Chamber of Commerce

915 N. Suncoast Blvd.

Crystal River, FL 34429

Questions? Email CitrusFurloughRehire@gmail.com