



One Buncombe Fund Grant Application

Welcome to the **One Buncombe Fund Grant Application**.

The One Buncombe Grant Fund helps small for-profit businesses based in Buncombe County and affected by COVID-19 reopen, retain, and rehire staff through grants. Please note that funds are limited and not all who apply will be awarded. The eligible grant amount will be based on firm size:

Up to \$2,500 for firms retaining or re-hiring **one position** (including owner positions, sole proprietors, and other solopreneurs)

Up to \$5,000 for firms retaining **more than one position**

Applications must be completed and submitted no later than 11:59 PM on Sunday, October 31.

Applications submitted after the deadline or that are incomplete (i.e. missing required uploads) will not be considered.

If you run into any problems with the application, please check the FAQs and documentation at the Fund website, <http://mountainbizworks.org/1bf>. You can also schedule an appointment with a technical assistance provider through that site. *The help desk will close at 5pm on Friday, October 29.*

All applications completed and submitted before the deadline will be considered equally. There is no benefit to rushing an application. We encourage applicants to take their time to ensure a complete and well-supported request.

Before you begin:

Please make sure to review the program's [Eligibility Criteria](#) before proceeding with an application.

- Please also make sure you have prepared and/or gathered the following required documents:
 - 2020 Financials - 2020 Tax Return, 2020 Schedule C, or 2020 Profit & Loss Statement
 - A schedule listing the positions to be rehired and/or retained and the corresponding wage rates.

When you complete and submit the application, you will receive a copy of the application via email as a confirmation it was submitted.

Thank you for the important work you do in the community and we look forward to receiving your application for the One Buncombe Grant Fund.

Note: You must use the "back" button provided in the form in order to navigate around the form. Pressing

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1. Eligibility Certifications

Please carefully read and answer the following certifications, to ensure that you are eligible to receive grant funding. **You must be able to answer "yes" for all of the following certifications in this section to be eligible.**

If you have questions about eligibility, or any other part of the form, FAQs and technical assistance are available at <https://mountainbizworks.org/1bf>; a direct link to the [Eligibility Criteria document can be found here](#).

My business has NOT previously received a One Buncombe Fund Grant. *

Yes

No

My business is a for-profit business based in Buncombe County *

Yes

No

My business has been in existence since at least January 1, 2021 *

Yes

No

My business has no more than 25 Full Time Equivalent employees *

Yes

No

I understand that if I receive an award, my business name, award amount, and number of jobs supported will be publicly announced, and I agree to this disclosure. All other information will be kept strictly confidential. *

Yes

No

If awarded, I agree to report on the financial condition of the business, jobs retained and re-hired (including submission of relevant payroll records), and use of funds received 6 months following the receipt of funds *

Yes

No

I understand and agree that if I am awarded a grant, the grant funds will only be used for business expenses incurred for business activities in Buncombe County, and which support the retention and/or hiring of the employee positions listed in this application. *

Yes

No

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2. Individual Applicant (Authorized Representative)

Please provide us with the following information about the person who is authorized to fill out and submit this form:

Name *

First Name

Last Name

Title *

Email *

example@example.com

Phone Number *

Area Code

Phone Number

Gender *

Race/Ethnicity *

Current Military Status *

Primary Language *

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3. Business/Organization Information

Business Name *

Please include DBA if applicable

Please provide a brief description of your business (max 250 characters) *

0/250

Website

Date of Incorporation *



Month Day Year

Legal Status of Business *

Business Tax ID or EIN *

SSN or ITIN if sole proprietor or self-employed

Industry (Please choose the industry that best fits your business) *

Agriculture

Artists, Musicians & Other Performers

Bars, Restaurants, Cafes, Bakeries, & Other Foodservice

Breweries/Distilleries/Wineries

Construction and Trades

Educational and Childcare Services

Entertainment/Event Venues and Event Services

Galleries & Museums

Gyms and Fitness

Health Services

Manufacturing

Media

Personal Care (e.g. Salons, Spas, Wellness)

Professional Services

Real Estate

Recreation

Retail

Technology

Transportation

Business Mailing Address *

Street Address

City

State

Zip Code

Business County

Physical Address is Same as Mailing Address

Business Physical Address (if different from mailing address)

Street Address

City

State

Zip Code

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4. Funding Request and Jobs Impact

How much are you requesting from the One Buncombe Grants Fund, and how will that help you retain or re-hire living wage positions in your business? As a reminder: firms retaining or re-hiring one position (including owner positions), including sole proprietors and other solopreneurs may receive up to \$2,500; businesses retaining and/or rehiring 2 or more employees may receive up to \$5,000. These grants are tied directly to helping to retain and re-hire Living Wage positions in Buncombe County.

A) Funding Amount Requested *

Please enter a number between 500 - 5000; only numerical values, no dollar signs or commas needed.

B) How many FTE (Full Time Equivalent) employees do you currently have (as of February 1, 2021)? *

1 full time employee = 1 FTE; 1 part-time employee = .5 FTE

C) How many Living Wage jobs will you be able to re-hire with the support of this grant? *

D) How many Living Wage jobs will you be able to retain with the support of this grant? *

E) Living Wage Jobs Retained/Re-Hired Detail Spreadsheet

Please download and fill out a copy of this spreadsheet - [LINK HERE](#) - and upload it below, to provide details for our review team about the Living Wage positions that will be retained and/or re-hired through your requested grant funding.

F) How will receiving these funds help you retain/re-hire these positions? (Max 600 Characters) *

0/600

E) Please briefly summarize your plan to make it through the next 6 months. (Max 600 Characters) *

0/600

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5. Financials & COVID Impact

Eligibility Issue

JDS Issue

2020 Tax Issue

P&L Issue

A) What were your 2020 Annual Gross Revenues (total income)? *

Comments

B) What were your 2020 Annual Expenses (total expenses)? *

C) Please describe how COVID-19 has negatively affected your business, including any necessitated changes in operations. (Max 600 characters) *

0/600

D) What is the current operating status of your business? *

Temporarily closed

Open, but with reduced hours or offerings

Maintaining regular hours and offerings

Permanently closed

F) If you have received any other COVID disaster relief grants or forgivable loans, please check the box(es) next to any funding you've received

PPP First Draw

PPP Second Draw

EIDL Advance Grant

Buncombe County Tourism Jobs Recovery Fund Grant

NC MURR Grants

NC Job Retention Grant

North Carolina Arts Council Artist Support Grant (ASG)

RETOOLNC Grant

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6. Business Leadership Information

A. Ownership details: Please list all individuals with a 20% or greater ownership stake in the company. Include name, ownership percentage, and city and state of primary residence. *

I.e. Jane Smith, 75%, Swannanoa, NC

B. Is the business minority-led (50% or more of the owners or directors identify as persons of color)? *

Yes

No

C. Is the business woman-led (50% or more of the owners or directors identify as women)? *

Yes

No

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Certifications of Accuracy and Signing of Application Form

Anything else you would like to share? (max 250 characters)

0/250

I certify that receiving this grant will enable my business to retain or re-hire employees at or above the Living Wage rate and retain those positions for at least 6 months. (The Just Economics 2020 Living Wage rate is \$15.50/hr without employer-provided health insurance, \$14.00/hr with employer-provided health insurance; owner-employees are exempt from the Living Wage requirement.) *

I certify that all of the information submitted in this application is valid, accurate and complete. A photographic or facsimile copy of this authorization may be deemed to be equivalent of the original. *

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