

Washington Hospitality Association

ADVISORY NETWORK WEBINARS

ADVISORY NETWORK BRAA

SERIES W. RICK BRAA

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ADVISORY NETWORK BRAA

ADVISORY BRAA WORKING WASHINGTON GRANT #2

PRESENTER

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WORKING WASHINGTON GRANT #3

CARES Funding—must be distributed by 12/31/2020 \$70 mm Fund:

- \$20 mm for businesses previously applied for previous round
- \$50 mm fund for new applications for Round 3 Grant

PRIORITY

- Most impacted industries
- Significant cumulative impacts



NOT First come first served

- Applications received until Dec. 11 will all be considered together. All applications submitted by 12/11 are evaluated
- \$5mm or less prioritized first and if anything is left, then greater than \$5mm

WHAT THE FUNDS CAN BE USED FOR

- The grant can only cover expenses or costs incurred due to COVID-19 and were necessary to continue business operations.
- Cover the economic injury incurred due to COVID-19, the related public health measures and significant, cumulative impacts
- Can't overlap with expenses funded by other grants or programs such as PPP and EIDL—use this grant on NEW expenses
- Can't be used for government expenses e.g. taxes, fines, etc.

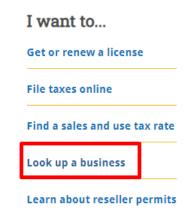
WHAT TO HAVE READY BEFORE APPLYING

- W-9: https://www.irs.gov/pub/irs-pdf/fw9.pdf if you don't have a copy
- Copy of <u>Washington State CURRENT</u> Gov't ID e.g. drivers license
- Dollar amount of any grant or program money
 - PPP dollar amount
 - EIDL dollar amount
 - State, county, or city
- Number of employees laid off
- Gross Revenue for 2019 and 2020
- Clearly describe your business and the impact of how government mandates have affected your business
- UBI number
- NAICS code

NAICS AND UBI

Go to DOR site https://dor.wa.gov/

- Click Lookup a business
- Click Tax account toggle switch to on
- Enter business name, click I'm not a Robot and hit enter
- Click on your business name and the information will populate





TIPS FOR APPLICATION

- Site is Clunky and Buggy
- Safely ignore "Note to Submit" box as the box presents when clicking Submit
- EDIT, SAVE, SUBMIT often the site doesn't save automatically
- You can save and resume later if you don't have time to complete everything at once
- Application should take 15-20 minutes to complete

Tips from the State:

- Apply during off-peak hours such as early morning or late evening
- Double-check your spelling of your email and keep an eye on both your inbox and spam folder for follow-up emails.
- If you're applying on behalf of multiple businesses, you'll need a separate UBI number and separate e-mail address for each. You can apply for a business if it has a separate UBI number. And if you do apply for more than one grant, the application system will require a separate e-mail address for each application.
- Don't be afraid to ask for help. You can email <u>bizgrants@commerce.wa.gov</u> or call 360.725.5003

CREATE YOUR ACCOUNT

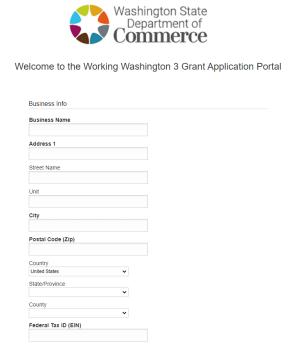
http://startup.choosewashingtonstate.com/working-washington-round-3/



Welcome to the Working Washington 3 Grant Application Portal

Login Now:	New to the Grants Portal?
Username	Create Your Business Profile
Password Sign in Reset or create password	In order to be considered for funding, the first step in for you to introduce yourself and tell us about your business. Please click on the "Create an account Now" button below to start. You will not be able to edit your profile after submission, so please ensure you have entered accurate information (including email address) when completing the registration form.
	You will then receive an email notification from the Washington State Department of Commerce with login information, which will ask you to click on a lin and create a password, and give you access to the portal and the application form.
	Create an account now
	♣ FLUXX
D	rivacy Policy Accessibility

CREATE YOUR ACCOUNT



Primary	Contact Info		
First Nan	ne		
Last Nam	e		
Work Pho	ne		
Work Pho	ne Extension		
E-mail			
Cancel	Submit Request		

VERIFICATION OF INFORMATION



Email message to verify and begin

Welcome to Washington Works III Small Business Grant Program. Please follow the below URL to verify your account:

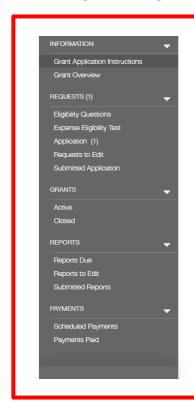
Verification Link: https://workingwa3.fluxx.io/verify/c75c4275813e12de99f7d82a20abc1cd

Link to Application: https://workingwa3.fluxx.io

CREATE PASSWORD



NAVIGATION TILE TRACKS PROGRESS



Frease ensure you have and hubbling an heodions of the application.

APPLICATION SUBMISSION INSTRUCTIONS

Please read the application instructions carefully to successfully submit a complete application.

In order to apply for the Working Washington 3 Grant Program, you will need to complete the following steps:

- 1. Review Grant Application Instructions on this page
- 2. Review the Grant Overview (you can access by clicking "Grant Overview" in the panel on the left side of your screen). Once you've reviewed the Grant Overview, scroll to the bottom of the page and click "Apply for a grant"
- 3. Start the Grant Application (Please note that your application will be executed in three main stages (which you can also access from the panel on the left side of your screen):
- Eligibility Questions once you answer yes or no to this question, you must click "save" then click "submit." A "note for submit" box will appear, you can leave it halak and click "Ok"
- Expense Eligibility Test to answer this questions, click "edit" on the upper right hand corner of your screen. Once you answer yes or no to this question, you must click "save" then click "submit." A "note for submit" box will appear, you can leave it blank and click "Ok."
- Application to complete the application, click "edit" on the upper right hand corner of your screen. Once you answer all questions, you must click "save" then click "submit." A "note for submit" box will appear, you can leave it blank and click "Ok."

Please note, the application does not save automatically. As you progress through these three stages, you will need to Edit, Save, and Submit each stage of your application, using the buttons on the right side of your screen (at the top to edit, and at the bottom to save or submit). Your application will be moved down the list of stages as you complete each stage.

Once you submit your completed application you will receive an email confirming your submission or you can review your application through the Submitted Application on the left hand side under the heading "Requests". Please only submit one application for your business. Applications will be reviewed on an on-going basis and we will contact you once an award decision has been made.

If you have questions about the grant application, please contact: bizgrants@commerce.wa.gov

If you encounter technical issues with Fluxx Grant Platform, please contact: workingwa3@ndconline.org

ADDITIONAL NOTES:

When done editing, always "Save" your request using the button at the top before returning to the main page. This ensure you can return to continue editing. Only click the "Submit" button when the page is complete. Once you submit, you will no longer be able to edit

BUSINESS BACKGROUND

Business Backgro	ound Information
What was the Gross Business Income for your business for 2019?	\$
Businesses generating le	ess than \$5 million in gross business revenue in 2019 will be prioritized over businesses exceeding \$5 million in gross revenue.
What was the Gross Business Income for your business for 2020?	\$
Businesses generating le	ess than \$5 million in gross business revenue in 2020 will be prioritized over businesses exceeding \$5 million in gross revenue.
Is your business a tribal-member owned business operating within a reservation only?	No v
Please provide the Unified Business Identifier Number (UBI) associated with your businesses State of Washington business license.	
Please provide your business' NAICS Code	
For instructions and to	find your NAICS code, click here.
Please briefly describe	the business and its products/services:

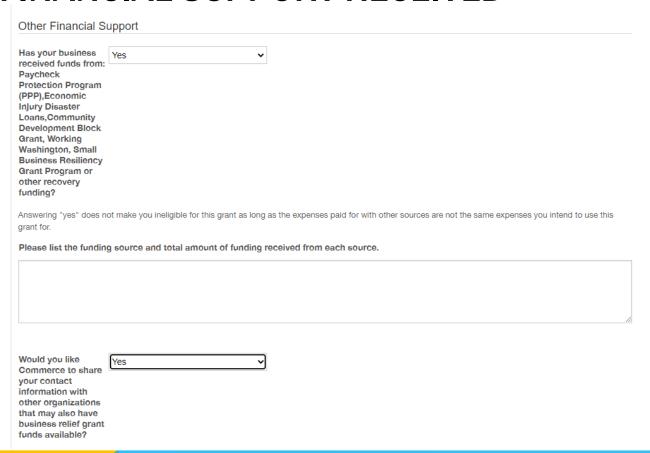
IDENTIFY IF MINORITY STATUS

Business Status. For the purpose of this questions, minority s defined as African American/Black, Hispanic/Latino, Asian American, Pacific Islander, Vative Hawaiian, Alaska Native, or Vative American. Check all that apply.	If 51% of business is minority-owned, ploase self-identify. Minority is defined as African American/Black, Hispanic/Latino, Asian American, Pacific Islander, Native Hawaiian, Alaska Native, or Native American. Other individuals may be found to be socially and economically disadvantaged on a case-by-case basis. Minority owned businesses are those where					
□ LGBTQ+ Owned □ Minority Owned □ Veteran Owned □ Woman Owned □ Certified OMWBE□ Not Applicable □ Decline to answer	minorities: Own at least 51% of the business and show contribution of capital and expertise; Control the managerial and day-to-day operations. Check all that apply.					
	□ Black or African American □ Not Applicable		Hispanic or Latino Decline to Answer		☐ American Indian ☐ Two or more or Alaska Native races	•
	Does your business primarily serve one or more of the following communities? Check all that apply.					
	☐ Multi-ethnic persons	Low-income persons	☐ Tribal members	☐ Veterans	□ Not Applicable	

BUSINESS IMPACT

Business Impact	
Have you reduced your staffing capacity since March 1, 2020 due to COVID-19?	•
How worried are you about your business surviving this challenge?	•
Was your business required to close by government mandate following March 1, 2020 and on November 17, 2020	•
Is your business still closed or operating at reduced capacity due to government mandate?	*
Has your business applied through an Associate Economic Development Organization (ADO) on any prior grant opportunity?	•
Do you operate your business from a commercial location?	~

FINANCIAL SUPPORT RECEIVED



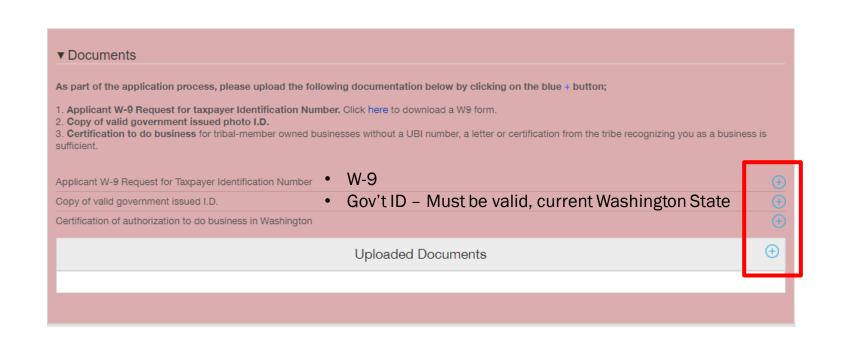
WHY YOU NEED THE MONEY

Use of Funds	
Why is this grant funding important to your business?	
Is there anything else you would like us to know as part of your application Please provide any additional information you'd like for us to know.	17
 Use this box if there was no revenue in 2 	·019
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CERTIFY APPLICATION AND SIGN

Application Certifications
Certification I
☐ I certify that I am authorized to submit this proposal on behalf of the business. Select the checkbox to confirm your certification.
Certification II
☐ I certify this business does not unlawfully discriminate with regard to employees, volunteers, delivery of programs or services, or clients served based on age, sex, religion/creed, race, color, national or ethnic origin, sexual orientation, gender identity or expression, disability, marital status, military or veteran's status, pregnancy or genetic information. Select the checkbox to confirm your certification.
Certification III
☐ I certify the information provided is accurate and duly reflects the applicant's business activities. I attest that, if awarded the Working Washington 3 Grant funding, the award will be used to cover expenses incurred between March 1, 2020, and through December 2020, due to financial hardship caused by the COVID-19 parled emic and that this funding will be used for expenses not covered by other COVID-10 related public or private funding sources. I acknowledge my business may be asked and may be required to provide receipts or additional documentation for up to 6years following the receipt of any grant funding. If any of the expenses paid with grant money are found ineligible according to Federal Treasury or application guidelines, I agree to reimburse Commerce the full amount of the grant award. Select the checkbox to confirm your certification.
Certification IV
☐ I certify that my business is active and does not have any compliance or regulatory issues with state or federal agencies, as of March 1st, 2020. Select the checkbox to confirm your certification.
Signature
Please Note: By entering data into the next field (Name, Title, and Date) you are: 1.Representing that you are an officer or other agent duly authorized to enter into legally binding agreements. 2.Agreeing to submit this grant application in an electronic form which shall be bound by its contents as an electronic transaction. 3.Agreeing that your insertion of data into these following fields constitutes an electronic signature Please type your name, title, and date in the box below.

• Keep good records of expenditures of funds



- Once you have submitted a complete application you will receive <u>verification via email</u> <u>asking for any additional information</u>
- If anything else is needed you will <u>receive an email</u> to log in and edit and clarify whatever is needed
- Funded by 12/30/20 target 12/21/20





THANK YOU!

