



INSTRUCTIONS

1. Fill out this application form completely and accurately, any incomplete applications will be returned.
2. Please provide the following with your application:
 - Current city of chino business license
 - Current identification not expired (i.e., driver's license or State of California identification card). (For all adult household members) or birth certificates - For all household members under the age of eighteen (18). If over 18 and a full-time student copy of School ID.
 - Rent or lease agreement
 - Business bank account
 - Three (3) most recent and consecutive savings and checking account statements, ALL pages. (For all adult household members)
 - Current business certificate of liability insurance policy: Declaration Page
 - Two (2) most recent federal income tax returns: Complete (all pages) 1040s, WITH W-2s (Schedule C, if self-employed, for all adult household members)
 - Three (3) most recent & consecutive paycheck stubs (For all adult household members)
 - Employee payroll list with current salary amounts for all employees
 - Other income documentation (check those that apply for all household members):
 - Social Security/SSI (submit copy of award letter or direct deposit bank statement)
 - Retirement/Pension (submit copy of retirement check/statement)
 - Disability/SSDI (Statement from Employment Development Department and Letter from Doctor on letterhead showing how long you will be on disability)
 - Temporary Aid for Needy Families (TANF)
 - Rental Receipts (submit copies)
 - Proof of income for ALL persons living in household over the age of 18
 - Unemployment (Claim Approval Letter)

You are applying to receive assistance through the City of Chino to maintain your business during the COVID-19 pandemic. To qualify for assistance, as a microenterprise business, you must have five or fewer employees (including yourself) at the time of receiving assistance and have an annual household income below 81% of the Area Median Income. If you do not believe you qualify as a microenterprise business, please advise us immediately. Please be assured that this information will remain confidential and will be used only to meet the record-keeping requirements of the U.S. Department of Housing and Urban Development (HUD) who is providing the CDBG-CV funds.

Please complete the information listed below and return to the Economic Development Division at 13220 Central Avenue, Chino CA 91710, or via email to ckennedy@cityofchino.org.

APPLICANT/CO-APPLICANT INFORMATION

Applicant Name:	
Co-Applicant Name:	
Applicant Address:	
City:	
State:	
Zip Code:	
Email Address:	
Applicant Phone Number:	
Co-Applicant Phone Number:	

BUSINESS INFORMATION

Business Legal Name:	
Doing Business As (DBA Name):	
Business Address:	
City:	Chino
State:	CA
Zip Code:	
Type of Business:	Sole Proprietorship Partnership C-Corp S-Corp LLC Independent Contractor Non-Profit (501C) Other
Business Tax ID #:	
Business Employer Identification #:	
Business DUNS#:	
Name of Business Owner:	

NEEDS ASSESMENT

Monthly Lease/Rent Amount:	
Average Current Monthly Payroll:	
Business Owner Household Income:	
Monthly Inventory Cost:	
Monthly Insurance Cost:	
Other Monthly Fixed Cost: (Describe)	
Average Monthly Revenue (PRE-PANDEMIC):	
Average Monthly Revenue (DURING-PANDEMIC):	
Number of full-time (FT) employees:	
Number of part-time (PT) employees:	
Are all property taxes/tax bills paid and current?	YES NO
Did you apply or receive other government assistance?	YES NO
If yes, which agency provided assistance?	
Amount of assistance received?	

Please list the positions of those **CURRENTLY** employed by your business:

Position	Full Name	Number in Household	Part Time/ Full Time	Annual Household Income
1. Business Owner/				
2.				
3.				
4.				
5.				

To qualify, income must be at or less than HUD 2020 Income Limits below:

# of persons	1 person Less than	2 persons Less than	3 persons Less than	4 persons Less than	5 persons Less than	6 persons Less than	7 persons Less than	8 persons Less Than
Extremely low	\$15,850	\$18,100	\$21,720	\$26,200	\$30,680	\$35,160	\$39,640	\$44,120
Very Low Income	\$26,400	\$30,150	\$33,900	\$37,650	\$40,700	\$43,700	\$46,700	\$49,700
Low Income	\$42,200	\$48,200	\$54,250	\$60,250	\$65,100	\$69,900	\$74,750	\$79,550

Please **check** the appropriate race category and *Hispanic ethnicity if applicable (optional)*:

White

Black/African American

Asian

American Indian/Alaskan Native

Native Hawaiian/Other Pacific Islander

American Indian/Alaskan Native & White

Asian & White

Black/African American & White

American Indian/Alaskan Native & Black/African American

Other Multi-Racial

Hispanic

Female-head of household?

YES

NO

ACKNOWLEDGMENT AND DISCLAIMER

I Certify under penalty of perjury that the income and household statements made on this form are true and correct. The information you provide on this form is for Economic Assistance Program purposes only and will be kept confidential. I have read and understand the program information.

Applicant Signature

Date

Co-Applicant Signature

Date

CITY OF CHINO | MICROENTERPRISE BUSINESS GRANT APPLICATION CHECKLIST



To assist the City of Chino staff in reviewing and processing your application as quickly as possible, the following documents are required for A complete application submittal:

Please submit COPIES (we cannot be responsible for originals) of the following items:

- CURRENT CITY OF CHINO BUSINESS LICENSE
- CURRENT IDENTIFICATION not expired (i.e., driver's license or State of California identification card). **(For all adult household members)** or BIRTH CERTIFICATES - For all household members under the age of eighteen (18). If over 18 and a full-time student copy of School ID.
- RENT OR LEASE AGREEMENT
- CURRENT PROFIT/LOSS STATEMENT
- THREE (3) MOST RECENT & CONSECUTIVE SAVINGS AND CHECKING ACCOUNT STATEMENTS, ALL pages. **(For all adult household members)**
- CURRENT BUSINESS CERTIFICATE OF LIABILITY INSURANCE POLICY: Declaration Page
- TWO (2) MOST RECENT FEDERAL INCOME TAX RETURNS: Complete (all pages) 1040s, WITH W-2s (Schedule C, if self-employed) **(For all adult household members)**
- THREE (3) MOST RECENT & CONSECUTIVE PAYCHECK STUBS **(For all adult household members)**
- EMPLOYEE PAYROLL LIST WITH CURRENT SALARY AMOUNTS FOR ALL EMPLOYEES
- OTHER INCOME DOCUMENTATION (check those that apply for all household members):
 - Social Security/SSI (submit copy of award letter or direct deposit bank statement)
 - Retirement/Pension (submit copy of retirement check/statement)
 - Disability/SSDI (Statement from Employment Development Department and Letter from Doctor on letterhead showing how long you will be on disability)
 - Temporary Aid for Needy Families (TANF)
 - Rental Receipts (submit copies)
 - Proof of income for ALL persons living in household over the age of 18
 - Unemployment (Claim Approval Letter)

This checklist is only provided for a participant's information and use during the preparation of the application. All forms listed on this page are required for business assistance applications