



Downtown Albany Resiliency Forgivable Loan Program

I. APPLICANT INFORMATION			
Business must have a brick-and-mortar location situated within the DABID boundaries			
Applicant Name:		Date:	
Property Address:		Zip:	
Phone:		E-mail Address	
II. BUSINESS INFORMATION			
Business:			
Business Type:			
<u>Revenue</u>	<u>Percent Decrease in Revenue</u>		
January 1 – March 31, 2019 Revenue:			
January 1 – March 31, 2020 Revenue:			
April 1 – June 30, 2019 Revenue:			
April 1 – June 30, 2020 Revenue:			
July 1- September 30, 2019 Revenue:			
July 1 – September 30, 2020 Revenue:			
October 1 – December 31, 2019 Revenue:			
October 1 – December 31, 2020 Revenue:			
Date business re-opened (or will re-open) after shutdown:			
Number of employees when fully staffed:			
Number of employees working now:			
III. LOAN INFORMATION			
<p>Items fully funded through the BID's Downtown Albany Business Stabilization Grant, the Capitalize Albany Small Business Adaption Program, the Albany County COVID-19 Small Business Grant Program, and the Raising the NYS Bar Restaurant Recovery Program are not eligible expenses under this program. If applying for items that were partially funded through one of the above-mentioned grants, please identify the remaining balance you are requesting for each item and provide supporting documentation.</p> <p>Have you or do you expect to receive any of the above-listed grant funds?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>			



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If yes, please list the funded items, uses and reimbursement amounts.

Loans are capped at \$1,250 for retail, personal-care, and counter-service restaurants/cafes, and at \$2,500 for full-service restaurants.

Please check all items you are applying for reimbursement for:	Total Cost	Grant amount requested plus a description of what specifically will be purchased with the grant money.
<input type="checkbox"/> Fixed Costs (business mortgage, rent, commercial insurance, state & local permit fees)	Total Cost: Amount Requested:	Intended Purchases:
<input type="checkbox"/> Technology or Marketing (online sales/ordering, contactless payment systems, reservation systems, etc.)	Total Cost: Amount Requested:	Intended Purchases:
<input type="checkbox"/> Perishable Goods	Total Cost: Amount Requested:	Intended Purchases:
<input type="checkbox"/> Personal Protective Equipment (PPE) and/or Cleaning/Disinfecting Supplies	Total Cost: Amount Requested:	Intended Purchases:
<input type="checkbox"/> Interior Alterations to Comply with CDC and NYS Health and Safety Guidelines	Total Cost: Amount Requested:	Intended Purchases:
<input type="checkbox"/> Improvements that expand takeout/delivery options	Total Cost: Amount Requested:	Intended Purchases:
<input type="checkbox"/> Improvements that will allow business to continue operating through the winter (filtration system upgrades, food heaters, outdoor patio heaters, weatherization upgrades, insulated delivery bags, etc.)	Total Cost: Amount Requested:	Intended Purchases:

Other reasonable uses will be considered where the business can demonstrate that without the intervention of this forgivable loan program, their economic impacts will be compounded.

Documentation supporting all fixed costs must be provided. A minimum of one price quote for all other items must be submitted as well.

Using Downtown Albany partners and suppliers when possible is encouraged.



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Please initial each line below to affirm the following:

- _____ I am a NYS business in good standing with local, state, and federal taxing and licensing authorities.
- _____ My business is engaged in activities that are legal under New York and federal law.
- _____ My business has a brick-and-mortar location within the DABID boundaries.
- _____ My business is not currently in bankruptcy and I have not filed for bankruptcy in the past 18 months.
- _____ I have been a registered New York State business since at least September 1, 2019.

If there are funds remaining, businesses that opened after September 1, 2019 will be considered

Please enclose the following with your application:

- Supporting documentation for revenue decrease.
- Copies of invoices for fixed costs, if applicable.
- Cost estimates/quotes, if applicable.
- A copy of the current property tax bill or deed if applicant owns the property.*
- For lessees, a legally valid and binding lease for a period that, at a minimum, does not expire prior to anticipated project completion date.*

**If you previously applied for the BID's Business Stabilization Grant you do not need to attach a copy of your property tax bill or lease as we already have it on file*

IV. SIGNATURE

Printed Name:		Sign:	
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If you received the BID's Downtown Albany Business Stabilization Grant you must have satisfied your loan forgiveness requirements prior to receiving funds through the Resiliency Forgivable Loan program.

Applicant must also not have any outstanding invoices with the BID.

Applications are due Friday, February 5, 2021 at 4:00 PM. Completed applications can be e-mailed to Kate Medhus at kmedhus@downtownalbany.org, mailed to Kate at Downtown Albany BID, 21 Lodge St, Albany NY 12207, (must be postmarked by February 5, 2021), or dropped off by appointment during the first week of February by emailing or calling Kate Medhus at 518-465-2143 x110.

OFFICE USE ONLY					
APP No.		RECEIVED DATE:		ACCEPTED BY:	
REVIEW COMMITTEE DATE:		ACTION:			
CHECKLIST COMPLETE:		YES _____		NO _____	