PALM BEACH COUNTY | HOUSING & ECONOMIC DEVELOPMENT

Business Grant Application

Military Trail Emergency Business Interruption Grant • Maximum Award: Up to $5,000

Business information

Legal business name:

_____

DBA or trade name:

_____

Physical business address and suite:

_____

City and ZIP:

_____

Business type: ☐ For-profit ☐ Nonprofit

Owner or authorized representative and title:

_____

Telephone: _____ Email: _____

Date operations began at this location: _____ Number of Employees: _____

Federal employer identification number (EIN):

_____

Sunbiz document number or exemption:

_____

Search for your business registration through the with Florida Division of Corporations' search records page:

Search Records - Division of Corporations - Florida Department of State

Business tax receipt number(s) or exemption:

_____

Use the link below to look up your local Business Tax Receipt (BTR) through the Palm Beach County Tax Collector's website:

Palm Beach County Constitutional Tax Collector > Business Tax

Vendor registration number with Palm Beach County:

_____

Use the Palm Beach County Vendor Search to look up your business and find your vendor registration number.

Palm Beach County Vendor Search

If your business in not currently registered as a Palm Beach County vendor, please check the box below and a staff member will help you register through Vendor Self-Service (VSS).

☐ Not a PBC Vendor

Closure impact

Current status: ☐ Open ☐ Partially operating ☐ Temporarily closed

Describe how the closure affected operations or customer or delivery access:

_____
_____
_____
_____

Review Documentations and Forms

☐ I have attached the latest filed business tax return

Latest filed tax year: _____
Annual gross business revenue: $_____

☐ Fully completed and signed W-9 Form. Please use the link below to access the form:

Form W-9 (Rev. March 2024)

Grant request and certifications

Grant requested (up to the calculated amount or $5,000, whichever is less): $_____

Intended use of funds: _____

Insurance or other assistance covering the same costs, if any: _____

Certifications and Affirmations

☐ I certify that I am authorized to submit this application on behalf of the applicant business.

☐ I certify that the information provided in this application and the information provided in all supporting documents and forms is true and accurate.

☐ I affirm that the award and payment of grant funds are subject to the sole and absolute discretion of the Palm Beach County Board of County Commissioners without recourse. By submitting this application, I waive any and all claims related to this Business Grant Program and specifically agree to indemnify and hold the County, its employees, officers, agents, and representatives harmless from any and all claims which may be in any way related to any Business Grant Program award, payment, and/or denial.

☐ I affirm that current road closure and economic uncertainty make the grant necessary to support my ongoing operations for my business.

☐ I affirm that the tax documents are identical to those I have submitted to the Internal Revenue Service.

Acknowledgements:

☐ I acknowledge that, if this grant application is approved, I will make a good faith effort to retain or rehire worker/s.

☐ I acknowledge that, if this grant application is approved, Palm Beach County will calculate grant amount using the tax returns.

☐ I acknowledge that all information and documentation submitted in support of this grant application are true, accurate, and complete. If Palm Beach County determines, before or after payment, that grant funds were obtained through false or fraudulent statements, misrepresentation, or concealment of material information, the business agrees to repay the full amount of grant funds received upon written demand by the County.

☐ I acknowledge that, if this grant is approved, any amount my business receives may be considered taxable by the Internal Revenue Service.

☐ I acknowledge that, if this grant application is approved, my business may be subject to an audit.

☐ I acknowledge that, if this grant application is approved, my name, my business name, and my grant award amount may be made public by Palm Beach County.

Signature: _____

Printed name and title: _____

Date: _____