

Item # 3.4

Approval of COVID-19 Disaster Emergency Grant Applications

COVID 19 Disaster Emergency Grants - Approved 2020

Board Approval Date	Name	City	Type	Grant Amount
9/23/20	A1 Express Inc.	Buffalo	Service	4,619.35
9/23/20	ABC Learn and Play 2, Inc.	Buffalo	Service	9,087.92
9/23/20	Arts Services Initiative of WNY, Inc.	Buffalo	Not for Profit	1,582.52
9/23/20	Black Rock Historical Society	Buffalo	Not for Profit	1,264.50
9/23/20	Explore Buffalo Inc.	Buffalo	Not for Profit	9,626.00
9/23/20	Kirchmyer & Goode Physical Therapists, P.C.	West Seneca	Health Care	4,791.83
9/23/20	MidCity Office	Buffalo	Service	6,168.49
9/23/20	Peaceprints of WNY	Buffalo	Not for Profit	7,046.86
9/23/20	Theodore Roosevelt Inaugural Site Foundation	Buffalo	Not for Profit	4,498.00

48,685.47

October 2020 Grant Applicants

Name	Address	City	Type	Grant Amount	Distress	MBE	VOB	WBE	Use of grant funds
Amy Lynn's Dance Studio	4168 North Buffalo Road	Orchard Park	Retail	\$5,331.87	No	No	No	Yes	Purchase of PPE only
Beyond Boundaries Therapy For Kids	6490-17 Taylor Road	Hamburg	Service	\$1,328.28	Yes	No	No	Yes	Purchase of PPE and Installation of Fixtures
Buffalo and Erie County Botanical Gardens Society	2655 South Park Avenue	Buffalo	Not for Profit	\$3,107.70	Yes	No	No	No	Purchase of PPE and Installation of Fixtures
Buffalo Center for Arts and Technology, Inc.	1221 Main Street	Buffalo	Not for Profit	\$5,474.36	Yes	No	No	No	Purchase of PPE and Installation of Fixtures
Buffalo String Works, Inc.	286 Lafayette Ave	Buffalo	Not for Profit	\$1,685.82	Yes	No	No	No	Purchase of PPE and Installation of Fixtures
Children First Christian Childcare & Preschool	4820 Seneca Street	West Seneca	Service	\$10,000.00	No	No	No	Yes	Purchase of PPE and Installation of Fixtures
Computer SOS, Inc.	1505 Cleveland Drive	Buffalo	Service	\$7,195.65	Yes	No	No	No	Purchase of PPE and Installation of Fixtures
Eclips Hair Salon, Inc.	3939 Seneca St	West Seneca	Retail	\$1,742.10	No	No	No	Yes	Purchase of PPE only
Explore & More Children's Museum	130 Main St	Buffalo	Not for Profit	\$9,846.00	Yes	No	No	No	Purchase of PPE and Installation of Fixtures
Martin House Restoration Corp.	143 Jewett Parkway	Buffalo	Not for Profit	\$8,660.13	Yes	No	No	No	Purchase of PPE and Installation of Fixtures
Safe Mobility Service Rides, LLC	4185 Seneca Street	West Seneca	Service	\$2,192.51	No	Yes	No	No	Purchase of PPE only
Shell Fab	3260 Clinton Street	West Seneca	Advanced Manufacturing	\$8,565.63	No	No	No	Yes	Purchase of PPE and Installation of Fixtures
Trace Assets Protection Service LLC	27 Clyde Avenue	Buffalo	Service	\$1,232.37	Yes	Yes	No	Yes	Purchase of PPE only
USA Occupational Services	902 Jefferson Ave	Buffalo	Service	\$1,000.00	Yes	Yes	No	Yes	Purchase of PPE and Installation of Fixtures

October 2020 Grant Applicants

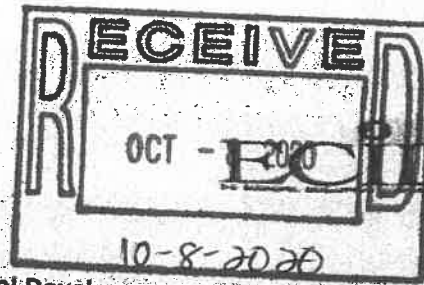
West Side Community Services, Inc.	161 Vermont Street	Buffalo	Not for Profit	\$1,776.97	Yes	No	No	No	Purchase of PPE only
Western New York Book Arts Collaborative, Inc.	468 Washington Street	Buffalo	Not for Profit	\$2,396.20	Yes	No	No	No	Purchase of PPE and Installation of Fixtures

\$71,535.59

Grant Application Overview

APPLICANT	GRANT AMOUNT	PROGRAM PRIORITIES	STAFF RECOMMENDATION
Amy Lynn's Dance Studio	\$5,331.87	WBE ✓	Recommended for Funding
<p>Synopsis:</p> <p>Amy Lynn's Dance Studio (hereafter Amy Lynn's) is a woman-owned business (sole proprietorship) located in the Village of Orchard Park. Amy Lynn's has been providing quality dance lesson to the youth in Orchard Park and surrounding communities for 23 years. Amy Lynn's provides a safe, nurturing atmosphere for young girls (mostly) to enhance their physical and emotional development. The benefits of dance include improved coordination and balance, enhanced socialization, self-esteem, and creativity.</p> <p>Amy Lynn's has been severely impacted by the NYS emergency declaration. The Studio was closed to in-person dance instruction for five (5) months, reducing the monthly income to near zero. Although Amy Lynn's provided remote lessons March thru July to help student's cope with social isolation, dance is best experienced in-person. Amy Lynn's reopened to in-person classes in August at half capacity due to a reduction in fall enrollment. The future of the business, in the short-term, is uncertain due to the continued restrictions imposed by the emergency declaration. Amy Lynn's is seeking financial relief from the ECIDA's Disaster Emergency Grant Program to help offset PPE expenditures (signage, masks, disinfectant, air purifier, sanitizer, etc.) to allow the business to safely continue operation.</p>			

ERIE COUNTY COVID-19 DISASTER EMERGENCY GRANT APPLICATION



Thank you for your interest in the Erie County Industrial Development Agency's Disaster Emergency Grant Program to assist small businesses and not-for-profits with purchasing Personal Protective Equipment (PPE) and fixtures necessary to prevent the spread of Novel coronavirus, COVID-19. We suggest you begin by reading the Grant Guidelines that can be found here: <https://www.ecidany.com/documents/Grant%20Guidelines%208-18-20.pdf>. Please complete and return this Application along with the required documentation. Questions - contact us at 716.856.6525 x. 126

COMPANY INFORMATION

1.	Applicant Legal Name:	Amy Lynn's Dance Studio		
2.	Applicant Address:	4168 North Buffalo Rd OPNY 1427		
3.	Legal Structure:	<input type="checkbox"/> C-Corp <input type="checkbox"/> S-Corp <input type="checkbox"/> LLC <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Not-for-Profit		
4.	Applicant Contact Name:	Amy Lynn Minias		
5.	Contact Phone Number:		Contact Email Address:	amylynn@dancestudio.com
6.	Type of Business:	Please Describe	Dance Studio	
7.	Please submit a completed W-9, a signed copy of the organization's 2019 Federal Tax Return including all schedules or a 2019 CPA Audited Financial Statement and an interim Profit & Loss Statement and Balance Sheet through at least June 30, 2020.			
8.	Number of years in business in Erie County		<input checked="" type="checkbox"/> ATTACHED	23
9.	Ownership: Privately held companies, please attach a description of the company's ownership structure, including the % of ownership for each individual and entity owning 20% or more of the company. Not for Profit organizations, please attach a list of the organization's officers and directors.		<input type="checkbox"/> ATTACHED	
10.	Ownership Type: Definitions of the following ownership types can be found in Appendix A of this application. Please read Appendix A before answering this question. Is your business (check all that apply):	<input type="checkbox"/> Minority-Owned <input checked="" type="checkbox"/> Woman-Owned <input type="checkbox"/> Veteran-Owned		
11.	Primary North American Industrial Classification System (NAICS) Code of the Company. Please provide at least the three-digit code, but the six-digit code is preferable			
12.	What share of the company's product or service is sold within Erie County:	(Dance Studio) 100%		
13.	Miscellaneous Questions:			
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is the Company or any of its principals or Board Members presently the subject of any litigation, or is any litigation threatened, which would have a material adverse effect on the Company's financial condition?		
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Has the Company or any of its principals ever settled a debt with a lending institution for less than the full amount outstanding?		
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Has the company, its affiliates or any of its principals ever filed bankruptcy, a creditor's rights or receivership proceeding, or sought protection from creditors?		

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



- Yes No Is the Company or any of its principal's delinquent on property, personal, and/or employment taxes?
- Yes No Has the Company or any of its principals or Board Members ever been convicted of any felony or misdemeanor, other than a minor traffic violation, or are any charges pending?
- Yes No Has the Company, its affiliates, or any of its principals, been cited for a violation of federal, State, or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution, or operating practices?
- Yes No Are there any outstanding judgments or lien pending against the Company, its affiliates, or any of its principals other than liens in the normal course of business? Amount: \$
- Yes No Has the company been accused of false or misleading statements, or been the subject of a proceeding or had any allegations made against them, by any federal, state, local agency or authority including but not limited to the SEC, FCC, FDA, or OSHA? If yes, please attach a written explanation to this application.
- Yes No Is the Applicant in compliance with the provisions prohibiting wage discrimination on the basis of gender as found in federal law, including the Equal Pay Act of 1963, Title VII of the Civil Rights Act of 1964, Federal Executive Order 11246 of September 24, 1965 and New York State Labor Law Section 194 (together "Equal Pay Law").

14. Qualifying Questions:

- Yes No Is the Applicant a small business or small not-for-profit corporation with not more than 50 employees? *- one employee*
- Yes No Is the Applicant a business or not-for-profit with a primary place of business located in Erie County, New York?
- Yes No Is the Applicant's primary place of business located in a highly distressed area? (see map at <https://www.ecidany.com/documents/HighlyDistressedAreaMap7-2-2013.pdf>)
- Yes No Is the Applicant a Minority-Owned, Women-Owned or Veteran-Owned Business?
- Yes No Was the Applicant in business prior to March 7, 2020?
- Yes No Was the PPE expenditure made, or is it contemplated to be made, on or after March 7, 2020? *for PPE YES*
- Yes No Has the Applicant applied for and/or received grant funding from another IDA and/or state or federal funding source to support the purchase of PPE identified in the Project budget below? *I did not receive a grant - I applied for a loan*
- Yes No Has the Applicant been negatively impacted by the COVID-19 Pandemic? *I have to pay back*

Narrative:

- A. Provide a summary of all PPE equipment and fixture purchases previously purchased and the reason for their purchase.
- B. Provide a summary for all future PPE and fixture purchases the entity will be making, including an explanation of how it will be used (if applicable).

ERIE COUNTY COVID-19 DISASTER EMERGENCY GRANT APPLICATION



EMPLOYMENT INFORMATION

Existing Jobs – A full-time equivalent job equals any combination of two or more part-time jobs that, when combined, constitute the equivalent of a job of at least 35 hours per week.

16. Indicate how many existing full-time equivalent jobs the Applicant and its related entities employ *just me*

Grant Request Budget

17.	PPE and/or Fixture Installation Description Items or Vendor Contract (attach additional sheet as necessary)	For FUTURE PPE/Fixtures you plan to purchase – list and attach proposal copies	For PAST PPE/Fixture actual expenditures – list and attach paid receipts
	<i>please see attached sheet</i>		
	Total Vendor Expense	\$	\$
	GRANT REQUESTED (<i>grant will be calculated by multiplying eligible costs x 90%</i>)	\$	\$

CERTIFICATION

18. *Amy Lynn Minias*, being duly sworn, state that I have read and understand all the questions and answers contained in the forgoing application and the documents that I have attached hereto; that I have supplied full and complete information in the answer to each question herein to the best of my knowledge, information and belief; and that all information I have supplied is true and correct. I further understand that false statements or intentional omissions made in this Application or in connection with the verification process may have an adverse consequence to my application/submission to the Erie County Industrial Development Agency.

In addition, I acknowledge that the Agency is subject to New York State's Freedom of Information Law (FOIL). I understand that all grant information and records related to this application are potentially subject to disclosure under FOIL subject to limited statutory exclusions.

Name of Company Official Completing Worksheet:	Title:	Date Completed:
<i>Amy Lynn's Dance Studio</i>	<i>owner/sole</i>	<i>10-7-2020</i>
Signature: <i>Amy Lynn Minias</i>	<i>prop.</i>	

October 6, 2020 - Amy Lynn's Dance Studio - ECIDA Grant Application

My name is Amy Lynn Minias and I have owned and operated Amy Lynn's Dance Studio for the past 23 years. Since March 2020, I have been shut down due to COVID19. I am a single business woman and I am a sole proprietor- I am the only employee. It is worth noting I am finishing up my last semester at SUNY College at Brockport earning my Masters Degree in Dance. I am a very hard worker and I have returned back to college after 20 years to finish this degree.

The cornerstones of my business are kindness, respect, acceptance, unity, team work, and hard work. Amy Lynn's Dance Studio offers quality instruction for preschoolers through adults in tap, jazz, ballet, lyrical & pointe dancing. Whether recreational or serious study, all students are welcome to learn in a healthy and exciting atmosphere. I am the only teacher at the studio, making sure that each child receives the individual attention and training they deserve. I offer classes that teach the understanding of art of dance, building courage, confidence, discipline, self-esteem, & creativity. These attributes, when developed, can lead to a lifetime of success in numerous areas. All of our students perform in our annual June Recital which is held at the Orchard Park High School. Students are invited to perform at our Fantasy Island Dance Showcase, a Holiday Christmas Show at Father Baker Manor Nursing Home, & at the Festival of the Arts in Orchard Park. We also performed at Macys a shop for a cause for the American Heart Association, Local Dance Competitions, & The Erie County Fair. I have lived in Orchard Park my entire life and my roots are within the community. I am a member of the Chamber of Commerce in Orchard Park and I am in charge of the entertainment for the Festival of The Arts Festival in Orchard Park (formally Quaker Arts Festival) every year. I am very active in my community. I am proud to live in Erie County.

I re-opened on August 10, 2020 for some summer dance camps and I was at half capacity with only half of my students. And sadly, even though the Orchard Park School District has re-opened, many of my students have chosen to home school and not participate in any activities outside the home. I have about half my students enrolled for the fall.

I have been in touch with my landlord throughout the pandemic explaining to her that having my business shut down so abruptly from March until August is such a long time to not receive income and it was not my fault. Although my landlord was sympathetic, she is unwilling to reduce the rent in any way shape or form. My

rent is \$2500 a month and I was only able to pay \$1500 a month during the time I was shut down. Unfortunately, for small business there wasn't an executive order to freeze rent payments during the pandemic. Enclosed I received a copy of the back rent for the past 6 months which is \$5100. I was hoping to receive this grant to help catch up with my rent and have the funds to be able to pay for my rent in case we get shut down again during the winter months. And at half capacity it is very difficult to make this high rent payment.

As a business owner, I have overcome many struggles and obstacles, and I have made a great deal of sacrifices for it. Honestly, COVID19 has been the most devastating tragedy I've ever experienced as a small business owner. I have worked too hard my entire adult life building this business to lose it. Words cannot describe what I have been going through during the past several months of the shut down. It is the worst feeling in the world having your business on the verge of being taken away and yet you did nothing to contribute to it. Many small business owners are very scared and feel overlooked during this global health crisis. I am applying for a grant for PPE so I can stay afloat and not lose what I've worked the past 23 years for. I also need to keep my students and parents all the necessary safety measures to keep everyone healthy during this terrible health crisis - COVID19.

I would be so truly grateful to receive this grant. With all the masks, face shields, lysol, lysol wipes, soap, temperature checker, PPE Signs, New Window Signs, germ guardian air filter machine, floor decals to keep dancers and parents 6 feet apart, disinfecting floors weekly, and additional paper towels required for this next year I will also need the additional funds to provide the necessary PPE. I also painted the entire studio to keep everything fresh and clean for my students. I am hoping to receive a grant between \$10,000 - \$20,000, otherwise I will have to apply for another loan. This past year I have taken \$20,000 out for student loans so I can finish my Masters Degree in dance as I will need a second job to survive after this Covid19 disaster. Thank you for your consideration.

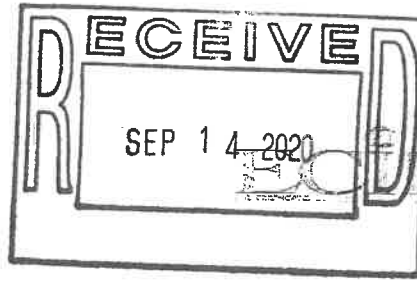
Very Truly Yours,

Amy Lynn Minias

Grant Application Overview

APPLICANT	GRANT AMOUNT	PROGRAM PRIORITIES	STAFF RECOMMENDATION
Beyond Boundaries Therapy for Kids	\$1,328.28	Highly Distressed Area√ WBE√	Recommend Funding
<p>Synopsis:</p> <p>Beyond Boundaries Therapy for Kids (hereafter Beyond Boundaries) provides occupational therapy, physical therapy, speech and language pathology, special education and counseling services to children with disabilities (birth-school age). Beyond Boundaries has two (2) offices in Erie County; however, they are only seeking assistance for clients serviced through their Niagara Street (Buffalo) location. The disaster emergency has negatively impacted the business operation and radically changed the way Beyond Boundaries provides service to their clients. As of March 17, Beyond Boundaries was forced to discontinue all face-to-face (home, daycare, school, etc.) sessions, which resulted in a significant reduction of revenue generating services. In late March, Beyond Boundaries pivoted to telehealth services for very young children. At this time, Beyond Boundaries staff have not been cleared by NYS to return to home therapy; however, they are now able to provide in-person services at a community location adhering to CDC COVID-19 protocol. The reduced in services coupled with the increased expenses necessary to transition to telehealth (technology, software, administrative costs, etc.) has put a strain on the business. Beyond Boundaries Niagara Street location is requesting funding assistance from the ECIDA to support previously purchased PPE (masks, sneeze guards, cleaning/disinfectant, thermometer, partitions) as well as future PPE necessary to keep staff and clients safe.</p>			

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



Thank you for your interest in the **Erie County Industrial Development Agency's Disaster Emergency Grant Program** to assist small businesses and not-for-profits with purchasing Personal Protective Equipment (PPE) and fixtures necessary to prevent the spread of Novel coronavirus, COVID-19. We look forward to working with you to evaluate your project for possible financial assistance. To begin this process, please complete and return this *Application* along with required documentation.

COMPANY INFORMATION

1.	Applicant Legal Name:	Beyond Boundaries: Therapy for Kids *
2.	Applicant Address:	Mailing: 6490-17 Taylor Rd Hamburg, NY 14075 ^{Service location 490 N. ...}
3.	Legal Structure:	<input type="checkbox"/> C-Corp. <input type="checkbox"/> S-Corp <input checked="" type="checkbox"/> LLC <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Not-for-Profit
4.	Applicant Contact Name:	Mary Frances Bayer
5.	Contact Phone Number:	716-440-0661
	Contact Email Address:	BayerMFG@beyondboundaries-
6.	Type of Business:	Please Describe Home/community based pediatric therapy services
7.	Please submit a completed W-9, a signed copy of the organization's 2019 Federal Tax Return including all schedules or a 2019 CPA Audited Financial Statement and an interim Profit & Loss Statement and Balance Sheet through at least June 30, 2020.	
		<input checked="" type="checkbox"/> ATTACHED
8.	Number of years in business in Erie County	11 years
9.	Ownership: Privately held companies, please attach a description of the company's ownership structure, including the % of ownership for each individual and entity owning 20% or more of the company. Not for Profit organizations, please attach a list of the organization's officers and directors.	<input checked="" type="checkbox"/> ATTACHED
10.	Primary North American Industrial Classification System (NAICS) Code of the Company. Please provide at least the three-digit code, but the six-digit code is preferable	621 340
11.	Company's Annual Revenue:	0
12.	What share of the company's product or service is sold within Erie County:	100%
13.	Miscellaneous Questions:	
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principals or Board Members presently the subject of any litigation, or is any litigation threatened, which would have a material adverse effect on the Company's financial condition?	
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals ever settled a debt with a lending institution for less than the full amount outstanding?	
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the company, its affiliates or any of its principals ever filed bankruptcy, a creditor's rights or receivership proceeding, or sought protection from creditors?	
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principal's delinquent on property, personal, and/or employment taxes?	

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



- Yes No Has the Company or any of its principals or Board Members ever been convicted of any felony or misdemeanor, other than a minor traffic violation, or are any charges pending?
- Yes No Has the Company, its affiliates, or any of its principals, been cited for a violation of federal, State, or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution, or operating practices?
- Yes No Are there any outstanding judgments or lien pending against the Company, its affiliates, or any of its principals other than liens in the normal course of business?
Amount: \$
- Yes No Has the company been accused of false or misleading statements, or been the subject of a proceeding or had any allegations made against them, by any federal, state, local agency or authority including but not limited to the SEC, FCC, FDA, or OSHA? If yes, please attach a written explanation to this application.
- Yes No Is the Applicant in compliance with the provisions prohibiting wage discrimination on the basis of gender as found in federal law, including the Equal Pay Act of 1963, Title VII of the Civil Rights Act of 1964, Federal Executive Order 11246 of September 24, 1965 and New York State Labor Law Section 194 (together "Equal Pay Law").

14. Qualifying Questions:

- Yes No Is the Applicant a small business or small not-for-profit corporation with not more than 50 employees?
- Yes No Is the Applicant a business or not-for-profit with a primary place of business located in Erie County, New York?
- Yes No Is the Applicant's primary place of business located in a highly distressed area? (see map at <https://www.ecidany.com/documents/HighlyDistressedAreaMap7-2-2013.pdf>)
- Yes No Is the Applicant a Certified Minority or Certified Women-Owned Business?
- Yes No Is the Applicant a Certified Service-Disabled Veteran-Owned Business?
- Yes No Was the Applicant in business at least one year prior to March 7, 2020?
- Yes No Was the PPE expenditure made, or is it contemplated to be made, on or after March 7, 2020?
- Yes No Has the Applicant applied for and/or received grant funding from another IDA and/or state or federal funding source to support the purchase of PPE identified in the Project budget below?
- Yes No Has the Applicant been negatively impacted by the COVID-19 Pandemic?

Narrative:

- 15.**
 - A. Provide a summary of all PPE equipment and fixture purchases previously purchased and the reason for their purchase.
 - B. Provide a summary for all future PPE and fixture purchases the entity will be making, including an explanation of how it will be used (if applicable).
 - C. Briefly discuss Applicants ties to the community and the impact of your work/service in Erie County.

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



EMPLOYMENT INFORMATION

Existing Jobs – A full-time equivalent job equals any combination of two or more part-time jobs that, when combined, constitute the equivalent of a job of at least 35 hours per week.

16.	Indicate how many existing full-time equivalent jobs the Applicant and its related entities employ in all ERIE COUNTY LOCATIONS	# Jobs in Erie County	30
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Grant Request Budget

17.	PPE and/or Fixture Installation Description Items or Vendor Contract (attach additional sheet as necessary)	Est. Cost of PPE/Fixtures (attach copy of proposal)	Actual Expenditure on PPE/Fixtures (attach paid receipts)
	See attached		
	Total Vendor Expense	\$	\$
	GRANT REQUESTED (grant will be calculated by multiplying eligible costs x 90%)	\$	\$

CERTIFICATION

18. I, Mary Frances Bayer, being duly sworn, state that I have read and understand all the questions and answers contained in the forgoing application and the documents that I have attached hereto; that I have supplied full and complete information in the answer to each question herein to the best of my knowledge, information and belief; and that all information I have supplied is true and correct. I further understand that false statements or intentional omissions made in this Application or in connection with the verification process may have an adverse consequence to my application/submission to the Erie County Industrial Development Agency.

In addition, I acknowledge that the Agency is subject to New York State's Freedom of Information Law (FOIL). I understand that all grant information and records related to this application are potentially subject to disclosure under FOIL subject to limited statutory exclusions.

Name of Company Official Completing Worksheet:	Title:	Date Completed:
Signature: <u>Mary Frances Bayer</u>	Co-owner	9/10/2020

Narrative A

Summary of PPE equipment and fixture purchases previously purchased and the reason for their purchase.

Masks – Supplies including material, web interfacing, elastic, vinyl, thread and pipe cleaners were purchased to produce re-usable masks for use by all Beyond Boundaries therapists. Speech and language pathologists required special masks that allowed their mouths to be seen through a vinyl opening for the purposes of visual modeling for sound production. A cost saving decision was made to pay a Beyond Boundaries provider to make these masks as opposed to ordering these more expensive masks for therapists. All therapists are required to wear a mask at all time during service sessions with children and families. **Mask supply total: 191.52**

Additional disposable masks were purchased for family members who may come to a session without a mask. Having masks for parents and caregivers who do not have them will allow us to provide our therapy sessions. Per our guidance all adults must wear a mask at all times during therapy sessions.

Disposable masks: 49.74

Hand sanitizer – Hand sanitizer is essential for providers and families to appropriately clean their hands before and after interacting with children. Therapists entering daycare settings and preschools often do not have access to running water and soap. This necessitates the use of hand sanitizer. Hand sanitizer was purchased from a city distillery in gallon-sized containers.

Sanitizer: 80.00

Spray bottles were purchased as volunteers filled the spray bottles with hand sanitizer.

Spray bottles: 216.93

Sneeze guards – To date three sneeze guards were purchased to be used during in-person services with children. The sneeze guard allows for increased protection and acts as a clear barrier between the child and the therapist while they are working in a 1:1 setting. Currently, these three sneeze guards are used in the office space at Niagara Street.

Sneeze shields: 158.85

Cleaning materials and disinfectants- CDC approved disinfectants, hand soap, disinfectant wipes, and paper towels were purchased and provided to all therapists to carry with them during community-based therapy sessions. Additionally, disinfectant wipes, hand soap and paper towels were purchased for the Niagara street facility-based locations for daily cleaning procedures, including wiping down all high-touch surfaces used during facility-based therapy sessions.

Hand Soap – 5.38

Paper towels – 33.48

Wipes- 122.29

PPE storage boxes- safety clip boxes were purchased to store and carry PPE, cleaning products in. These boxes are necessary as items need to be stored safely (inaccessible to children) in the Beyond Boundaries Niagara street facility treatment rooms.

Storage boxes- 23.97

Thermometers- All employees need to take their temperature prior to the start of the work day to be compliant with Beyond Boundaries policy. Many employees had working thermometers to use at their homes; however, three employees did not. Three oral thermometers were purchased for these employees. Additionally, thermometers are needed for facility locations as it is mandated that therapists take the temperature of each child and family member entering a Beyond Boundary Facility. Three touchless thermometers were purchased for the Niagara Street Beyond Boundaries facility.

Thermometers (5): 254.00

Partitions/Barriers (mat) -Mats were purchased for use as sitting on a carpeted area during therapy sessions is less hygienic as the carpet cannot be disinfected between office visits. For this reason mats were purchased to be placed on the floor at the Niagara street address to act as a barrier. These mats can easily be cleaned between sessions and allow the facility to operate following CDC guidance.

Mats (2) – 59.98

Proposal of FUTURE PPE equipment and fixture purchases

Masks –100 pcs Mouth Covers sold by ISAMANNER on Amazon	COST: 49.74
Hand sanitizer – four gallons sold by Buffalo Distilling Company	COST: 80.00
Thermometers- Two touchless thermometers sold by Buffalo Pharmacy	COST: 150.00

Narrative B

Summary of FUTURE PPE equipment and fixture purchases the entity will be making including explanation of how it will be used.

Masks – Additional disposable masks will need to be purchased for family members who may come to a session without a mask. Having masks for parents and caregivers who do not have them will allow us to provide our therapy sessions. Per our guidance all adults must wear a mask at all times during therapy sessions. To date, our supply of disposal masks is low and we anticipate ordering additional disposal masks by the end of September 2020. **Disposable masks (100): 49.74**

Hand sanitizer – Hand sanitizer is essential for providers to appropriately clean their hands before and after interacting with children. Therapists entering daycare settings and preschools often do not have access to running water and soap. This necessitates the use of hand sanitizer. Hand sanitizer was purchased from a city distillery in gallon-sized containers. Our current supply of hand sanitizer for employees to use during therapy sessions is projected to last until the end of September 2020. More hand sanitizer will be ordered at this time.

Sanitizer (4 gallons): 80.00

Thermometers- As Beyond Boundaries will begin to use identified community facilities that are following CDC guidelines, including public libraries and community centers, therapists will need to take temperatures of children and families attending sessions. Three additional touchless thermometers will need to be purchased to enable temperatures to be taken at these sites. To be purchased as soon as possible.

Thermometers (2): 150.00

Narrative C

Beyond Boundaries: Therapy for Kids is proud to provide comprehensive evaluations and therapy services to children and families in the Western New York area since 2009. We offer services in the areas of speech and language pathology, occupational therapy, physical therapy, social work, special instruction, family training and assistive technology. Beyond Boundaries: Therapy for Kids was proud to receive certification as a Minority-and Women-Owned Business Enterprise in April 2020.

At Beyond Boundaries our mission is to perform the highest quality, comprehensive services for children and families in Western New York in a manner that reflects our care and concern as well as our desire to promote the highest functional potential. We do so while supporting and training therapists in family-centered service provision. We strive to address the individual needs of each family through consultative or direct interventions. Our team of forty-two pediatric therapists provides therapy services throughout Erie County.

Annually, we deliver over 24,000 individual therapy sessions to children with special needs, primarily aged birth to five. Prior to the COVID-19 pandemic these sessions were home and community based throughout Erie County. State and Erie County guidance has allowed us to continue face-to-face sessions, as appropriate, with children and families. However, this has meant shifting away from primarily home-based service, to providing services at our facilities and/or other CDC compliant centers (e.g. daycares, Head Start centers, preschools and libraries). All services are free of charge to all families who qualify.

Based on our current caseload distribution, 50% of the services we provide through Beyond Boundaries: Therapy for Kids are to children and families in highly distressed areas. Twenty-five of our 42 therapists work in highly distressed areas. Additionally, one of our two center-based service locations is in a highly distressed area (490 Niagara Street Buffalo, NY 14201 -census track 71.01). Children come to this center for evaluations and on-going therapy services. We also have providers entering Head Start centers and childcare centers across the city of Buffalo. In the city of Buffalo we offer services to children in the following census track areas: 2, 14.02, 15, 16, 17, 18, 23, 24, 27.2, 28, 29, 31,33.01, 33.02, 34, 35, 36, 37, 40.01, 41, 42, 43, 44.02, 50, 59, 60, 61, 68, 68.01, 69.01, 69.02, 71.01, 71.02, 166, 168, 171.

Expenses (current and projected) reflect PPE that is/will be directly used to support the population in highly distressed areas as noted above.

Beyond Boundaries: Therapy for Kids provides services to children with disabilities (birth through school-aged). Our agency provides occupational therapy, physical therapy, speech and language pathology, special education and counseling services. We provide services in children's homes, preschools and daycare centers. We receive payments for services from NYS Department of Health and Erie County. Our agency is reimbursed per session, and we pay employees based on the number of sessions they perform (fee-for-service basis). In addition, we also pay some employees hourly for administrative duties.

On **March 16th** 2020 many employees had called to inform our agency that families were cancelling sessions due to the families discomfort with allowing people into their homes. On March 16th most area schools were closed. This means that all services to be provided in a school setting were cancelled for the day. Due to regulations in place at that time, providers were not permitted to see children at alternate locations. As of **March 17th** our agency, after receiving guidance from the New York State Department of Health, discontinued all face-to-face service sessions for the safety and well being of children, families and employees. *Overall, the week of March 16th resulted in a significant reduction of services. Our agency performed 5-10% of our typical revenue generating operations.* During this period we continued to pay hourly wages to administrative staff and the employer portion of health insurance contributions. During this week these wages paid to administrative staff were more than typical as administrative staff worked additional hours addressing questions and establishing new procedures.

Beyond Boundaries was granted permission from the New York State Department of Health to begin telehealth services to one faction of the children we service (birth –three year old children) for the week of **March 23rd**. This group of children accounts for roughly 40% of our work. In order to meet state and federal compliance with performing telehealth services, Beyond Boundaries needed to follow specific and detailed guidance to maintain HIPPA compliance and adhere to Medicaid guidance. For this reason, it took time and resources for our agency to shift from face –to-face services to telehealth services. Financial investments were made related to a HIPPA compliant platform for telehelath, electronic

signature verification, software, computers to perform virtual services, and administrative costs to create forms, procedures and provide staff training. In addition to these financial investments, this process of transitioning to teletherapy took time, which again resulted in lost payment for services that were unable to be rendered. Due to the shift in services from face-to-face to telehealth, there has been roughly 30-35% reduction in work due to restrictions noted below. During this week (March 23rd) our agency was not able to provide services to children in the other faction of our population of children serviced (preschool and school-aged children) as we were not given permission to perform sessions via telehealth and all face-to-face services had been suspended. *Overall, during the week of March 23rd Beyond Boundaries was operational at about 25-30% of revenue generating activities. Additionally, administrative and technology costs were higher.*

On **March 28th** BB received notification that telehealth services could be performed for the other faction of the population we service (preschool/school-aged children). Again, investments were made in technology and administrative pay to assure that we had compliant systems in place to perform telehealth services. By **April 6th** systems and consent forms were in place for our agency to start providing these services. Many families took several weeks to complete the necessary paperwork to begin services, so many services were not able to be performed until mid-April. Again we estimate that 30-35% of this faction of services were not able to be performed based on the aforementioned restrictions for families.

On June 23rd, 2020 Erie County issued further guidance that therapist would not be able to return to homes for therapy sessions, but that agencies would be able to offer families and children in-person services if the family were to transport the child to an agency location or another community location (e.g. public library) that was adhering to CDC COVID-19 protocol. Additionally, if a child is attending a preschool or daycare program that is following CDC COVID-19 protocol therapists would be able to offer services in this location if deemed appropriate by the daycare/preschool. Beyond Boundaries shifted our typical in-home service delivery model to facility based. We prepared an extensive facility health and

safety plan and secured the necessary PPE, cleaning supplies and fixtures to begin offering services at a community location. We also provided health and safety trainings and supplied therapists who are entering daycares and preschools with PPE (soap, paper towels, masks, sanitizer, wipes, etc.). Despite the ability to services children at facility-based and daycare/preschool settings many families have been unable to continue services due to limited resources (including transportation and time). As a result Beyond Boundaries revenue continues to be lower than expected and expenses to secure space, materials and PPE as well as additional support to develop policies and provide trainings have increased expenditures.

Our agency heavily relies upon face-to-face interaction for revenue generating services. Questions regarding return to work protocol and the length of time schools and daycare remain closed or admit therapists significantly impact the viability of our agency. Additionally, we continue to incur technology fees as well as increased administrative cost to support remote work, provide technology and to support new systems. We will also need to invest in PPE and fixtures and administrative support to navigate a return to work protocol. For these reasons, loan to support Beyond Boundaries during these uncertain time is requested to assure we can continue to be a viable service providing agency post Covid-19.

Beyond Boundaries attempted to apply for a low interest line of credit in late March, anticipating difficulty sustaining operations. We received a letter on April 23rd denying this line of credit.

We continue to operate to provide necessary services to children with disabilities and their families as well as to ensure our employees have some means of earning income; however, we are unsure of what is to come. Fewer children are being referred for services and evaluated due to the nature of telehealth and inherent limitations. Due to COVID-19 overall referrals for new therapy cases are *down by about 50%*.

Beyond Boundaries is currently operating at about 70% for revenue generating activities and is paying increased sums of money for administration and technology related activities as well as rent and PPE.

We have seen about a 30% reduction in revenue generating services provided due to nature of telehealth. Reasons for this include:

Many families were unsure of how their very young child would attend to services provided virtually and opted not to continue intervention in this way.

Many families did not have the technology required to participate in teletherapy.

Many families were continuing to work full time and did not have the ability or interest in asking their child care provided to participate in telehealth with the child.

Further, many families opted to perform services at a lower frequency via telehealth than they were previously receiving face-to-face. For example a child may have received special instruction services four times per week face-to-face and the family has opted to only participate in this service at a frequency on one time per week via telehealth.

Many preschools, universal pre-K programs and daycare centers remain closed. This limits the ability of our providers to enter these locations to service children. We are currently unable to see children in their homes (as we did prior to COVID-19) and rely on parents' ability to transport children to a Beyond Boundaries facility or community setting. This has lead to an overall decrease in services for our agency.

Additional expenses incurred

Increase in unemployment insurance*

Legal fees to navigate through new regulations

Accounting fees to navigate through new regulations

Postage to mail informational and therapeutic materials to families

Technology (hardware and software) to provide remote services to families/children

Administrative support to develop protocols and train providers

PPE and fixtures

*not certain of this as of yet

Grant Application Overview

APPLICANT	GRANT AMOUNT	PROGRAM PRIORITIES	STAFF RECOMMENDATION
Buffalo and Erie County Botanical Gardens Society, Inc.	\$3,107.70	Highly Distressed ✓	Recommended for Funding
<p>Synopsis:</p> <p>The Buffalo and Erie County Botanical Gardens Society (hereafter Botanical Gardens), located in South Buffalo, is a national historic site, education center and tourist destination full of exotic horticulture treasures from around the world. Prior to the NYS disaster emergency, the Botanical Gardens was thriving with over 140,000 people visiting the site annually to enjoy the architecture and the indoor and outdoor garden sanctuaries as well as the special events. The Botanical Gardens has been negatively impacted by COVID-19, which forced the facility to close for four (4) months during the spring, which is their busiest time of the year. In addition to lost earned revenue (admissions, gift shop sales, school field trips, art classes, membership, etc.), two (2) of the Botanical Gardens largest annual fundraisers were canceled as well as dozens of weddings and private events. The Botanical Gardens reopened in July at a limited capacity and educational programming is being conducted virtually. The Botanical Gardens is requesting support from the ECIDA's Disaster Emergency Grant Program to offset actual PPE expenditures (masks, disinfectant, hand sanitizer and touchless dispensers, signage, and partitions for gift shop) that were required to reopen the facility safely and prevent community spread of the coronavirus.</p>			

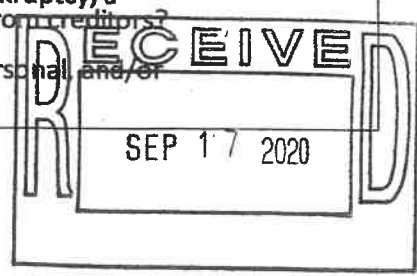
ERIE COUNTY COVID-19 DISASTER EMERGENCY GRANT APPLICATION



Thank you for your interest in the **Erie County Industrial Development Agency's Disaster Emergency Grant Program** to assist small businesses and not-for-profits with purchasing Personal Protective Equipment (PPE) and fixtures necessary to prevent the spread of Novel coronavirus, COVID-19. We look forward to working with you to evaluate your project for possible financial assistance. To begin this process, please complete and return this *Application* along with required documentation.

1.10

COMPANY INFORMATION	
1.	Applicant Legal Name: Buffalo and Erie County Botanical Gardens Society, Inc.
2.	Applicant Address: 2655 South Park Ave Buffalo, New York 14218
3.	Legal Structure: <input type="checkbox"/> C-Corp. <input type="checkbox"/> S-Corp <input type="checkbox"/> LLC <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Sole Proprietorship <input checked="" type="checkbox"/> Not-for-Profit
4.	Applicant Contact Name: Brittany Zandi 203
5.	Contact Phone Number: 716-827-1584 ext. 2003 Contact Email Address: bzandi@buffalogardens.com
6.	Type of Business: Please Describe 501(c)(3) not for profit organization
7.	Please submit a completed W-9, a signed copy of the organization's 2019 Federal Tax Return including all schedules or a 2019 CPA Audited Financial Statement and an Interim Profit & Loss Statement and Balance Sheet through at least June 30, 2020. <input checked="" type="checkbox"/> ATTACHED
8.	Number of years in business in Erie County 120
9.	Ownership: Privately held companies, please attach a description of the company's ownership structure, including the % of ownership for each individual and entity owning 20% or more of the company. Not for Profit organizations, please attach a list of the organization's officers and directors. <input checked="" type="checkbox"/> ATTACHED
10.	Primary North American Industrial Classification System (NAICS) Code of the Company. Please provide at least the three-digit code, but the six-digit code is preferable
11.	Company's Annual Revenue:
12.	What share of the company's product or service is sold within Erie County: %
13.	Miscellaneous Questions:
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principals or Board Members presently the subject of any litigation, or is any litigation threatened, which would have a material adverse effect on the Company's financial condition? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals ever settled a debt with a lending institution for less than the full amount outstanding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the company, its affiliates or any of its principals ever filed bankruptcy, a creditor's rights or receivership proceeding, or sought protection from creditors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principal's delinquent on property, personal and/or employment taxes?



EMERGENCY GRANT APPLICATION



	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals or Board Members ever been convicted of any felony or misdemeanor, other than a minor traffic violation, or are any charges pending?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company, its affiliates, or any of its principals, been cited for a violation of federal, State, or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution, or operating practices?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are there any outstanding judgments or lien pending against the Company, its affiliates, or any of its principals other than liens in the normal course of business? Amount: \$</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the company been accused of false or misleading statements, or been the subject of a proceeding or had any allegations made against them, by any federal, state, local agency or authority including but not limited to the SEC, FCC, FDA, or OSHA? If yes, please attach a written explanation to this application.</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant in compliance with the provisions prohibiting wage discrimination on the basis of gender as found in federal law, including the Equal Pay Act of 1963, Title VII of the Civil Rights Act of 1964, Federal Executive Order 11246 of September 24, 1965 and New York State Labor Law Section 194 (together "Equal Pay Law").</p>	
<p>14.</p>	<p>Qualifying Questions:</p>	
<p><i>yes Census Tract 110</i></p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant a small business or small not-for-profit corporation with not more than 50 employees?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant a business or not-for-profit with a primary place of business located in Erie County, New York?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Applicant's primary place of business located in a highly distressed area? (see map at https://www.ecidany.com/documents/HighlyDistressedAreaMap7-2-2013.pdf)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Applicant a Certified Minority or Certified Women-Owned Business?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Applicant a Certified Service-Disabled Veteran-Owned Business?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was the Applicant in business at least one year prior to March 7, 2020?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was the PPE expenditure made, or is it contemplated to be made, on or after March 7, 2020?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Applicant applied for and/or received grant funding from another IDA and/or state or federal funding source to support the purchase of PPE identified in the Project budget below?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Has the Applicant been negatively impacted by the COVID-19 Pandemic?</p>	
<p>15.</p>	<p>Narrative:</p> <p>A. Provide a summary of all PPE equipment and fixture purchases previously purchased and the reason for their purchase.</p> <p>B. Provide a summary for all future PPE and fixture purchases the entity will be making, including an explanation of how it will be used (if applicable).</p> <p>C. Briefly discuss Applicants ties to the community and the impact of your work/service in Erie County.</p>	

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



EMPLOYMENT INFORMATION

Existing Jobs – A full-time equivalent job equals any combination of two or more part-time jobs that, when combined, constitute the equivalent of a job of at least 35 hours per week.

16.	Indicate how many existing full-time equivalent jobs the Applicant and its related entities employ in all ERIE COUNTY LOCATIONS	# Jobs in Erie County	22
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Grant Request Budget

17.	PPE and/or Fixture Installation Description Items or Vendor Contract (attach additional sheet as necessary)	Est. Cost of PPE/Fixtures (attach copy of proposal)	Actual Expenditure on PPE/Fixtures (attach paid receipts)
	Debmeyer Janitor Supply		1,774.00
	W.B. Mason		96.07
	Oregon Laminations		89.99
	Jens Glass Company		1,319.00
	Napa Auto Parts		179.94
	Total Vendor Expense	\$	\$3,453
	GRANT REQUESTED (grant will be calculated by multiplying eligible costs x 90%)	\$	\$3,107.70

CERTIFICATION

18. _____, being duly sworn, state that I have read and understand all the questions and answers contained in the forgoing application and the documents that I have attached hereto; that I have supplied full and complete information in the answer to each question herein to the best of my knowledge, information and belief; and that all information I have supplied is true and correct. I further understand that false statements or intentional omissions made in this Application or in connection with the verification process may have an adverse consequence to my application/submission to the Erie County Industrial Development Agency.

In addition, I acknowledge that the Agency is subject to New York State's Freedom of Information Law (FOIL). I understand that all grant information and records related to this application are potentially subject to disclosure under FOIL subject to limited statutory exclusions.

Name of Company Official Completing Worksheet:	Title:	Date Completed:
DAVID J. SWANKE	Pres/CEO	9/23/2020
Signature:		

Buffalo and Erie County Botanical Gardens Society, Inc.'s PPE Reimbursement Application
September 2020

Narrative:

A. Provide a summary of all PPE equipment and fixture purchases previously purchased and the reason for their purchase.

The Buffalo and Erie County Botanical gardens Society Inc. has spent a total of \$3,453 on PPE materials. These materials included glass partitions for the admissions desk and gift shop, masks for staff, hand sanitizing stations placed around the conservatory, greenhouses and administration building for visitors and staff, and laminated safety signage.

B. Provide a summary for all future PPE and fixture purchases the entity will be making, including an explanation of how it will be used (if applicable).

N/A

C. Briefly discuss Applicants ties to the community and the impact of your work/service in Erie County.

The Botanical Gardens is a national historic site, education center and tourist destination full of exotic horticulture treasures from around the world. Today, the Botanical Gardens is thriving! Over 140,000 people visit annually to enjoy the amazing architecture and the indoor and outdoor garden sanctuaries. It is a gathering place where visitors can find peace and harmony and enjoy the simple power of the natural world. Some visitors also see it as a place for spiritual healing, meditation and reflection.

One of the highlights of the Botanical Gardens is the Educational Programs. In 2019, over 23,000 adults, children and individuals with special needs participated in an education program. Programs range from grades K-8th grade to adults. Programming includes knowledge about the extensive 22,000+ plant collection, the environment, the water cycle, and the importance of pollinators.

The Botanical Gardens' schedule is packed with amazing flower exhibits, special events, educational programming, workshops and so much more! Check the website for a current list of exhibits and programs. The Botanical Gardens Society is a 501(c)(3), not-for-profit organization with a mission to inspire curiosity and connect people to the natural world through its historic living museum.



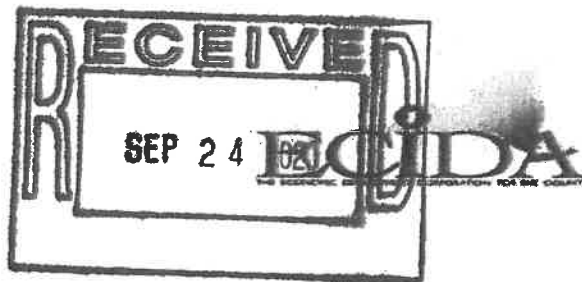
Brief summary (paragraph) detailing how the pandemic/NYS emergency declaration has negatively impacted your organization

The Buffalo and Erie County Botanical Gardens Society, Inc. closed to the public on March 17, 2020 and reopened with limited capacity and a health and safety plan on July 8, 2020. During its closure, the Botanical Gardens experienced a significant loss in revenue. The Winter and Spring months are the busiest at the Gardens bringing thousands of visitors and revenue from admissions, membership, special events and gift shop sales. The Spring Flower Exhibit and associated events were all canceled. The 3,500-person attended *Starry Night in the Garden* concert was canceled. The *Gala at the Gardens* fundraiser was canceled. Dozens of weddings and private events were canceled and money had to be returned to clients. School field trips and tours were also canceled. The essential maintenance staff maintained the historic building and horticulture staff cared for the 22,000-plant collection during the closure. The education team members moved all programming to virtual programming. All administration staff essential to running the operations of the 120-year-old conservatory adjusted and worked hard to complete their jobs from home.

Grant Application Overview

APPLICANT	GRANT AMOUNT	PROGRAM PRIORITIES	STAFF RECOMMENDATION
Buffalo Center for Arts and Technology, Inc.	\$5,474.36	Highly Distressed	Recommended for Funding
<p>Synopsis:</p> <p>Buffalo Center for Arts and Technology, Inc. (hereafter BCAT) is a not-for-profit organization, serving minority communities in the City of Buffalo, that provides opportunities for careers through the arts and workforce development. Participation in BCAT is designed to improve high school graduation rates; ensure access to safe environments to learn and prosper; develop family-sustainable wage earners; and contribute to economic and social growth. BCAT prepares adults to secure new career pathways in the healthcare fields. They motivate high school youth to stay in school, explore their creativity and identity, and plan for their future through inquiry-based learning in an afterschool arts program.</p> <p>BCAT's operation has been negatively impacted by the NYS emergency declaration. The Center was closed from March – June, which created the challenge of having to pivot all programs to online learning. The Center reopened to in-person instruction during the summer at half capacity to allow for social distancing. The pandemic has also impacted the organization's current and future fundraising efforts, which has the potential to effect programing in the future. BCAT is requesting funding support from the ECIDA's Disaster Emergency Grant Program to purchase PPE and fixtures (Freestanding Partitions, masks, gloves, face shields, thermometer, disinfectant and sanitizer) that allow the Center to safely open to in-person instruction and prevent the community spread of COVID-19.</p>			

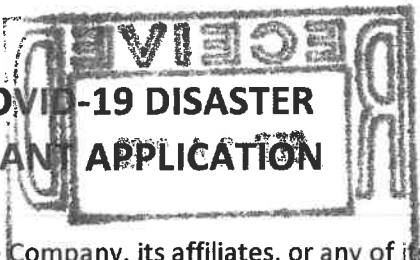
ERIE COUNTY COVID-19 DISASTER EMERGENCY GRANT APPLICATION



Thank you for your interest in the Erie County Industrial Development Agency's Disaster Emergency Grant Program to assist small businesses and not-for-profits with purchasing Personal Protective Equipment (PPE) and fixtures necessary to prevent the spread of Novel coronavirus, COVID-19. We look forward to working with you to evaluate your project for possible financial assistance. To begin this process, please complete and return this Application along with required documentation.

COMPANY INFORMATION	
1.	Applicant Legal Name: Buffalo Center for Arts and Technology, Inc.
2.	Applicant Address: 1221 Main Street, Buffalo, NY 14209
3.	Legal Structure: <input type="checkbox"/> C-Corp. <input type="checkbox"/> S-Corp <input type="checkbox"/> LLC <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Sole Proprietorship <input checked="" type="checkbox"/> Not-for-Profit
4.	Applicant Contact Name: Gina Burkhardt
5.	Contact Phone Number: 716-259-1680 Contact Email Address: gburkhardt@bufcat.org x101
6.	Type of Business: BCAT provides career opportunities through the arts and workforce development.
7.	Please submit a completed W-9, a signed copy of the organization's 2019 Federal Tax Return including all schedules or a 2019 CPA Audited Financial Statement and an interim Profit & Loss Statement and a Balance Sheet through at least June 30, 2020. X ATTACHED
8.	Number of years in business in Erie County 7
9.	Ownership: Privately held companies, please attach a description of the company's ownership structure, including the % of ownership for each individual and entity owning 20% or more of the company. Not for Profit organizations, please attach a list of the organization's officers and directors. X ATTACHED
10.	Primary North American Industrial Classification System (NAICS) Code of the Company. Please provide at least the three-digit code, but the six-digit code is preferable 611
11.	Company's Annual Sales:
12.	What share of the company's product or service is sold within Erie County: %100
13.	Miscellaneous Questions:
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principals presently the subject of any litigation, or is any litigation threatened, which would have a material adverse effect on the Company's financial condition? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals ever settled a debt with a lending institution for less than the full amount outstanding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the company, its affiliates or any of its principals ever filed bankruptcy, a creditor's rights or receivership proceeding, or sought protection from creditors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principals delinquent on property, personal, and/or employment taxes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals ever been convicted of any felony or misdemeanor, other than a minor traffic violation, or are any charges pending?

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



Yes No Has the Company, its affiliates, or any of its principals, been cited for a violation of federal, State, or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution, or operating practices?

Yes No Are there any outstanding judgments or lien pending against the Company, its affiliates, or any of its principals other than liens in the normal course of business?
Amount: \$

Yes No Has the company been accused of false or misleading statements, or been the subject of a proceeding or had any allegations made against them, by any federal, state, local agency or authority including but not limited to the SEC, FCC, FDA, or OSHA? If yes, please attach a written explanation to this application.

Yes No Is the Applicant in compliance with the provisions prohibiting wage discrimination on the basis of gender as found in federal law, including the Equal Pay Act of 1963, Title VII of the Civil Rights Act of 1964, Federal Executive Order 11246 of September 24, 1965 and New York State Labor Law Section 194 (together "Equal Pay Law").

14. Qualifying Questions:

Yes No Is the Applicant a small business or small not-for-profit corporation with not more than 50 employees?

Yes No Is the Applicant a business or not-for-profit with a primary place of business located in Erie County, New York?

Yes No Is the Applicant's primary place of business located in a highly distressed area? (see map at <https://www.ecidany.com/documents/HighlyDistressedAreaMap7-2-2013.pdf>)

Yes No Is the Applicant a Certified Minority or Women-Owned Business?

Yes No Is the Applicant a Certified Service-Disabled Veteran-Owned Business?

Yes No Was the Applicant in business at least one year prior to March 7, 2020?

Yes No Was the PPE expenditure made, or is it contemplated to be made, on or after March 7, 2020?

Yes No Has the Applicant applied for and/or received grant funding from another IDA and/or state or federal funding source to support the purchase of PPE identified in the Project budget below?

Yes No Has the Applicant been negatively impacted by the COVID-19 Pandemic?

15. Narrative:

A. Provide a summary of the need for the expenditures including all PPE and/or Fixtures the business or non-profit entity will be purchasing and how they will be used.

B. Briefly discuss the Applicant's ties to the community and the impact of your work in Erie County.

400 characters (separate sheet attached)

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



EMPLOYMENT INFORMATION			
Existing Jobs – A full-time equivalent job equals any combination of two or more part-time jobs that, when combined, constitute the equivalent of a job of at least 35 hours per week.			
16.	Indicate how many existing full-time equivalent jobs the Applicant and its related entities employ in all ERIE COUNTY LOCATIONS	# Jobs in Erie County	14.5

Grant Request Budget			
17.	PPE and/or Fixture Installation Description Items or Vendor Contract (attach additional sheet as necessary)	Est. Cost of PPE/Fixtures (attach copy of proposal)	Actual Expenditure on PPE/Fixtures (attach paid Receipts)
	VIA Pathways for the Visually Impaired	\$1,430.30	
	TAKE FORM	\$4,652.32	
	Total Vendor Expense	\$ 6,082.62	\$
	GRANT REQUESTED (grant will be calculated by multiplying eligible costs x 90%)	\$ 5,474.36	\$

CERTIFICATION

18. I, Gina Burkhardt being duly sworn, state that I have read and understand all the questions and answers contained in the forgoing application and the documents that I have attached hereto; that I have supplied full and complete information in the answer to each question herein to the best of my knowledge, information and belief; and that all information I have supplied is true and correct. I further understand that false statements or intentional omissions made in this Application or in connection with the verification process may have an adverse consequence to my application/submission to the Erie County Industrial Development Agency.

In addition, I acknowledge that the Agency is subject to New York State's Freedom of Information Law (FOIL). I understand that all grant information and records related to this application are potentially subject to disclosure under FOIL subject to limited statutory exclusions.

Name of Company Official Completing Worksheet:	Title:	Date Completed:
Gina Burkhardt	President & CEO	9/15/2020

Signature: 

15. Narrative

A. Provide a summary of the need for the expenditures including all PPE and/or Fixtures the business or non-profit entity will be purchasing and how they will be used.

BCAT is committed to keeping our staff and students safe while in our facility. Funding will enable us to purchase PPE (disposable masks, vinyl gloves, surface disinfectant) and physical barriers at workstations when social distancing is not possible. We secured a small in-kind donation for signs to delineate traffic patterns, socially distant seating and multi-touch surface cleaning procedures.

B. Briefly discuss the Applicant's ties to the community and the impact of your work in Erie County.

BCAT provides opportunities for careers through the arts and workforce development. We strive to break the cycle of poverty from multiple directions by supporting adults and youth living in Buffalo and Erie County. To date, over 98% of BCAT seniors graduate from high school and 90% of adults find employment in Erie County after graduation.

Szewczyk, Lori

From: Gina Burkhardt <gburkhardt@bufcat.org>
Sent: Wednesday, September 30, 2020 12:55 PM
To: Szewczyk, Lori
Subject: Re: ECIDA Disaster Emergency Grant

[Message is from an external source]

Good afternoon Lori - here is the information you requested about BCAT (Buffalo Center for Arts and Technology). Please let me know if anything additional is needed. Gina

The NYS mandate to close all non-essential organizations in March created a stressful and challenging time for BCAT's adult students, youth, and staff. Immediately, we were disconnected from personal contact, face-to-face communication, and the ability to monitor the academic, mental and physical health and well-being of our participants. BCAT moved quickly to develop processes/practices to deliver both adult and youth classes on-line. We dealt with several challenges, including obtaining approval from NYSED to move workforce classes online; revamping instruction and curriculum to align with Google Classroom, determining if our adults could connect to classes online, training our instructors, and building IT support for our adults who had no previous experience with online learning. Our youth were stressed to lose access to a safe and caring environment - their escape from chaos and discomfort in their homes. They didn't understand why they couldn't come to BCAT so our initial focus was to suspend classes and work to maintain contact with them through social media, text, and video chats. We created a safe place to have conversations and ask for help. Gradually we moved academic tutoring online and continue to offer it in a virtual format.

During the summer we were able to welcome back into our Center an adult workforce cohort in Pharmacy Technician training, though at half-capacity due to social distancing requirements. We also conducted a virtual photography class for our high school youth, also at half-capacity. We had to move our sterile processing class for 18-24 year olds fully online and also had to create a hybrid class structure for our phlebotomy class since the students needed to be onsite to complete their requirement for 100 blood draws.

We continue to adjust to the new safety requirements to be able to serve our community and slowly increase our capacity to serve adult students and youth. The community needs the services we offer and having to limit participation has been especially difficult. The pandemic has had a significant impact on BCAT's programs and funding opportunities that will likely last for months and even years. Not only has COVID-19 forced us to reevaluate the way we deliver programs, it has forced us to creatively approach and reorganize our revenue goals and priorities to uphold our promise to the community - to provide opportunities for careers through the arts and workforce development.

Gina Burkhardt
President and CEO
gburkhardt@bufcat.org | 716.259.1680 x101
1221 Main St., Buffalo NY 14209-2111
www.bufcat.org | @bufcat716

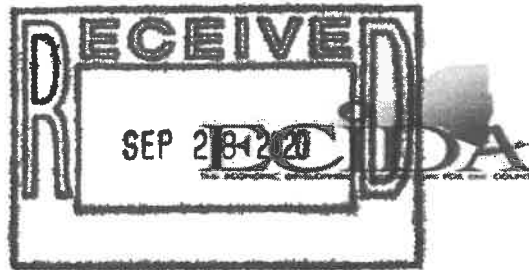


On Mon, Sep 28, 2020 at 3:50 PM Szewczyk, Lori <lszewczyk@ecidany.com> wrote:

Grant Application Overview

APPLICANT	GRANT AMOUNT	PROGRAM PRIORITIES	STAFF RECOMMENDATION
Buffalo String Works, Inc.	\$1,685.82	Highly Distressed ✓	Recommended for Funding
<p>Synopsis:</p> <p>Buffalo String Works, Inc. (hereafter String Works), a local not-for-profit, is a creative and rigorous music program primarily serving low-income refugee students in Buffalo. String Works fosters hope and compassion through high-quality music instruction for refugee children arriving from all over the world. In their 6 years, countries represented by students include: Afghanistan, Burma, Eritrea, Iraq, Sudan, Somalia, and Syria. Recognizing the significance of music as a universal language, String Works offers a creative outlet for children and their families who are searching for a sense of belonging in their new home. The NYS disaster emergency has resulted in a significant reduction of in-person classes. In March, the organization was forced to pivot to virtual learning for lessons, including the 6-week summer camp. Enrollment of new students for the fall has also been delayed. In addition to the impact on their student population, COVID-19 has also negatively impacted the organization’s fundraising efforts – several local funding sources have cancelled and/or indefinitely postponed their funding cycles for this year. Income losses coupled with the increased cost of doing business safely have put a strain on the organization. String Works is requesting assistance from the ECIDA’s Disaster Emergency Grant Program for actual and proposed PPE expenditures (masks, gloves, thermometer, and disinfectant) to keep students, staff, and families safe.</p>			

ERIE COUNTY COVID-19 DISASTER EMERGENCY GRANT APPLICATION



Thank you for your interest in the Erie County Industrial Development Agency's Disaster Emergency Grant Program to assist small businesses and not-for-profits with purchasing Personal Protective Equipment (PPE) and fixtures necessary to prevent the spread of Novel coronavirus, COVID-19. We suggest you begin by reading the Grant Guidelines that can be found here: <https://www.ecidany.com/documents//Grant%20Guidelines%208-18-20.pdf> Please complete and return this Application along with the required documentation. Questions – contact us at 716.856.6525 x. 126

COMPANY INFORMATION			
1.	Applicant Legal Name:	Buffalo String Works, Inc	
2.	Applicant Address:	286 Lafayette Ave. Buffalo, NY 14213	
3.	Legal Structure:	<input type="checkbox"/> C-Corp. <input type="checkbox"/> S-Corp <input type="checkbox"/> LLC <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Sole Proprietorship <input checked="" type="checkbox"/> Not-for-Profit	
4.	Applicant Contact Name:	Yuki Numata Resnick	
5.	Contact Phone Number:	585.329.4680	Contact Email Address: yuki@buffalostringworks.org
6.	Type of Business:	Please Describe After-school music program serving the refugee and immigrant communities	
7.	Please submit a completed W-9, a signed copy of the organization's 2019 Federal Tax Return including all schedules or a 2019 CPA Audited Financial Statement and an interim Profit & Loss Statement and Balance Sheet through at least June 30, 2020.		
			<input checked="" type="checkbox"/> ATTACHED
8.	Number of years in business in Erie County		7
9.	Ownership: Privately held companies, please attach a description of the company's ownership structure, including the % of ownership for each individual and entity owning 20% or more of the company. Not for Profit organizations, please attach a list of the organization's officers and directors.		<input checked="" type="checkbox"/> ATTACHED
10.	Primary North American Industrial Classification System (NAICS) Code of the Company. Please provide at least the three-digit code, but the six-digit code is preferable		611610
11.	What share of the company's product or service is sold within Erie County:		100 %
12.	Miscellaneous Questions:		
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principals or Board Members presently the subject of any litigation, or is any litigation threatened, which would have a material adverse effect on the Company's financial condition?		
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals ever settled a debt with a lending institution for less than the full amount outstanding?		
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the company, its affiliates or any of its principals ever filed bankruptcy, a creditor's rights or receivership proceeding, or sought protection from creditors?		
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principal's delinquent on property, personal, and/or employment taxes?		
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals or Board Members ever been convicted of		

ERIE COUNTY COVID-19 DISASTER EMERGENCY GRANT APPLICATION



	<p>any felony or misdemeanor, other than a minor traffic violation, or are any charges pending?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company, its affiliates, or any of its principals, been cited for a violation of federal, State, or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution, or operating practices?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are there any outstanding judgments or lien pending against the Company, its affiliates, or any of its principals other than liens in the normal course of business? Amount: \$</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the company been accused of false or misleading statements, or been the subject of a proceeding or had any allegations made against them, by any federal, state, local agency or authority including but not limited to the SEC, FCC, FDA, or OSHA? If yes, please attach a written explanation to this application.</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant in compliance with the provisions prohibiting wage discrimination on the basis of gender as found in federal law, including the Equal Pay Act of 1963, Title VII of the Civil Rights Act of 1964, Federal Executive Order 11246 of September 24, 1965 and New York State Labor Law Section 194 (together "Equal Pay Law").</p>	
13.	<p>Qualifying Questions:</p>	
	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant a small business or small not-for-profit corporation with not more than 50 employees?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant a business or not-for-profit with a primary place of business located in Erie County, New York?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant's primary place of business located in a highly distressed area? (see map at https://www.ecidany.com/documents/HighlyDistressedAreaMap7-2-2013.pdf)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Applicant a Certified Minority or Certified Women-Owned Business?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Applicant a Certified Service-Disabled Veteran-Owned Business?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was the Applicant in business at least one year prior to March 7, 2020?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was the PPE expenditure made, or is it contemplated to be made, on or after March 7, 2020?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Applicant applied for and/or received grant funding from another IDA and/or state or federal funding source to support the purchase of PPE identified in the Project budget below?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Has the Applicant been negatively impacted by the COVID-19 Pandemic?</p>	
14.	<p>Narrative:</p> <p>A. Provide a summary of all PPE equipment and fixture purchases previously purchased and the reason for their purchase.</p> <p>B. Provide a summary for all future PPE and fixture purchases the entity will be making, including an explanation of how it will be used (if applicable).</p> <p>C. Provide a narrative to include: how your organization has been negatively affected by the State disaster emergency, why the funds are necessary, the applicant's ties to the community and the impact of your work/service in Erie County.</p>	

ERIE COUNTY COVID-19 DISASTER EMERGENCY GRANT APPLICATION



EMPLOYMENT INFORMATION			
Existing Jobs – A full-time equivalent job equals any combination of two or more part-time jobs that, when combined, constitute the equivalent of a job of at least 35 hours per week.			
15.	Indicate how many existing full-time equivalent jobs the Applicant and its related entities employ in all ERIE COUNTY LOCATIONS	# Jobs in Erie County	5

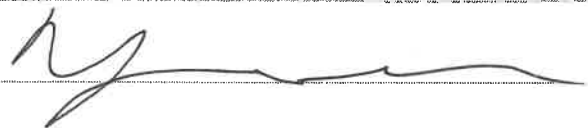
Grant Request Budget			
16.	PPE and/or Fixture Installation Description Items or Vendor Contract (attach additional sheet as necessary)	For FUTURE PPE/Fixtures you plan to purchase – list and attach proposal copies	For PAST PPE/Fixture actual expenditures - list and attach paid receipts
	24 canisters Disinfectant Hand and Surface Wipes	191.76	
	1 Disinfectant Backpack Electrostatic Sprayer	1,299.99	
	1 case Disinfectant Chemicals	90.99	
	100 Cotton Masks		178.00
	100 Gloves		18.40
	2 Thermometers (infrared, medical grade)		90.40
	Total Vendor Expense	\$ 1,582.74	\$ 290.40
	GRANT REQUESTED (grant will be calculated by multiplying eligible costs x 90%)	\$ 1,424.47	\$ 261.36

17. CERTIFICATION

I, Yuki Numata Resnick, being duly sworn, state that I have read and understand all the questions and answers contained in the forgoing application and the documents that I have attached hereto; that I have supplied full and complete information in the answer to each question herein to the best of my knowledge, information and belief; and that all information I have supplied is true and correct. I further understand that false statements or intentional omissions made in this Application or in connection with the verification process may have an adverse consequence to my application/submission to the Erie County Industrial Development Agency.

In addition, I acknowledge that the Agency is subject to New York State's Freedom of Information Law (FOIL). I understand that all grant information and records related to this application are potentially subject to disclosure under FOIL subject to limited statutory exclusions.

Name of Company Official Completing Worksheet:	Title:	Date Completed:
Yuki Numata Resnick	Executive Director	9/21/2020

Signature: 

Grant Narrative

A. Provide a summary of all PPE equipment and fixture purchases previously purchased and the reason for their purchase.

In June 2020, Buffalo String Works (BSW) purchased 100 reusable, cotton face masks. In August 2020, we purchased 2 thermometers (touch-free, infrared, medical grade) and 100 nitrile gloves. These purchases were facilitated by the WNY COVID-19 Response Fund Bulk PPE Purchase program through VIA and the Olmsted Center for Sight. (Please see attached receipts.)

During summer 2020, BSW held virtual summer programming for our students. 100% of our students are youth of color and the majority represent refugee and immigrant families in Buffalo, NY. Though our immediate focus was virtual summer programming, we were actively planning and anticipating some percentage of in-person programming in the fall. In addition, we held minimal in-person summer events that were within the Erie County and New York State guidelines. These events supported community-building within our refugee and immigrant families, provided a safe opportunity for youth to be mentored and supported, and offered important orientation sessions for families in anticipation of fall programming. Because of this immediate and anticipated programming, we purchased face masks, thermometers, and gloves for use by students, staff, faculty, and families.

B. Provide a summary for all future PPE and fixture purchases the entity will be making, including an explanation of how it will be used (if applicable)

Now that we have begun the academic year, we are committed to 2 days of in-person programming each week. These classes are held in highly-controlled and safe environments, adhering to county and state guidelines, and with a limited number of students per class. To ensure that we are providing a safe space for students, families, and staff, we intend to purchase 1 Disinfectant Backpack Electrostatic Sprayer, 1 case of Disinfectant Hand and Surface Wipes (24 canisters), and 1 Case of Disinfectant Chemicals for the Sprayer.

We are holding small group, in-person programming in 2 locations to better serve our families. On Buffalo's west side, we have partnered with the West Buffalo Charter School who is providing their space, professional cleaning services, and PPE at no cost to BSW. This school contribution is allowing us to rent church space in Buffalo's Black Rock neighborhood and invest funding into purchasing the aforementioned Backpack Sprayer and disinfectant chemicals to ensure that this second space is a regularly-sanitized environment for all involved in classes.

C. How your organization has been negatively affected by the State disaster emergency, why the funds are necessary, the applicant's ties to the community and the impact of your work/service in Erie County.

BSW strives to foster vibrant, inclusive communities through the transformative power of music. We offer a rigorous instrumental music program rooted in developing the human potential of each child. The majority of those we serve are from refugee and immigrant families—hailing from Afghanistan, Burma, Eritrea, Iraq, Mexico, Sudan, and Somalia—who now call Buffalo home. For children who, through no fault of their own, are disadvantaged both socially and academically, music can be a lifeline. With the proven correlation between music study and cognitive development, especially improved language skills, access to high quality music education is crucial to our students.

More and more, our students are showing us that their music study at BSW is a conduit towards the greater vision of empowering them to become compassionate, thoughtful, and courageous leaders as they develop holistically. Music education is proven to not only positively impact students' creativity, problem-solving skills, and academic achievement, but it has an impact on mental health and the human ability to process emotions, trauma, and grief—all the more vital in the midst of this pandemic.

We are accountable to our community through consistent and culturally-humble dialogue. Our program design is informed by the voices of our students and their families. Through interpreters and translators, our constituents have the opportunity to influence program growth and we rely on their feedback to shape future strategic plans. Last year, we launched a Community Advisors Committee of the Board comprising professionals from the local Iraqi, Hispanic, Burmese, and Black communities. The intent of this committee is threefold: 1) Ensure that BSW prioritizes diversity, equity, and inclusion as core values throughout the organization; 2) Ensure that our program is known and accessible to Buffalo's vulnerable communities; and 3) Implement governance systems to ensure growing diversity within staff, faculty, and Board. This committee also serves as a pipeline to formal Board membership, further diversifying our leadership.

BSW collaborates with many organizations including Say Yes Buffalo, the University at Buffalo, Global Leaders Program, The Service Collaborative of WNY (TSCWNY), the Eastman School of Music, City Year Buffalo, West Buffalo Charter School, and CoNECT (Community Network for Engagement, Connection, and Transformation). Through the 15+ concerts we perform each year, our students inspire our 3000+ supporters.

Though COVID-19 has resulted in a significant reduction of in-person classes, we are committed to providing student-centered, quality music programming by both virtual and in-person means. In March, we moved swiftly to virtual learning, with virtual 1-on-1 lessons and a website for students to access teaching videos created by our Teaching Artists. We closed out the season with our annual Spring Concert, offered virtually, and then hosted a 6-week virtual summer camp.

This fall, 64 BSW students are committed to the following virtual, synchronous activities each week:

- 30-minute Large Group Class (up to 18 students)
- 30-minute Small Group Class (up to 8 students)
- 30-minute Semi-Private Lesson (up to 3 students)
- 30-minute Practice Club (up to 18 students)

We also offer a 1-hour, in-person Play-In for up to 10 students at a time in a highly controlled, safe, and sanitized environment. These are provided to students on a drop-in basis and it is our hope that students will be able to attend 2 Play-Ins each month. (Any students with significant health risks or who have families with health risks are exempt from these in-person Play-Ins.) Due to COVID-19, we have delayed enrolling new students this fall but plan to enroll up to 20 additional students in January 2021 as soon as a Music Readiness curriculum is written to accommodate brand new students in a virtual setting. We plan to host 5 virtual concerts this academic year.

Organizationally, COVID-19 has caused some uncertainty around fund development goals and strategies. The economic impact of the pandemic makes it difficult to project whether or not funders and individuals will be able to continue investing in our students. Some local funding sources, such as Blue Cross Blue Shield's Blue Fund, cancelled their funding cycle this year. Others, such as Erie County Youth Bureau, have indefinitely postponed their application process, making it uncertain when we may be eligible to establish a funding relationship with them. Funds are necessary to assist Buffalo String Works in navigating these potential income losses while addressing increased costs of doing business (PPE, sanitation of space, etc). Our Executive Director and board leadership continue to undergo professional development opportunities so that we are equipped with the skills and creativity to navigate this year. We have a Fund Development plan that is tailored to the 2020-21 academic year with both optimistic and conservative projections. Our Board and Development Committee are resolute in our commitment to ensuring that high quality music education is accessible to our current and future BSW students.

Grant Application Overview

APPLICANT	GRANT AMOUNT	PROGRAM PRIORITIES	STAFF RECOMMENDATION
Children First Christian Childcare & Preschool	\$10,000	WBE✓	Recommended for Funding

Synopsis:

Children First Christian Childcare and Preschool (hereafter Children First) located at 4820 Seneca Street, is a Women Owned Business (application for Certification is currently being reviewed by Erie County EEO) that has been providing critical child care services (ages 6 weeks to 10 years) for low-income families within West Seneca and the surrounding communities for eight (8) years. In addition to daycare, Children First provides kindergarten readiness/preschool and before and after school care for siblings of children in their care. Children First provides quality childcare services that are essential for working parents.

Children First has been negatively impacted during the pandemic. The Center was closed for two (2) months and did not return to full capacity until September. Children First has also experiencing a significant increase in business expenses associated with the purchase of PPE/fixture expenditures necessary to reopen safely. Children First is requesting funding from the ECIDA to help off-set the previous purchase of needed PPE (masks, face shields, gloves, disinfectant and cleaning supplies, touchless soap dispenser, room dividers, etc.) as well as support for additional PPE and fixtures to help keep children, parents and staff safe; thereby, prevent the community spread of coronavirus.

ERIE COUNTY COVID-19 DISASTER EMERGENCY GRANT APPLICATION



Thank you for your interest in the **Erie County Industrial Development Agency's Disaster Emergency Grant Program** to assist small businesses and not-for-profits with purchasing Personal Protective Equipment (PPE) and fixtures necessary to prevent the spread of Novel coronavirus, COVID-19. We look forward to working with you to evaluate your project for possible financial assistance. To begin this process, please complete and return this *Application* along with required documentation.

COMPANY INFORMATION	
1.	Applicant Legal Name: Shirley Burgos
2.	Applicant Address: 4820 Seneca Street
3.	Legal Structure: <input type="checkbox"/> C-Corp. <input type="checkbox"/> S-Corp <input type="checkbox"/> LLC <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Not-for-Profit
4.	Applicant Contact Name: Shirley Burgos [Childrenfirsteducationalcare 716
5.	Contact Phone Number: Contact Email Address: @ Yahoo.com
6.	Type of Business: Please Describe Licensed Group family childcare
7.	Please submit a completed W-9, a signed copy of the organization's 2019 Federal Tax Return including all schedules or a 2019 CPA Audited Financial Statement and an interim Profit & Loss Statement and Balance Sheet through at least June 30, 2020.
8.	Number of years in business in Erie County <input checked="" type="checkbox"/> ATTACHED <u>8</u>
9.	Ownership: Privately held companies, please attach a description of the company's ownership structure, including the % of ownership for each individual and entity owning 20% or more of the company. Not for Profit organizations, please attach a list of the organization's officers and directors. <input checked="" type="checkbox"/> ATTACHED
10.	Primary North American Industrial Classification System (NAICS) Code of the Company. Please provide at least the three-digit code, but the six-digit code is preferable 624410
11.	Company's Annual Revenue:
12.	What share of the company's product or service is sold within Erie County: 100%
13.	Miscellaneous Questions:
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principals or Board Members presently the subject of any litigation, or is any litigation threatened, which would have a material adverse effect on the Company's financial condition? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals ever settled a debt with a lending institution for less than the full amount outstanding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the company, its affiliates or any of its principals ever filed bankruptcy, a creditor's rights or receivership proceeding, or sought protection from creditors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principal's delinquent on property, personal, and/or employment taxes?

Children First Christian Childcare and preschool

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



- Yes No Has the Company or any of its principals or Board Members ever been convicted of any felony or misdemeanor, other than a minor traffic violation, or are any charges pending?
- Yes No Has the Company, its affiliates, or any of its principals, been cited for a violation of federal, State, or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution, or operating practices?
- Yes No Are there any outstanding judgments or lien pending against the Company, its affiliates, or any of its principals other than liens in the normal course of business? Amount: \$
- Yes No Has the company been accused of false or misleading statements, or been the subject of a proceeding or had any allegations made against them, by any federal, state, local agency or authority including but not limited to the SEC, FCC, FDA, or OSHA? If yes, please attach a written explanation to this application.
- Yes No Is the Applicant in compliance with the provisions prohibiting wage discrimination on the basis of gender as found in federal law, including the Equal Pay Act of 1963, Title VII of the Civil Rights Act of 1964, Federal Executive Order 11246 of September 24, 1965 and New York State Labor Law Section 194 (together "Equal Pay Law").

14. Qualifying Questions:

- Yes No Is the Applicant a small business or small not-for-profit corporation with not more than 50 employees?
- Yes No Is the Applicant a business or not-for-profit with a primary place of business located in Erie County, New York?
- Yes No Is the Applicant's primary place of business located in a highly distressed area? (see map at <https://www.ecidany.com/documents/HighlyDistressedAreaMap7-2-2013.pdf>)
- TBD Yes No Is the Applicant a Certified Minority or Certified Women-Owned Business?
- Yes No Is the Applicant a Certified Service-Disabled Veteran-Owned Business?
- Yes No Was the Applicant in business at least one year prior to March 7, 2020?
- Yes No Was the PPE expenditure made, or is it contemplated to be made, on or after March 7, 2020?
- Yes No Has the Applicant applied for and/or received grant funding from another IDA and/or state or federal funding source to support the purchase of PPE identified in the Project budget below?
- Yes No Has the Applicant been negatively impacted by the COVID-19 Pandemic?

Narrative:

- 15. A. Provide a summary of all PPE equipment and fixture purchases previously purchased and the reason for their purchase.
- B. Provide a summary for all future PPE and fixture purchases the entity will be making, including an explanation of how it will be used (if applicable).
- C. Briefly discuss Applicants ties to the community and the impact of your work/service in Erie County.

attach on separate paper in Binder ✓ SB

Children First Christian Childcare and preschool

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



EMPLOYMENT INFORMATION

Existing Jobs – A full-time equivalent job equals any combination of two or more part-time jobs that, when combined, constitute the equivalent of a job of at least 35 hours per week.

16. Indicate how many existing full-time equivalent jobs the Applicant and its related entities employ in all ERIE COUNTY LOCATIONS # Jobs in Erie County **3**

Grant Request Budget

17.	PPE and/or Fixture Installation Description Items or Vendor Contract (attach additional sheet as necessary)	Est. Cost of PPE/Fixtures (attach copy of proposal)	Actual Expenditure on PPE/Fixtures (attach paid receipts)
	PPE covid 19 expenditures spent (info+reciepts provided)		2,744.18
	PPE Expenditures needed (info provided)	\$15,739.09	
	Total Vendor Expense	\$15,739.00	\$2,744.18
	GRANT REQUESTED (grant will be calculated by multiplying eligible costs x 90%)	\$15,739.00	\$2,744.18
	Total		\$18,483.18

CERTIFICATION

18. Shirley Burgas, being duly sworn, state that I have read and understand all the questions and answers contained in the forgoing application and the documents that I have attached hereto; that I have supplied full and complete information in the answer to each question herein to the best of my knowledge, information and belief; and that all information I have supplied is true and correct. I further understand that false statements or intentional omissions made in this Application or in connection with the verification process may have an adverse consequence to my application/submission to the Erie County Industrial Development Agency.

In addition, I acknowledge that the Agency is subject to New York State's Freedom of Information Law (FOIL). I understand that all grant information and records related to this application are potentially subject to disclosure under FOIL subject to limited statutory exclusions.

Name of Company Official Completing Worksheet: Children First Christian Childcare and preschool Title: Owner / provider Date Completed: 8/18/2020

Signature: Shirley Burgas

Children First Christian
Childcare & Preschool



Summary of our program

What we need and would use this grant for- Children First is not like other programs. The children and their families that are part of this program are a community. We work together to give each child the attention and love that they deserve to be able to thrive in their emotional growth educational growth and their spiritual growth. Since we are a group Family Childcare the children have the same care givers the whole time in our care for the 5 years they are here. They are surrounded by the same peers only a few children change each year as they age out of program then new children add into our program. Something else that makes us different from other program when families in our program go through challenging times, we do our best to stand in the gap in any way we can.

A High-quality childcare like ours at Children First Christian Childcare offers long-lasting social, economic and academic benefits for kids and their parents. Here at Children First children learn how to be problem-solvers, share and otherwise play and learn well together, while their minds are still growing and personalities still emerging.

Here at Children First we know how important it is to work with families. The few moments parents spent engaging in talking while dropping off/ picking up their children provided immense long-term benefits. With COVID and social distancing, some programs are just making parents leave child at door. We strive to keep those connections because it is so vitally to the best quality care for all the children in care. Those important moments are first and foremost important for the children's growth. Parents give important information on how child slept or anything going on at home to keep that connection between home and school for child to thrive. This is also important because it allows parents to tell us how the child is doing which helps us work on child's development. The parents gained "social capital," they know that they are part of our community. Parents have less anxiety or depression and experienced less financial hardship over the long term, and simply knowing the caregiver / another parent increased the level of comfort when it comes to their child.

We need help with expenditures dealing with COVID. For more PPE and supplies. We also need a better area for parents to drop off / pick up their children so that we can still keep those connection but keep all the children safe and well supervised and limit contact with other parents/ clients. We need help to be able to creating this area especially for the inclement weather. We also need a separate outdoor play area to separate the children from the school-age for social distancing and to create stagnant groups of children to be in smaller groups as advised in the CDC guide lines for childcare programs. We are also asking for help with fencing, play pens and dividers. The fencing outside will also create a barrier that keeps parents/clients out of the area that the children are in but still be able to engage with staff at a safe distance and see the children engaged and playing at a safe distance. This will help prevent the spread of COVID. Most of our families have higher risk jobs like health care workers/ Dental hygienist, teachers in different school districts etc... Thank you for taking the time and consideration anything will be a help to make our business and program safer for the children we care for the parents, employees and anyone that is involved in our program.

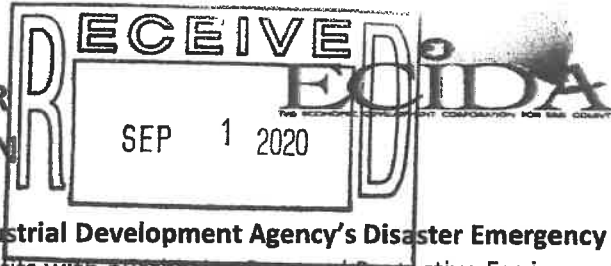
Sincerely God Bless,

Shirley Burgos (any questions feel free to call 253-7766)

Grant Application Overview

APPLICANT	GRANT AMOUNT	PROGRAM PRIORITIES	STAFF RECOMMENDATION
Computer SOS Inc.	\$7,195.65	Highly Distresses Area	Recommended for Funding
<p>Synopsis:</p> <p>Computer SOS, Inc., (hereafter SOS) located in a highly distressed area in Cheektowaga, is a technology and software integrator and developer – they provide computer, network and cloud solutions repair and support. Additionally, they offer software and mobile App development and hosting. While the company has been providing repair and hosting service, several other segments of the business (sales and software development) have been negatively impacted by the pandemic. SOS is seeking assistance from the ECIDA to purchase PPE an fixtures (masks, gloves, disinfectant, sono wipes, thermometer, signage, touchless faucets, barriers/dividers, etc.,) which will protect staff and clients and allow SOS to begin to resume full business operations.</p>			

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



Thank you for your interest in the **Erie County Industrial Development Agency's Disaster Emergency Grant Program** to assist small businesses and not-for-profits with purchasing Personal Protective Equipment (PPE) and fixtures necessary to prevent the spread of Novel coronavirus, COVID-19. We look forward to working with you to evaluate your project for possible financial assistance. To begin this process, please complete and return this *Application* along with required documentation.

COMPANY INFORMATION	
1.	Applicant Legal Name: <i>Computer SOS, Inc.</i>
2.	Applicant Address: <i>1505 Cleveland Drive, Cheektowaga, NY 14225</i>
3.	Legal Structure: <input type="checkbox"/> C-Corp. <input checked="" type="checkbox"/> S-Corp <input type="checkbox"/> LLC <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Not-for-Profit
4.	Applicant Contact Name: <i>Connie Stives</i>
5.	Contact Phone Number: <i>716-635-0086</i> Contact Email Address: <i>cstives@computersosinc.com</i>
6.	Type of Business: Please Describe <i>Technology Company</i>
7.	Please submit a completed W-9, a signed copy of the organization's 2019 Federal Tax Return including all schedules or a 2019 CPA Audited Financial Statement and an interim Profit & Loss Statement and Balance Sheet through at least June 30, 2020. <input checked="" type="checkbox"/> ATTACHED
8.	Number of years in business in Erie County <u>25</u>
9.	Ownership: Privately held companies, please attach a description of the company's ownership structure, including the % of ownership for each individual and entity owning 20% or more of the company. Not for Profit organizations, please attach a list of the organization's officers and directors. <i>50% Connie Stives 50% Tim Stives</i> <input checked="" type="checkbox"/> ATTACHED
10.	Primary North American Industrial Classification System (NAICS) Code of the Company. Please provide at least the three-digit code, but the six-digit code is preferable <u>541519</u>
11.	Company's Annual Revenue:
12.	What share of the company's product or service is sold within Erie County: <u>64%</u>
13.	Miscellaneous Questions:
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principals or Board Members presently the subject of any litigation, or is any litigation threatened, which would have a material adverse effect on the Company's financial condition?	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals ever settled a debt with a lending institution for less than the full amount outstanding?	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the company, its affiliates or any of its principals ever filed bankruptcy, a creditor's rights or receivership proceeding, or sought protection from creditors?	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principal's delinquent on property, personal, and/or employment taxes?	

ERIE COUNTY COVID-19 DISASTER EMERGENCY GRANT APPLICATION



- Yes No Has the Company or any of its principals or Board Members ever been convicted of any felony or misdemeanor, other than a minor traffic violation, or are any charges pending?
- Yes No Has the Company, its affiliates, or any of its principals, been cited for a violation of federal, State, or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution, or operating practices?
- Yes No Are there any outstanding judgments or lien pending against the Company, its affiliates, or any of its principals other than liens in the normal course of business?
Amount: \$
- Yes No Has the company been accused of false or misleading statements, or been the subject of a proceeding or had any allegations made against them, by any federal, state, local agency or authority including but not limited to the SEC, FCC, FDA, or OSHA? If yes, please attach a written explanation to this application.
- Yes No Is the Applicant in compliance with the provisions prohibiting wage discrimination on the basis of gender as found in federal law, including the Equal Pay Act of 1963, Title VII of the Civil Rights Act of 1964, Federal Executive Order 11246 of September 24, 1965 and New York State Labor Law Section 194 (together "Equal Pay Law")?

14. Qualifying Questions:

- Yes No Is the Applicant a small business or small not-for-profit corporation with not more than 50 employees?
- Yes No Is the Applicant a business or not-for-profit with a primary place of business located in Erie County, New York?
- Yes No Is the Applicant's primary place of business located in a highly distressed area? (see map at <https://www.ecidany.com/documents/HighlyDistressedAreaMap7-2-2013.pdf>)
- Yes No Is the Applicant a Certified Minority or Certified Women-Owned Business?
- Yes No Is the Applicant a Certified Service-Disabled Veteran-Owned Business?
- Yes No Was the Applicant in business at least one year prior to March 7, 2020?
- Yes No Was the PPE expenditure made, or is it contemplated to be made, on or after March 7, 2020?
- Yes No Has the Applicant applied for and/or received grant funding from another IDA and/or state or federal funding source to support the purchase of PPE identified in the Project budget below?
- Yes No Has the Applicant been negatively impacted by the COVID-19 Pandemic?

Narrative:

- 15.**
- A. Provide a summary of all PPE equipment and fixture purchases previously purchased and the reason for their purchase.
 - B. Provide a summary for all future PPE and fixture purchases the entity will be making, including an explanation of how it will be used (if applicable).
 - C. Briefly discuss Applicants ties to the community and the impact of your work/service in Erie County.

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



EMPLOYMENT INFORMATION

Existing Jobs – A full-time equivalent job equals any combination of two or more part-time jobs that, when combined, constitute the equivalent of a job of at least 35 hours per week.

16.	Indicate how many existing full-time equivalent jobs the Applicant and its related entities employ in all ERIE COUNTY LOCATIONS	# Jobs in Erie County	24
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Grant Request Budget

17.	PPE and/or Fixture Installation Description Items or Vendor Contract (attach additional sheet as necessary)	Est. Cost of PPE/Fixtures (attach copy of proposal)	Actual Expenditure on PPE/Fixtures (attach paid receipts)
	<i>See attached detail</i>		
	<i>Bite Aid, Walgreens, Target, Tops, BJs</i>		<i>726.06</i>
	<i>FB Displays and Designs</i>	<i>2986.28</i>	<i>283.84</i>
	<i>Acme Plastics</i>		<i>911.64</i>
	<i>Trutz</i>		<i>828.52</i>
	<i>Online: Daily Steels, Rite Aid, Wyze, Dfc Depot, Eaton, Amazon, etc</i>		<i>1630.57</i>
	<i>Home Depot</i>	<i>628.26</i>	
	Total Vendor Expense	\$3614.54	\$4380.63
	GRANT REQUESTED (grant will be calculated by multiplying eligible costs x 90%)	\$3614.54	\$3942.57
		3253.09	

CERTIFICATION

18. I, Connie Stives, being duly sworn, state that I have read and understand all the questions and answers contained in the forgoing application and the documents that I have attached hereto; that I have supplied full and complete information in the answer to each question herein to the best of my knowledge, information and belief; and that all information I have supplied is true and correct. I further understand that false statements or intentional omissions made in this Application or in connection with the verification process may have an adverse consequence to my application/submission to the Erie County Industrial Development Agency.

In addition, I acknowledge that the Agency is subject to New York State's Freedom of Information Law (FOIL). I understand that all grant information and records related to this application are potentially subject to disclosure under FOIL subject to limited statutory exclusions.

Name of Company Official Completing Worksheet:	Title: <i>Co-Owner</i>	Date Completed: <i>9-1-20</i>
<i>Connie M Stives</i>		
Signature: <i>Connie M Stives</i>		

Computer SOS, Inc.

NARRATIVE

Summary of all PPE equipment and fixture purchases previously purchased and the reason for their purchase:

We had to purchase and will continue to keep purchasing antibacterial disinfectant wipes for daily and more frequently wiping of all door handles, surfaces, computer keyboards, light switches, coffee pot handles, bathroom sink handles, microwave buttons, etc., that any employee might touch. We also have boxes of tissues in every room and we encourage everyone to use tissues or gloves to touch anything, such as the coffee pot, for example. The computer technicians also need to wipe down every customer computer that comes into the office before they work on it and then wipe it down for the customer after they work on it. The technicians also need to bring wipes with them when going onsite to customers to do the same. We have had to purchase numerous masks and gloves as well.

Each employee was given their own hand sanitizer to use at their desk. We also have a pump bottle of hand sanitizer in every room (i.e. conference room, front lobby, kitchen). We also purchased touchless bathroom sink faucets and soap dispensers in the bathrooms so employees can turn the water on and off when washing their hands without having to touch anything. There is Lysol and sanitizer sprays in every room and a container of wipes in every room.

We also purchased numerous masks, two sizes of gloves, face shields, and sanitizing barriers for areas where six foot distancing would be difficult. Our industry is a heavy user of all these items due to the nature of our work.

Summary for all future PPE and fixture purchases the entity will be making, including an explanation of how it will be used:

We will continue to purchase wipes, hand sanitizer, masks, Lysol sprays, etc., but would also like to purchase some additional barriers, room sanitizers, and a touchless faucet for the kitchen.

Briefly discuss Applicant's ties to the community and the impact of your work/service in Erie County:

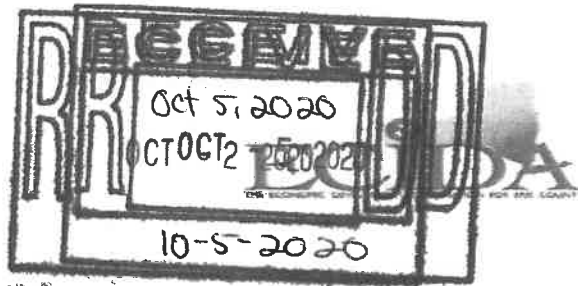
We are proud to say we have been in business here in WNY for 25 years. We started on Wehrle Drive for the first three years and then purchased our building in Cheektowaga. Over the years we have given baskets to numerous charity events and we support several non-profits as their technology provider with a special "non-profit discount." We were once awarded the "Best in Giving" award. Our ties to the community extend back 25 years. We provide technology support to numerous businesses throughout Western New York. At the beginning of this pandemic, the first couple of weeks many businesses relied on us to set up remote access so their employees could work from home. It was a hectic couple of weeks to get this done as quickly as possible for them. Then, as the pandemic continued for a longer

period than anyone could have imagined, our retail stores found that they desperately needed e-commerce websites in order to sell the inventory they had on hand and bring in revenue. We were able to get numerous small retailers set up with e-commerce websites that allowed them to offer their customers the ability to pick up curbside, delivery, and shipping. It helped them to bring in revenue while being able to sell to their customers the items they needed. Other parts of our business definitely slowed down during this pandemic and we lost opportunities that we almost closed on right before the start of the pandemic, but being able to offer tech support and e-commerce websites by purchasing PPP to keep our employees safe certainly helped our business.

Grant Application Overview

APPLICANT	GRANT AMOUNT	PROGRAM PRIORITIES	STAFF RECOMMENDATION
Eclips Hair Salon, Inc.	\$1,742.10	WBE ✓	Recommended for Funding
<p>Synopsis:</p> <p>Eclips Hair Salon, Inc. (hereafter Eclips) is a woman-owned business enterprise located on Seneca Street in West Seneca. Eclips opened as a small full-service hair salon in July of 2003 with 4 stylists. In 2004, Eclips added more space and staff to meet the growing business demand. Over the last 11 years they have continued to grow with the support of their loyal clientele.</p> <p>Eclips has been negatively impacted by the NYS emergency declaration. After being completely closed for three (3) months, the salon reopened in June at a limited capacity. All staff, except one, returned to work in June; however, approximately 20% of the clients have yet to return. The loss of business and reduced capacity has caused a financial hardship for the partners who have resisted increasing their pricing during this difficult time. Eclips is requesting assistance from the ECIDA's Disaster Emergency Grant Program to offset PPE (masks, cleaning supplies & disinfectant, signage, sneeze guards, thermometer, etc.) expenditures necessary to resume business activity safely in accordance with NYS Guidelines.</p>			

ERIE COUNTY COVID-19 DISASTER EMERGENCY GRANT APPLICATION



Thank you for your interest in the **Erie County Industrial Development Agency's Disaster Emergency Grant Program** to assist small businesses and not-for-profits with purchasing Personal Protective Equipment (PPE) and fixtures necessary to prevent the spread of Novel coronavirus, COVID-19. We suggest you begin by reading the Grant Guidelines that can be found here: <https://www.ecidany.com/documents//Grant%20Guidelines%208-18-20.pdf> Please complete and return this Application along with the required documentation. Questions – contact us at 716.856.6525 x. 126

COMPANY INFORMATION	
1.	Applicant Legal Name: <u>Eclips Hair Salon, Inc.</u>
2.	Applicant Address: <u>3939 Seneca St., West Seneca, NY 14224</u>
3.	Legal Structure: <input type="checkbox"/> C-Corp. <input checked="" type="checkbox"/> S-Corp <input type="checkbox"/> LLC <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Not-for-Profit
4.	Applicant Contact Name: <u>Margie Dombrowski</u>
5.	Contact Phone Number: <u>(716) 495-2192</u> Contact Email Address: <u>eclips3939@gmail.com</u>
6.	Type of Business: <u>Hair Salon</u> Please Describe
7.	Please submit a completed W-9, a signed copy of the organization's 2019 Federal Tax Return including all schedules or a 2019 CPA Audited Financial Statement and an interim Profit & Loss Statement and Balance Sheet through at least June 30, 2020. <input type="checkbox"/> ATTACHED
8.	Number of years in business in Erie County <u>17</u>
9.	Ownership: Privately held companies, please attach a description of the company's ownership structure, including the % of ownership for each individual and entity owning 20% or more of the company. Not for Profit organizations, please attach a list of the organization's officers and directors. <input type="checkbox"/> ATTACHED
10.	Primary North American Industrial Classification System (NAICS) Code of the Company. Please provide at least the three-digit code, but the six-digit code is preferable <u>81112</u>
11.	What share of the company's product or service is sold within Erie County: <u>100</u> %
12.	Miscellaneous Questions:
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principals or Board Members presently the subject of any litigation, or is any litigation threatened, which would have a material adverse effect on the Company's financial condition?
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals ever settled a debt with a lending institution for less than the full amount outstanding?
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the company, its affiliates or any of its principals ever filed bankruptcy, a creditor's rights or receivership proceeding, or sought protection from creditors?
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principal's delinquent on property, personal, and/or employment taxes?
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals or Board Members ever been convicted of

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



any felony or misdemeanor other than a minor traffic violation, or are any charges pending?

- Yes No Has the Company, its affiliates, or any of its principals, been cited for a violation of federal, State, or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution, or operating practices?
- Yes No Are there any outstanding judgments or lien pending against the Company, its affiliates, or any of its principals other than liens in the normal course of business? Amount: \$
- Yes No Has the company been accused of false or misleading statements, or been the subject of a proceeding or had any allegations made against them, by any federal, state, local agency or authority including but not limited to the SEC, FCC, FDA, or OSHA? If yes, please attach a written explanation to this application.
- Yes No Is the Applicant in compliance with the provisions prohibiting wage discrimination on the basis of gender as found in federal law, including the Equal Pay Act of 1963, Title VII of the Civil Rights Act of 1964, Federal Executive Order 11246 of September 24, 1965 and New York State Labor Law Section 194 (together "Equal Pay Law").

13. Qualifying Questions:

- Yes No Is the Applicant a small business or small not-for-profit corporation with not more than 50 employees?
- Yes No Is the Applicant a business or not-for-profit with a primary place of business located in Erie County, New York?
- Yes No Is the Applicant's primary place of business located in a highly distressed area? (see map at <https://www.ecidanv.com/documents/HighlyDistressedAreaMap7-2-2013.pdf>)
- Yes No Is the Applicant a Certified Minority or Certified Women-Owned Business?
- Yes No Is the Applicant a Certified Service-Disabled Veteran-Owned Business?
- Yes No Was the Applicant in business at least one year prior to March 7, 2020?
- Yes No Was the PPE expenditure made, or is it contemplated to be made, on or after March 7, 2020?
- Yes No Has the Applicant applied for and/or received grant funding from another IDA and/or state or federal funding source to support the purchase of PPE identified in the Project budget below?
- Yes No Has the Applicant been negatively impacted by the COVID-19 Pandemic?

Narrative:

14.

- A. Provide a summary of all PPE equipment and fixture purchases previously purchased and the reason for their purchase.
- B. Provide a summary for all future PPE and fixture purchases the entity will be making, including an explanation of how it will be used (if applicable).
- C. Provide a narrative to include: how your organization has been negatively affected by the State disaster emergency, why the funds are necessary, the applicant's ties to the community and the impact of your work/service in Erie County.

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



EMPLOYMENT INFORMATION

Existing Jobs – A full-time equivalent job equals any combination of two or more part-time jobs that, when combined, constitute the equivalent of a job of at least 35 hours per week.

16. Indicate how many existing full-time equivalent jobs the Applicant and its related entities employ **5**

Grant Request Budget

17.	PPE and/or Fixture Installation Description Items or Vendor Contract (attach additional sheet as necessary)	For FUTURE PPE/Fixtures you plan to purchase – list and attach proposal copies	For PAST PPE/Fixture actual expenditures - list and attach paid receipts
	Cleaning products purchased for covid - June - Sept		571.09 ✓
	PPE purchased, ex- masks, shields, sanitizer		394.85 ✓
	Paper products, Ink + signage for covid related		78.02 ✓
	Sneeze guards for reception area		190.31 ✓
	additional client capes to allow clean cape each client		210.12 ✓
	Thermometer for temp checks.		62.97 ✓
	Additional Cleaning products to be purchased Oct- Dec	428.31	
	Total Vendor Expense	\$ 428.31	\$ 1507.36
	GRANT REQUESTED (grant will be calculated by multiplying eligible costs x 90%)	\$	1,935.67

CERTIFICATION

18. I, Marjorie A. Dombrowski, being duly sworn, state that I have read and understand all the questions and answers contained in the forgoing application and the documents that I have attached hereto; that I have supplied full and complete information in the answer to each question herein to the best of my knowledge, information and belief; and that all information I have supplied is true and correct. I further understand that false statements or intentional omissions made in this Application or in connection with the verification process may have an adverse consequence to my application/submission to the Erie County Industrial Development Agency.

In addition, I acknowledge that the Agency is subject to New York State's Freedom of Information Law (FOIL). I understand that all grant information and records related to this application are potentially subject to disclosure under FOIL subject to limited statutory exclusions.

Name of Company Official Completing Worksheet: Marjorie A. Dombrowski Title: Owner Date Completed: 10/1/20

Signature: Marjorie A. Dombrowski

E-clips Hair Salon, Inc.
3939 Seneca Street
West Seneca, NY 14224
Tax Id #56-2356276
October 1, 2020

Attn: Lori Szewczyk

My business partner, Susan Beres, and myself opened our salon in July of 2003. We are both residents of West Seneca, and do our best to support our local community as well as surrounding businesses. We have established what we believe to be an excellent reputation with our clients as well as our employees and the vendors and suppliers we have maintained business with over the last 17 years. We originally were able to buy the property we use as our salon with the help of the SBA, our families, and a lot of hard work. Over the years we have established a very loyal client base and strive each day to provide a great service at a reasonable price that fits the local economy.

Although most of our competitors and surrounding businesses have raised prices and/or instituted a Covid fee, we realize everyone is experiencing hardships and have delayed passing the cost on to our clients. We realize however with costs rising everywhere we will have to address this concern in the New Year.

When we were finally able to reopen in June, we lost one of our stylists who no longer wanted to work in a salon and chose to work from her home due to fears of Covid exposure. That combined with the amount of clients who have yet to return and those who no longer come as frequently, our business from June – Sept 2020, is down approximately 20 percent from 2019.

With no fault to Covid, we also were forced to put a new roof on our building in August. Between the loss of income, the incurred expense to comply with Covid regulations, and currently paying on a magazine subscription for magazines we can no longer offer our clients we have experienced an economic impact to our daily business which we are struggling to overcome.

We fully intend to go forward and not give up on the business we have financially and emotionally supported since we first decided to venture out on our own.

With that being said, we would greatly appreciate any consideration for help you could offer us. I would be happy to answer any questions you may have. I can be reached at the salon at (716) 675-2192 or my cell (716- 998-7220)

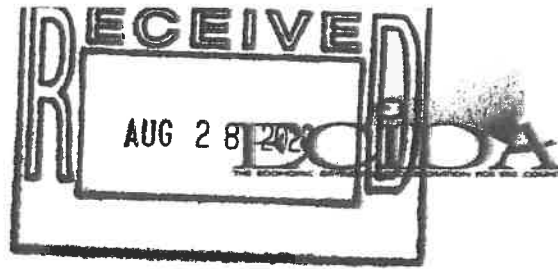
Sincerely,
Margie Dombrowski,



Grant Application Overview

APPLICANT	GRANT AMOUNT	PROGRAM PRIORITIES	STAFF RECOMMENDATION
Explore & More Children’s Museum	\$9,846.00	Highly Distressed√	Recommended for Funding
<p>Synopsis:</p> <p>The Explore & More Children’s Museum (hereafter Explore & More), located at 130 Main Street in the City of Buffalo, recently (June 2019) relocated from their long-time 6,000 sq. ft. facility in East Aurora to a world-class facility in the heart of Canalside. The children’s museum, a year-round community destination, celebrates the power of child-led play with four floors of fun to explore, the 43,000 sq. ft. museum. In addition to the museum, Explore & More offers: off-site free programming to underserved communities; special programming for children with Autism Spectrum Disorder; programming for military families; and outdoor special events. In the first six months at their new location, Explore & More served over 100,000 visitors representing 1,900 zip codes, which exceeded the admission projections.</p> <p>The museum was negatively impacted by the NYS emergency declaration – Explore & More was closed for 4 months (March-June) and opened in July at 15% capacity. The prolonged closure and capacity limitations have forced the museum to pivot and transition to include remote education opportunities. Explore & More is requesting support from the ECIDA Disaster Emergency Grant Program to help offset significant PPE expenses (signage, masks, exhibit alterations, fixtures, disinfectant, etc.) they incurred to safely reopen the museum to the public.</p> <p>NOTE: <i>The original budget request submitted by Explore & More was modified by staff to remove \$476.49 of ineligible expenses.</i></p>			

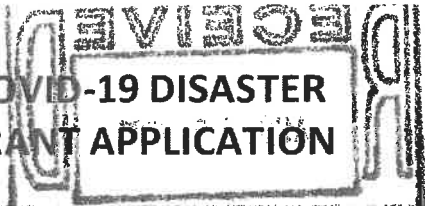
ERIE COUNTY COVID-19 DISASTER EMERGENCY GRANT APPLICATION



Thank you for your interest in the **Erie County Industrial Development Agency's Disaster Emergency Grant Program** to assist small businesses and not-for-profits with purchasing Personal Protective Equipment (PPE) and fixtures necessary to prevent the spread of Novel coronavirus, COVID-19. We look forward to working with you to evaluate your project for possible financial assistance. To begin this process, please complete and return this *Application* along with required documentation.

COMPANY INFORMATION	
1.	Applicant Legal Name: Explore & More Children's Museum
2.	Applicant Address: 130 Main Street, Buffalo New York, 14202
3.	Legal Structure: <input type="checkbox"/> C-Corp. <input type="checkbox"/> S-Corp <input type="checkbox"/> LLC <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Sole Proprietorship <input checked="" type="checkbox"/> Not-for-Profit
4.	Applicant Contact Name: Kristin Scholz
5.	Contact Phone Number: 716-655-5131 Contact Email Address: kscholz@exploreandmore.org
6.	Type of Business: Please Describe Children's Museum
7.	Please submit a completed W-9, a signed copy of the organization's 2019 Federal Tax Return including all schedules or a 2019 CPA Audited Financial Statement and an interim Profit & Loss Statement and Balance Sheet through at least June 30, 2020. <input type="checkbox"/> ATTACHED
8.	Number of years in business in Erie County <u>26</u>
9.	Ownership: Privately held companies, please attach a description of the company's ownership structure, including the % of ownership for each individual and entity owning 20% or more of the company. Not for Profit organizations, please attach a list of the organization's officers and directors. <input type="checkbox"/> ATTACHED
10.	Primary North American Industrial Classification System (NAICS) Code of the Company. Please provide at least the three-digit code, but the six-digit code is preferable 712110
11.	Company's Annual Sales:
12.	What share of the company's product or service is sold within Erie County: 100%
13.	Miscellaneous Questions:
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principals presently the subject of any litigation, or is any litigation threatened, which would have a material adverse effect on the Company's financial condition? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals ever settled a debt with a lending institution for less than the full amount outstanding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the company, its affiliates or any of its principals ever filed bankruptcy, a creditor's rights or receivership proceeding, or sought protection from creditors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principals delinquent on property, personal, and/or employment taxes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals ever been convicted of any felony or misdemeanor, other than a minor traffic violation, or are any charges pending?

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



- Yes No Has the Company, its affiliates, or any of its principals, been cited for a violation of federal, State, or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution, or operating practices?
- Yes No Are there any outstanding judgments or lien pending against the Company, its affiliates, or any of its principals other than liens in the normal course of business? Amount: \$
- Yes No Has the company been accused of false or misleading statements, or been the subject of a proceeding or had any allegations made against them, by any federal, state, local agency or authority including but not limited to the SEC, FCC, FDA, or OSHA? If yes, please attach a written explanation to this application.
- Yes No Is the Applicant in compliance with the provisions prohibiting wage discrimination on the basis of gender as found in federal law, including the Equal Pay Act of 1963, Title VII of the Civil Rights Act of 1964, Federal Executive Order 11246 of September 24, 1965 and New York State Labor Law Section 194 (together "Equal Pay Law")?

14. Qualifying Questions:

- Yes No Is the Applicant a small business or small not-for-profit corporation with not more than 50 employees?
- Yes No Is the Applicant a business or not-for-profit with a primary place of business located in Erie County, New York?
- Yes No Is the Applicant's primary place of business located in a highly distressed area? (see map at <https://www.ecidany.com/documents/HighlyDistressedAreaMap7-2-2013.pdf>)
- Yes No Is the Applicant a Certified Minority or Women-Owned Business?
- Yes No Is the Applicant a Certified Service-Disabled Veteran-Owned Business?
- Yes No Was the Applicant in business at least one year prior to March 7, 2020?
- Yes No Was the PPE expenditure made, or is it contemplated to be made, on or after March 7, 2020?
- Yes No Has the Applicant applied for and/or received grant funding from another IDA and/or state or federal funding source to support the purchase of PPE identified in the Project budget below?
- Yes No Has the Applicant been negatively impacted by the COVID-19 Pandemic?

15. Narrative:

- A. Provide a summary of the need for the expenditures including all PPE and/or Fixtures the business or non-profit entity will be purchasing and how they will be used.
- B. Briefly discuss the Applicant's ties to the community and the impact of your work in Erie County.

400 characters (*attach separate sheet*)

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



EMPLOYMENT INFORMATION

Existing Jobs – A full-time equivalent job equals any combination of two or more part-time jobs that, when combined, constitute the equivalent of a job of at least 35 hours per week.

16.	Indicate how many existing full-time equivalent jobs the Applicant and its related entities employ in all ERIE COUNTY LOCATIONS	# Jobs in Erie County	16
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Grant Request Budget

	PPE and/or Fixture Installation Description Items or Vendor Contract (attach additional sheet as necessary)	Est. Cost of PPE/Fixtures (attach copy of proposal)	Actual Expenditure on PPE/Fixtures (attach paid receipts)
17.	See attached listing and receipts		
	Total Vendor Expense	\$	\$ 11,416.60
	GRANT REQUESTED (grant will be calculated by multiplying eligible costs x 90%)	\$	\$ 10,274.94

CERTIFICATION

18. *[Signature]*, CFO - Erie County, being duly sworn, state that I have read and understand all the questions and answers contained in the foregoing application and the documents that I have attached hereto; that I have supplied full and complete information in the answer to each question herein to the best of my knowledge, information and belief, and that all information I have supplied is true and correct. I further understand that false statements or intentional omissions made in this Application or in connection with the verification process may have an adverse consequence to my application/submission to the Erie County Industrial Development Agency.

In addition, I acknowledge that the Agency is subject to New York State's Freedom of Information Law (FOIL). I understand that all grant information and records related to this application are potentially subject to disclosure under FOIL subject to limited statutory exclusions.

Name of Company Official Completing Worksheet: _____ Title: *Chief Financial Officer* Date Completed: *8/26/2020*

Signature: *[Signature]*

Summary of Expenditures: Provide a summary of the need for the expenditures including all PPE and/or Fixtures the business or non-profit entity will be purchasing and how they will be used.

Please see the attached list of items purchased used to help prepare the museum for re-opening amid the COVID-19 pandemic. Even though we are in a newer building with excellent safety mechanisms in place, prior to opening we had to ensure that all required protocols were in place. This consisted of changing our admissions area by increasing stanchions, adding floor and wall signage and plexiglass at the admissions desk. We posted informational signage on monitors throughout the museum and added social distance color mats at water exhibits. Some of our exhibits have been removed for the time being and we are focusing on increasing our low touch but immersive exhibits. We had to change seating and cut benches to ensure social distancing. In addition, we had to purchase additional cleaning solutions, cleaning tools and machines, gloves and masks that are needed for operations. due to children learning to social distance and teaching children and their caregivers on mask usage. We have been providing proper masks or face shields as many children did not have correct masks for their face.

About Explore & More, Our Ties to the Community and Impact:

In June 2019, Explore & More Children's Museum (E&M) moved into its new four-story, 43,000 square foot building located at Canalside in the heart of downtown Buffalo, New York. Our mission is to engage children of all backgrounds and with various learning styles (visual, verbal, logical, physical, etc.) and interest levels through seven educational Play Zones. E&M offers:

- Outreach to bring free informal learning opportunities to children in underserved locations. In 2019, we served over 10,000 people through off-site free programming, including the weekly free programming outside at Canalside. In 2020 much of our outreach has been virtual.
- Transportation Fund to bus Title 1 schools from Erie and Niagara county to the museum for free. In 2019, we provided 37 Title 1 School free busing to the museum. In 2020, we provided 40 buses for Title 1 schools.
- In 2019 we provided in person monthly free programming for children and their families with Autism Spectrum Disorder and other processing disorders. In 2020, we were able to do 2 in person and then we conducted these virtually. On August 14, 2020 we resumed in person evenings (at a limited capacity) and had all the reserved spots sold out within one day.
- We have and are hosting two free outdoor events in 2020 – Find a Truck in June, attracting 2,000+ people to Canalside and along Buffalo parking lots (predominantly young families) and Honk for Heroes that will be held September 11-September 30th with a salute to all essential workers with free admission.
- Explore & More is a Blue Star Museum, meaning active military and their families receive free admission between Memorial Day and Labor Day. E&M took this an extra step and provides free admission to active military personnel year-round through 2020.
- In response to the school closures due to COVID-19, E&M focused on helping our local community play and learn. While the museum was temporarily closed, the educational team launched a blog, Sanity Savers, to help caregivers who are now finding themselves educating their children from home. The blog covered art, culture, STEM, vocabulary, local history and sensory friendly activities designed to be both fun, playful and educational. We are continuing this while we are open for families not comfortable coming to the museum. The blog can be found on our website and social media outlets.

In 2019, Explore & More in the 6-months of opening we saw over 100,000 visitors representing 1,900 zip codes visit the museum. In 2020, we were beating admission projections and due to Covid closed on March 14, 2020. The museum re-opened to the public on July 15, 2020 to 15% capacity and will increase in capacity over the next couple of months.

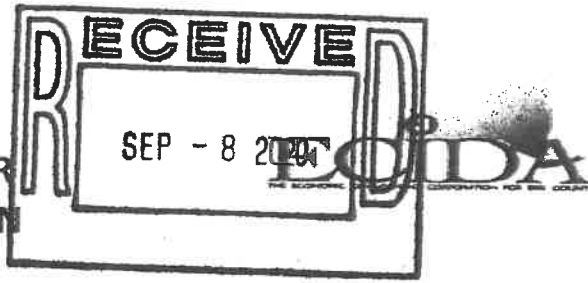
Grant Application Overview

APPLICANT	GRANT AMOUNT	PROGRAM PRIORITIES	STAFF RECOMMENDATION
Martin House Restoration Corporation	\$8,660.13	Highly Distressed Area	Recommended for Funding

Synopsis:

Martin House Restoration Corporation (hereafter MHRC) located in the City of Buffalo, is a not-for-profit organization with a mission to preserve, interpret, promote and sustain the Frank Lloyd Wright Martin House Estate, a NYS Historic Site and National Landmark. MHRC began its restoration of the site in 1992 after the property, suffering from neglect, had been abandoned for several years. Since 1992, the MHRC has leveraged public and private funding through numerous restoration phases to develop this a significant tourism asset in WNY. The Martin House draws 42,000 visitors annually and is estimated to have a \$10 million impact on Erie County's economy. NYS disaster emergency declaration and pause have negatively impacted program revenue for visitors, special events, and retail sales. MHRC was closed for 4 months and reopened in mid-July with a reduced schedule/capacity to meet the NYS Reopening Guidelines. MHRC is requesting funding from the ECIDA to help support the purchase of needed PPE/fixtures (masks, gloves, disinfectant and cleaning supplies, touchless soap dispenser & faucets, etc.) to help prevent the community spread of coronavirus.

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



Thank you for your interest in the Erie County Industrial Development Agency's Disaster Emergency Grant Program to assist small businesses and not-for-profits with purchasing Personal Protective Equipment (PPE) and fixtures necessary to prevent the spread of Novel coronavirus, COVID-19. We look forward to working with you to evaluate your project for possible financial assistance. To begin this process, please complete and return this Application along with required documentation.

COMPANY INFORMATION	
1.	Applicant Legal Name: Martin House Restoration Corporation
2.	Applicant Address: 143 Jewett Parkway, Buffalo NY 14214
3.	Legal Structure: <input type="checkbox"/> C-Corp. <input type="checkbox"/> S-Corp <input type="checkbox"/> LLC <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Sole Proprietorship <input checked="" type="checkbox"/> Not-for-Profit
4.	Applicant Contact Name: Mary F. Roberts
5.	Contact Phone Number: 716.856.3858 Contact Email Address: mrobertse@martinhouse.org
6.	Type of Business: Please Describe Public House Museum
7.	Please submit a completed W-9, a signed copy of the organization's 2019 Federal Tax Return including all schedules or a 2019 CPA Audited Financial Statement and an interim Profit & Loss Statement and Balance Sheet through at least June 30, 2020.
8.	Number of years in business in Erie County <input type="checkbox"/> ATTACHED 28
9.	Ownership: Privately held companies, please attach a description of the company's ownership structure, including the % of ownership for each individual and entity owning 20% or more of the company. Not for Profit organizations, please attach a list of the organization's officers and directors. <input checked="" type="checkbox"/> ATTACHED
10.	Primary North American Industrial Classification System (NAICS) Code of the Company. Please provide at least the three-digit code, but the six-digit code is preferable 712120
11.	Company's Annual Sales:
12.	What share of the company's product or service is sold within Erie County: 100%
13.	Miscellaneous Questions:
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principals presently the subject of any litigation, or is any litigation threatened, which would have a material adverse effect on the Company's financial condition?
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals ever settled a debt with a lending institution for less than the full amount outstanding?
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the company, its affiliates or any of its principals ever filed bankruptcy, a creditor's rights or receivership proceeding, or sought protection from creditors?
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principals delinquent on property, personal, and/or employment taxes?
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals ever been convicted of any felony or misdemeanor, other than a minor traffic violation, or are any charges pending?

ERIE COUNTY COVID-19 DISASTER EMERGENCY GRANT APPLICATION



- Yes No Has the Company, its affiliates, or any of its principals, been cited for a violation of federal, State, or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution, or operating practices?
- Yes No Are there any outstanding judgments or lien pending against the Company, its affiliates, or any of its principals other than liens in the normal course of business?
Amount: \$
- Yes No Has the company been accused of false or misleading statements, or been the subject of a proceeding or had any allegations made against them, by any federal, state, local agency or authority including but not limited to the SEC, FCC, FDA, or OSHA? If yes, please attach a written explanation to this application.
- Yes No Is the Applicant in compliance with the provisions prohibiting wage discrimination on the basis of gender as found in federal law, including the Equal Pay Act of 1963, Title VII of the Civil Rights Act of 1964, Federal Executive Order 11246 of September 24, 1965 and New York State Labor Law Section 194 (together "Equal Pay Law").

14. Qualifying Questions:

- Yes No Is the Applicant a small business or small not-for-profit corporation with not more than 50 employees?
- Yes No Is the Applicant a business or not-for-profit with a primary place of business located in Erie County, New York?
- Yes No Is the Applicant's primary place of business located in a highly distressed area? (see map at <https://www.ecidanv.com/documents/HighlyDistressedAreaMap7-2-2013.pdf>)
- Yes No Is the Applicant a Certified Minority or Women-Owned Business?
- Yes No Is the Applicant a Certified Service-Disabled Veteran-Owned Business?
- Yes No Was the Applicant in business at least one year prior to March 7, 2020?
- Yes No Was the PPE expenditure made, or is it contemplated to be made, on or after March 7, 2020?
- Yes No Has the Applicant applied for and/or received grant funding from another IDA and/or state or federal funding source to support the purchase of PPE identified in the Project budget below?
- Yes No Has the Applicant been negatively impacted by the COVID-19 Pandemic?

Narrative:

15.

- A. Provide a summary of the need for the expenditures including all PPE and/or Fixtures the business or non-profit entity will be purchasing and how they will be used.
- B. Briefly discuss the Applicant's ties to the community and the impact of your work in Erie County.

400 characters (*attach separate sheet*)

See attached.

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



EMPLOYMENT INFORMATION

Existing Jobs – A full-time equivalent job equals any combination of two or more part-time jobs that, when combined, constitute the equivalent of a job of at least 35 hours per week.

16. Indicate how many existing full-time equivalent jobs the Applicant and its related entities employ in all ERIE COUNTY LOCATIONS # Jobs in Erie County **10.6**

Grant Request Budget

17.	PPE and/or Fixture Installation Description Items or Vendor Contract (attach additional sheet as necessary)	Est. Cost of PPE/Fixtures (attach copy of proposal)	Actual Expenditure on PPE/Fixtures (attach paid receipts)
	<i>See attached.</i>		
	Total Vendor Expense	\$2760.90	\$6861.47
	GRANT REQUESTED (grant will be calculated by multiplying eligible costs x 90%)	\$2484.81	\$6175.32

CERTIFICATION

18. *Mary F. Roberts*, being duly sworn, state that I have read and understand all the questions and answers contained in the forgoing application and the documents that I have attached hereto; that I have supplied full and complete information in the answer to each question herein to the best of my knowledge, information and belief; and that all information I have supplied is true and correct. I further understand that false statements or intentional omissions made in this Application or in connection with the verification process may have an adverse consequence to my application/submission to the Erie County Industrial Development Agency.

In addition, I acknowledge that the Agency is subject to New York State's Freedom of Information Law (FOIL). I understand that all grant information and records related to this application are potentially subject to disclosure under FOIL subject to limited statutory exclusions.

Name of Company Official Completing Worksheet: MARY F. ROBERTS Title: EXECUTIVE DIRECTOR Date Completed: 9/2/2020

Signature: *Mary F. Roberts*



**Martin
House**

FRANK LLOYD WRIGHT | ARCHITECT

143 Jewett Parkway | Buffalo, NY 14214-2301

TEL: 716.856.3858 | martinhouse.org

ERIE COUNTY COVID-19 DISASTER EMERGENCY GRANT APPLICATION

NARRATIVE

Summary of Need:

As a public museum hosting visitors on a regular basis, Frank Lloyd Wright's Martin House has established a comprehensive safety program to ensure the health and safety of our visitors, volunteers and employees. Personal protective equipment is at the center of our safety plan and is used extensively throughout the site in accordance with NYS regulations and CDC guidelines.

Ties to community and impact of work in Erie County

The Martin House, a public house museum located in the historic Parkside neighborhood, provides interpretive tours and educational programs to 42,000+ visitors annually as a means to experience and learn about Wright's integrated architecture and design concepts. Beyond educational opportunities, the Martin House has generated significant economic impact for the County of Erie currently estimated at \$10 million annually.

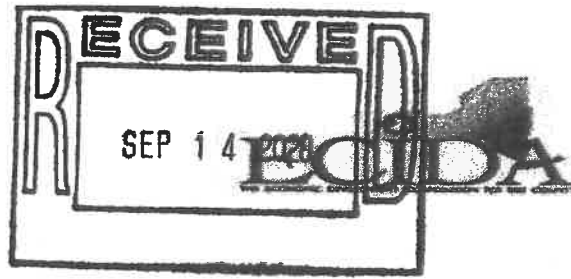
In addition to a number of articles about the Martin House, we have also attached our 2018 Annual Report.

Due to COVID, we were unable to print our 2019 Annual Report, however it can be viewed under links at <https://www.martinhouse.org/resources.cfm>

Grant Application Overview

APPLICANT	GRANT AMOUNT	PROGRAM PRIORITIES	STAFF RECOMMENDATION
Safe Mobility Service Rides, LLC	\$2,192.51	MBE ✓	Recommended for Funding
<p>Synopsis:</p> <p>Safe Mobility Service Rides, LLC (hereafter Safe Mobility) has been providing non-emergency medical transportation services in Erie County for almost 2 years. Safe Mobility provides transportation to medical appointments, services, treatments, inpatient/outpatient programs to hospitals, clinics, and nursing homes. Although considered essential, Safe Mobility experienced a significant decline in business during the NYS Pause mandate (May-June), as many non-emergency medical appointments were delayed/postponed. Safe Mobility is requesting assistance from the ECIDA's Disaster Emergency Grant Program to offset current and future expenditures associated with adhering to COVID-19 Guidelines (masks, hand sanitizer, disinfectant, etc.) and allow for safe interaction between staff and clients.</p>			

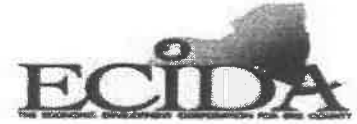
ERIE COUNTY COVID-19 DISASTER EMERGENCY GRANT APPLICATION



Thank you for your interest in the **Erie County Industrial Development Agency's Disaster Emergency Grant Program** to assist small businesses and not-for-profits with purchasing Personal Protective Equipment (PPE) and fixtures necessary to prevent the spread of Novel coronavirus, COVID-19. We look forward to working with you to evaluate your project for possible financial assistance. To begin this process, please complete and return this *Application* along with required documentation.

COMPANY INFORMATION	
1.	Applicant Legal Name: Safe Mobility Service Rides, LLC
2.	Applicant Address: 4185 Seneca St. #8 West Seneca, NY 14224
3.	Legal Structure: <input type="checkbox"/> C-Corp. <input type="checkbox"/> S-Corp <input checked="" type="checkbox"/> LLC <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Not-for-Profit
4.	Applicant Contact Name: Manon Jokaleu
5.	Contact Phone Number: 716-348-9136 Contact Email Address: smsridesllc@gmail.com
6.	Type of Business: Please Describe Non Emergency Medical Transportation
7.	Please submit a completed W-9, a signed copy of the organization's 2019 Federal Tax Return including all schedules or a 2019 CPA Audited Financial Statement and an interim Profit & Loss Statement and Balance Sheet through at least June 30, 2020. <input checked="" type="checkbox"/> ATTACHED
8.	Number of years in business in Erie County 2 <i>had</i>
9.	Ownership: Privately held companies, please attach a description of the company's ownership structure, including the % of ownership for each individual and entity owning 20% or more of the company. Not for Profit organizations, please attach a list of the organization's officers and directors. <input checked="" type="checkbox"/> ATTACHED
10.	Primary North American Industrial Classification System (NAICS) Code of the Company. Please provide at least the three-digit code, but the six-digit code is preferable 485310
11.	Company's Annual Revenue: See attached tax form US 1120S
12.	What share of the company's product or service is sold within Erie County: 100%
13.	Miscellaneous Questions:
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principals or Board Members presently the subject of any litigation, or is any litigation threatened, which would have a material adverse effect on the Company's financial condition? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals ever settled a debt with a lending institution for less than the full amount outstanding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the company, its affiliates or any of its principals ever filed bankruptcy, a creditor's rights or receivership proceeding, or sought protection from creditors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principal's delinquent on property, personal, and/or employment taxes?

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals or Board Members ever been convicted of any felony or misdemeanor, other than a minor traffic violation, or are any charges pending?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company, its affiliates, or any of its principals, been cited for a violation of federal, State, or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution, or operating practices?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are there any outstanding judgments or lien pending against the Company, its affiliates, or any of its principals other than liens in the normal course of business? Amount: \$</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the company been accused of false or misleading statements, or been the subject of a proceeding or had any allegations made against them, by any federal, state, local agency or authority including but not limited to the SEC, FCC, FDA, or OSHA? If yes, please attach a written explanation to this application.</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant in compliance with the provisions prohibiting wage discrimination on the basis of gender as found in federal law, including the Equal Pay Act of 1963, Title VII of the Civil Rights Act of 1964, Federal Executive Order 11246 of September 24, 1965 and New York State Labor Law Section 194 (together "Equal Pay Law").</p>	
14.	Qualifying Questions:	
	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant a small business or small not-for-profit corporation with not more than 50 employees?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant a business or not-for-profit with a primary place of business located in Erie County, New York?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant's primary place of business located in a highly distressed area? (see map at https://www.ecidany.com/documents/HighlyDistressedAreaMap7-2-2013.pdf)</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant a Certified Minority or Certified Women-Owned Business?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant a Certified Service-Disabled Veteran-Owned Business?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was the Applicant in business at least one year prior to March 7, 2020?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was the PPE expenditure made, or is it contemplated to be made, on or after March 7, 2020?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Applicant applied for and/or received grant funding from another IDA and/or state or federal funding source to support the purchase of PPE identified in the Project budget below?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Has the Applicant been negatively impacted by the COVID-19 Pandemic?</p>	
15.	<p>Narrative:</p> <p>A. Provide a summary of all PPE equipment and fixture purchases previously purchased and the reason for their purchase.</p> <p>B. Provide a summary for all future PPE and fixture purchases the entity will be making, including an explanation of how it will be used (if applicable).</p> <p>C. Briefly discuss Applicants ties to the community and the impact of your work/service in Erie County.</p>	

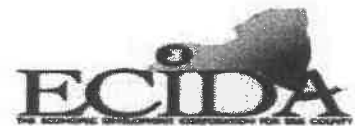
**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



(attach separate sheet if more room is needed)

See attached sheet

ERIE COUNTY COVID-19 DISASTER EMERGENCY GRANT APPLICATION



EMPLOYMENT INFORMATION

Existing Jobs – A full-time equivalent job equals any combination of two or more part-time jobs that, when combined, constitute the equivalent of a job of at least 35 hours per week.

16.	Indicate how many existing full-time equivalent jobs the Applicant and its related entities employ in all ERIE COUNTY LOCATIONS	# Jobs in Erie County	8
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Grant Request Budget

17.	PPE and/or Fixture Installation Description Items or Vendor Contract (attach additional sheet as necessary)	Est. Cost of PPE/Fixtures (attach copy of proposal)	Actual Expenditure on PPE/Fixtures (attach paid receipts)
	<i>See the attached proposal</i>		
	<i>and actual expenditure receipts attached</i>		
	Total Vendor Expense	\$2,123.04	\$ 313.05
	GRANT REQUESTED (grant will be calculated by multiplying eligible costs x 90%)	\$1,910.74	\$ 281.77

18. CERTIFICATION

Manon Jakalen, being duly sworn, state that I have read and understand all the questions and answers contained in the forgoing application and the documents that I have attached hereto; that I have supplied full and complete information in the answer to each question herein to the best of my knowledge, information and belief; and that all information I have supplied is true and correct. I further understand that false statements or intentional omissions made in this Application or in connection with the verification process may have an adverse consequence to my application/submission to the Erie County Industrial Development Agency.

In addition, I acknowledge that the Agency is subject to New York State's Freedom of Information Law (FOIL). I understand that all grant information and records related to this application are potentially subject to disclosure under FOIL subject to limited statutory exclusions.

Name of Company Official Completing Worksheet:	Title: <i>Owner</i>	Date Completed:
<i>[Signature]</i>		<i>9-8-2020</i>
Signature: <i>Manon Jakalen</i>		

Safe Mobility Service Rides, LLC

4185 Seneca St. Suite# 8 West Seneca, NY 14224

Brief History

Safe Mobility Service Rides, LLC was established in 2018 and became operational in March 2019.

The company is providing Non-Emergency Medical Transportation services in Erie County and surrounding towns, handling more medical trips per day.

Safe Mobility Service Rides, LLC works with area hospitals, clinics, Nursing homes and other medical facilities to make sure clients get to their medical appointments safely and on time. The company has now more than thirteen fleet of Livery vehicles since it became operational and employed more than sixteen people.

Our drivers are well trained, dedicated to providing quality services to the community we are serving.

Safe Mobility Service Rides, LLC intends to continue providing life saving services of non-emergency medical transportation in all the county and surrounding towns.

However, the company has suffered and is still suffering due to (COVID-19) crisis. There has been dramatic reduction in services we provide, which led to loss of revenue and reduction of our employees. Keeping up with employees' wages and retaining our work force is now extremely difficult.

It is therefore important that the company seek and acquire funding not only to keep up with the operations in the county, but also to continue to the serve the communities we live in and keep our professional drivers and support staffs employed.

Communities that depends on Non-emergency medical transportation provided by Medicaid depends on companies like ours for their medical transportation needs. Therefore, we believed our services/work has direct impact on improving quality of life in the community we serve.

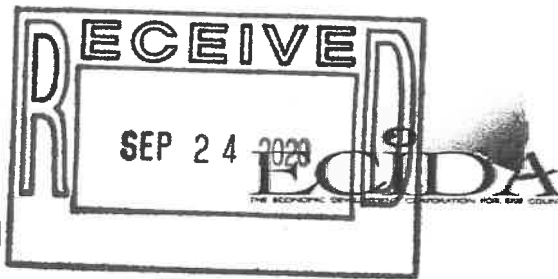
Thank You,

Manon Jokaleu
Owner/CEO
Safe Mobility Service Rides, LLC

Grant Application Overview

APPLICANT	GRANT AMOUNT	PROGRAM PRIORITIES	STAFF RECOMMENDATION
Shell Fab and Design, Inc.	\$8,565.63	WBE ✓	Recommended for Funding
<p>Synopsis:</p> <p>Shell Fab and Design, Inc. (hereafter Shell Fab), a woman-owned business enterprise, fabricates and installs residential and commercial countertops and casework. Their recently built 55,000 sq. ft. facility in West Seneca contains a warehouse, office, and showroom. The business has been negatively impacted by the NYS disaster emergency. As a non-essential business, the showroom and office were closed during the Pause and most of the employees were furloughed. During this time, sales grinded to a halt. The showroom has recently reopened on a limited capacity (by appointment only – one customer at a time) and in-home installations have resumed. The business is slowly returning; however, Shell Fab is seeking funding assistance from the ECIDA’s Disaster Emergency Grant Program to offset the purchase of necessary PPE (masks, disinfectant, glover, thermometer, etc.) required under the Reopening Plan to keep employees and customers safe. Shell Fab is also requesting funds to purchase PPE through the end of the year and installation of an Air Purification System to improve the health of the warehouse and showroom facility.</p>			

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



Thank you for your interest in the Erie County Industrial Development Agency's Disaster Emergency Grant Program to assist small businesses and not-for-profits with purchasing Personal Protective Equipment (PPE) and fixtures necessary to prevent the spread of Novel coronavirus, COVID-19. We look forward to working with you to evaluate your project for possible financial assistance. To begin this process, please complete and return this Application along with required documentation.

COMPANY INFORMATION	
1.	Applicant Legal Name: SHELL FAB + DESIGN, INC.
2.	Applicant Address: 3260 CLINTON ST., W. SENECA, NY 14224
3.	Legal Structure: <input type="checkbox"/> C-Corp. <input checked="" type="checkbox"/> S-Corp <input type="checkbox"/> LLC <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Not-for-Profit
4.	Applicant Contact Name: KATHERINE HOURIHAN
5.	Contact Phone Number: 716-827-3003 Contact Email Address: KATHERINE.HOURIHAN@SHELLFAB.COM
6.	Type of Business: Please Describe COUNTERTOP + CASEWORK FABRICATOR + INST.
7.	Please submit a completed W-9, a signed copy of the organization's 2019 Federal Tax Return including all schedules or a 2019 CPA Audited Financial Statement and an interim Profit & Loss Statement and Balance Sheet through at least June 30, 2020. <input checked="" type="checkbox"/> ATTACHED
8.	Number of years in business in Erie County 32
9.	Ownership: Privately held companies, please attach a description of the company's ownership structure, including the % of ownership for each individual and entity owning 20% or more of the company. Not for Profit organizations, please attach a list of the organization's officers and directors. <input checked="" type="checkbox"/> ATTACHED SEE #4
10.	Primary North American Industrial Classification System (NAICS) Code of the Company. Please provide at least the three-digit code, but the six-digit code is preferable 338100
11.	Company's Annual Sales:
12.	What share of the company's product or service is sold within Erie County: 80 %
13.	Miscellaneous Questions:
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principals presently the subject of any litigation, or is any litigation threatened, which would have a material adverse effect on the Company's financial condition? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals ever settled a debt with a lending institution for less than the full amount outstanding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the company, its affiliates or any of its principals ever filed bankruptcy, a creditor's rights or receivership proceeding, or sought protection from creditors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principals delinquent on property, personal, and/or employment taxes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals ever been convicted of any felony or misdemeanor, other than a minor traffic violation, or are any charges pending?

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company, its affiliates, or any of its principals, been cited for a violation of federal, State, or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution, or operating practices?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are there any outstanding judgments or lien pending against the Company, its affiliates, or any of its principals other than liens in the normal course of business? Amount: \$</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the company been accused of false or misleading statements, or been the subject of a proceeding or had any allegations made against them, by any federal, state, local agency or authority including but not limited to the SEC, FCC, FDA, or OSHA? If yes, please attach a written explanation to this application.</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant in compliance with the provisions prohibiting wage discrimination on the basis of gender as found in federal law, including the Equal Pay Act of 1963, Title VII of the Civil Rights Act of 1964, Federal Executive Order 11246 of September 24, 1965 and New York State Labor Law Section 194 (together "Equal Pay Law").</p>	
14.	<p>Qualifying Questions:</p>	
	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant a small business or small not-for-profit corporation with not more than 50 employees?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant a business or not-for-profit with a primary place of business located in Erie County, New York?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Applicant's primary place of business located in a highly distressed area? (see map at https://www.ecidany.com/documents/HighlyDistressedAreaMap7-2-2013.pdf)</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant a Certified Minority or Women-Owned Business?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Applicant a Certified Service-Disabled Veteran-Owned Business?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was the Applicant in business at least one year prior to March 7, 2020?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was the PPE expenditure made, or is it contemplated to be made, on or after March 7, 2020?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Applicant applied for and/or received grant funding from another IDA and/or state or federal funding source to support the purchase of PPE identified in the Project budget below?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Has the Applicant been negatively impacted by the COVID-19 Pandemic?</p>	
15.	<p>Narrative:</p> <p>A. Provide a summary of the need for the expenditures including all PPE and/or Fixtures the business or non-profit entity will be purchasing and how they will be used.</p> <p>B. Briefly discuss the Applicant's ties to the community and the impact of your work in Erie County.</p>	
	<p>400 characters (<i>attach separate sheet</i>)</p> <p style="text-align: center;">566 ATTACHED</p>	

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



EMPLOYMENT INFORMATION			
<i>Existing Jobs</i> – A full-time equivalent job equals any combination of two or more part-time jobs that, when combined, constitute the equivalent of a job of at least 35 hours per week.			
16.	Indicate how many existing full-time equivalent jobs the Applicant and its related entities employ in all ERIE COUNTY LOCATIONS	# Jobs in Erie County	49
Grant Request Budget			
17.	PPE and/or Fixture Installation Description Items or Vendor Contract (attach additional sheet as necessary)	Est. Cost of PPE/Fixtures (attach copy of proposal)	Actual Expenditure on PPE/Fixtures (attach paid receipts)
	SEE ATTACHED	6,926.96	2,590.41
	Total Vendor Expense	\$6,926.96	\$2,590.41
	GRANT REQUESTED (grant will be calculated by multiplying eligible costs x 90%)	\$6,234.27	\$2,331.37
		Total 8,565.63	
18.	<p>CERTIFICATION</p> <p>I, <u>Michelle M Monaco</u>, being duly sworn, state that I have read and understand all the questions and answers contained in the forgoing application and the documents that I have attached hereto; that I have supplied full and complete information in the answer to each question herein to the best of my knowledge, information and belief; and that all information I have supplied is true and correct. I further understand that false statements or intentional omissions made in this Application or in connection with the verification process may have an adverse consequence to my application/submission to the Erie County Industrial Development Agency.</p> <p>In addition, I acknowledge that the Agency is subject to New York State's Freedom of Information Law (FOIL). I understand that all grant information and records related to this application are potentially subject to disclosure under FOIL subject to limited statutory exclusions.</p>		
Name of Company Official Completing Worksheet:		Title:	Date Completed:
Michelle M Monaco		President	9/21/2020
Signature: Michelle M Monaco			

Szewczyk, Lori

From: Katherine Hourihan <katherinehourihan@shellfab.com>
Sent: Monday, October 5, 2020 8:36 AM
To: Szewczyk, Lori
Subject: RE: ECIDA Disaster Emergency Grant Application

[Message is from an external source]

Lori,

Additional information required:

- 1) Shell Fab was negatively impacted by Covid starting in March 2020 when Governor Cuomo ordered all non-essential businesses to initially reduce employees by 50% and then eventually shut down all together. We shut down our office, closed our show room, furloughed all but a few key employees basically halting all production. We eventually reopened on a small scale to service essential businesses. Our sales decreased dramatically as our showroom was closed reducing our retail business to zero, non-essential business customers were shut down and all essential business customers were also operating at reduced capacity. As sales were minimal but a certain amount of overhead remained, we ran at a deficit for a number of months. Upon reopening on a limited basis, we were seeing customers in our showroom one at a time and by appointment only. Normally we have multiple customers in the show room at one time, many of which are walk-ins. When allowed by NYS, we started to slowly bring back employees, ramp up production, reach out to customers who had placed orders prior to shut down, etc. and attempt to slowly get back to pre-Covid sales and operations.
- 2) We purchased the following Covid related supplies from Chemasters on 6/5/20: 5 Gallons of Hand Sanitizer to be used in our showroom, rest rooms, office, lunch room, warehouse and shop; 300 Ct. air laid wiper kit with Sani Pack which are sanitizing wipes for install crews and office. Note that both of these purchases are used as precautions to fight the spread of Covid.
- 3) The RGF Reme Halo-LED Whole System Air Purifier is designed to reduce air pollutants, mold bacteria and viruses in buildings. These units are installed in HVAC systems or returns where most "sick building" problems start. Installing these systems in our building will mitigate the potential spread of Covid by reducing the amount of dust and other harmful particles and viruses circulating in our building.

Let me know if you have any additional questions.

Thank you,
Kathy Hourihan
10/5/20

From: Szewczyk, Lori <lszewczyk@ecidany.com>
Sent: Tuesday, September 29, 2020 11:20 AM
To: Katherine Hourihan <katherinehourihan@shellfab.com>
Subject: ECIDA Disaster Emergency Grant Application

Hi Katherine,

Thank you for submitting your application to the ECIDA's COVID-19 Disaster Emergency Grant Program. Your proposal is currently being processed; however, we need some additional information to complete the review. At your earliest convenience, please provide the following:

- Brief summary (paragraph) detailing how the pandemic/NYS emergency declaration has negatively impacted your organization
- Brief budget explanation for Chemasters (\$1,000) purchase
- Brief description/explanation for proposed Air Filtration System (\$5,200)

An email response is fine. Thank you for your attention in this matter.

Respectfully,

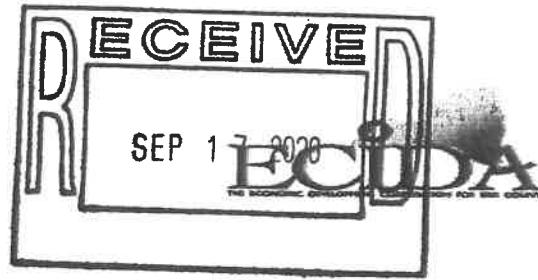
Lori A. Szewczyk
Director of Grants
Direct Line (716) 362-8363
lszewczyk@ecidany.com

ECIDA
95 Perry Street, Suite 403
Buffalo, NY 14203
Main (716) 856-6525
Fax (716) 362-8393
www.ecidany.com

Grant Application Overview

APPLICANT	GRANT AMOUNT	PROGRAM PRIORITIES	STAFF RECOMMENDATION
Trace Assets Protection Service LLC	\$1,232.37	Highly Distressed ✓ MWBE ✓	Recommended for Funding
<p>Synopsis:</p> <p>Trace Assets Protection Service LLC (hereafter Trace Assets), located in the City of Buffalo, is a fully licensed Security agency that provides armed and unarmed security guards. Services include unmarked vehicle patrol, special event security, security consulting, and security guard training. Trace Assets has 25 full time employees and provides services to many local businesses. Trace Assets has been negatively impacted by the NYS emergency declaration as were many of their clients - approximately 40% of their contracts were suspended or cancelled during the Pause. Uncertainty regarding the future remains even as most business sectors begin to reopen. Trace Assets is requesting support from the ECIDA Disaster Emergency Grant Program for actual and future PPE (masks, thermometer, gloves, sanitizer/disinfectant) expenditures that are necessary to resume business and ensure the safety of clients, employees, and the general public.</p>			

ERIE COUNTY COVID-19 DISASTER EMERGENCY GRANT APPLICATION



Thank you for your interest in the Erie County Industrial Development Agency's Disaster Emergency Grant Program to assist small businesses and not-for-profits with purchasing Personal Protective Equipment (PPE) and fixtures necessary to prevent the spread of Novel coronavirus, COVID-19. We look forward to working with you to evaluate your project for possible financial assistance. To begin this process, please complete and return this Application along with required documentation.

COMPANY INFORMATION	
1.	Applicant Legal Name: Trace Assets Protection Service LLC
2.	Applicant Address: 27 Clyde Ave., Buffalo, NY 14215
3.	Legal Structure: <input type="checkbox"/> C-Corp. <input type="checkbox"/> S-Corp <input type="checkbox"/> LLC <input type="checkbox"/> General Partnership <input checked="" type="checkbox"/> Limited Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Not-for-Profit
4.	Applicant Contact Name: Anita Sanders
5.	Contact Phone Number: 716 578-3046 Contact Email Address: asanders@traceprotection.com
6.	Type of Business: Please Describe Security Firm
7.	Please submit a completed W-9, a signed copy of the organization's 2019 Federal Tax Return including all schedules or a 2019 CPA Audited Financial Statement and an interim Profit & Loss Statement and Balance Sheet through at least June 30, 2020. <input type="checkbox"/> ATTACHED
8.	Number of years in business in Erie County: 8
9.	Ownership: Privately held companies, please attach a description of the company's ownership structure, including the % of ownership for each individual and entity owning 20% or more of the company. Not for Profit organizations, please attach a list of the organization's officers and directors. <input checked="" type="checkbox"/> ATTACHED
10.	Primary North American Industrial Classification System (NAICS) Code of the Company. Please provide at least the three-digit code, but the six-digit code is preferable: 561612
11.	Company's Annual Revenue:
12.	What share of the company's product or service is sold within Erie County: 51%
13.	Miscellaneous Questions: <ul style="list-style-type: none"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principals or Board Members presently the subject of any litigation, or is any litigation threatened, which would have a material adverse effect on the Company's financial condition? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals ever settled a debt with a lending institution for less than the full amount outstanding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the company, its affiliates or any of its principals ever filed bankruptcy, a creditor's rights or receivership proceeding, or sought protection from creditors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principal's delinquent on property, personal, and/or employment taxes?

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals or Board Members ever been convicted of any felony or misdemeanor, other than a minor traffic violation, or are any charges pending?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company, its affiliates, or any of its principals, been cited for a violation of federal, State, or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution, or operating practices?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are there any outstanding judgments or lien pending against the Company, its affiliates, or any of its principals other than liens in the normal course of business? Amount: \$</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the company been accused of false or misleading statements, or been the subject of a proceeding or had any allegations made against them, by any federal, state, local agency or authority including but not limited to the SEC, FCC, FDA, or OSHA? If yes, please attach a written explanation to this application.</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Applicant in compliance with the provisions prohibiting wage discrimination on the basis of gender as found in federal law, including the Equal Pay Act of 1963, Title VII of the Civil Rights Act of 1964, Federal Executive Order 11246 of September 24, 1965 and New York State Labor Law Section 194 (together "Equal Pay Law").</p>	
14.	Qualifying Questions:	
	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant a small business or small not-for-profit corporation with not more than 50 employees?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant a business or not-for-profit with a primary place of business located in Erie County, New York?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant's primary place of business located in a highly distressed area? (see map at https://www.ecidanyc.com/documents/HighlyDistressedAreaMap7-2-2013.pdf)</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant a Certified Minority or Certified Women-Owned Business?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Applicant a Certified Service-Disabled Veteran-Owned Business?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was the Applicant in business at least one year prior to March 7, 2020?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was the PPE expenditure made, or is it contemplated to be made, on or after March 7, 2020?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Applicant applied for and/or received grant funding from another IDA and/or state or federal funding source to support the purchase of PPE identified in the Project budget below?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Has the Applicant been negatively impacted by the COVID-19 Pandemic?</p>	
15.	<p>Narrative:</p> <p>A. Provide a summary of all PPE equipment and fixture purchases previously purchased and the reason for their purchase.</p> <p>B. Provide a summary for all future PPE and fixture purchases the entity will be making, including an explanation of how it will be used (if applicable).</p> <p>C. Briefly discuss Applicants ties to the community and the impact of your work/service in Erie County.</p>	

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



EMPLOYMENT INFORMATION

Existing Jobs – A full-time equivalent job equals any combination of two or more part-time jobs that, when combined, constitute the equivalent of a job of at least 35 hours per week.

16.	Indicate how many existing full-time equivalent jobs the Applicant and its related entities employ in all ERIE COUNTY LOCATIONS	# Jobs in Erie County	25
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Grant Request Budget

17.	PPE and/or Fixture Installation Description Items or Vendor Contract (attach additional sheet as necessary)	Est. Cost of PPE/Fixtures (attach copy of proposal)	Actual Expenditure on PPE/Fixtures (attach paid receipts)
	Best Deals - MASKS 50 pack x 11	537.32	537.32 ✓
	Best Deals Digital Infrared Thermometer		81.10 ✓
	Carbon Filter Mouth Masks		7.60 ✓
	Face Shield MASK		50 ✓
	Disposable Gloves		15.98 ✓
	Sanitizer	139.98	
	Total Vendor Expense	As \$677.32	\$ 692-
	GRANT REQUESTED (grant will be calculated by multiplying eligible costs x 90%)	\$ 609.59	\$ 622.80 1,369.

CERTIFICATION

18. Anita Sanders, being duly sworn, state that I have read and understand all the questions and answers contained in the forgoing application and the documents that I have attached hereto; that I have supplied full and complete information in the answer to each question herein to the best of my knowledge, information and belief; and that all information I have supplied is true and correct. I further understand that false statements or intentional omissions made in this Application or in connection with the verification process may have an adverse consequence to my application/submission to the Erie County Industrial Development Agency.

In addition, I acknowledge that the Agency is subject to New York State's Freedom of Information Law (FOIL). I understand that all grant information and records related to this application are potentially subject to disclosure under FOIL subject to limited statutory exclusions.

Name of Company Official Completing Worksheet:	Title:	Date Completed:
Anita Sanders	OWNER	9/4/20
Signature:		

Trace Assets Protection Service LLC
27 Clyde Avenue, Buffalo, NY 4214
asanders@traceprotection.com

ERIE COUNTY COVID-19 DISASTER EMERGENCY GRANT

Trace Assets Protection Service LLC has felt the negative impact of the COVID-19 pandemic. Many of our contracts were suspended or cancelled due to closures of restaurant, government building, and special events. Our company provides armed and unarmed security guard services to various entity throughout New York State, however, many of our client have felt the impact of COVID-19 as well. Approximately 40% of our business has been suspended or cancelled reducing our revenue tremendously. Many of our employees suddenly become unemployed.

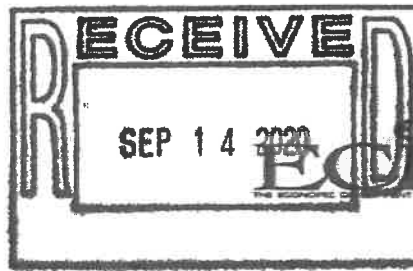
In addition, new requirement for our security guards to wear masks/shields, gloves, and the use of hand sanitizer is now a requirement for public safety. We have purchased large quantity of masks, gloves and hand sanitizer to protection our employees as well as citizen we serve. In order to keep a good amount of PPE supplies we order quarterly from various vendor, such as, amazon, Walmart, and Best Deals. We have also reduced office staff and have protective glass for our office staff to keep them safe.

Our staff and I work closely with the community to keep them safe. We have employee that working throughout Erie County, at residential apartment and in government building, providing a safe environment for them to work and live. Even though our business is down 40% we're committed to gaining more security contracts and creating other revenue source to maintain our business. Most of our employee live and working within the community and our main objective is to keep them working. We're striving to maintain our workforce and the grant will assistance with the additional expenses associated with the COVID-19 epidemic.

Grant Application Overview

APPLICANT	GRANT AMOUNT	PROGRAM PRIORITIES	STAFF RECOMMENDATION
USA Occupational Services	1,000	Highly Distressed ✓ MWBE ✓	Recommended for Funding
<p>Synopsis:</p> <p>USA Occupational Services (hereafter USA) is a MWBE Certified business located on Jefferson Avenue in the City of Buffalo. USA provides drug and alcohol testing to public and private sector employers in Erie County. Services include mobile and onsite federal/non-federal drug testing, alcohol, fingerprinting, background checks, DDC/DNA, and professional consulting services. With hiring at a stand-still and many employees working remotely during the NYS emergency declaration, USA experienced a significant decline in business activity. USA is requesting funding assistance from the ECIDA’s Disaster Emergency Grant Program to offset the cost PPE (signage, disinfectant, face shields, goggles, gowns, gloves, sneeze guard) needed to protect clients and staff from contracting/spreading COVID-19.</p>			

ERIE COUNTY COVID-19 DISASTER EMERGENCY GRANT APPLICATION



Thank you for your interest in the Erie County Industrial Development Agency's Disaster Emergency Grant Program to assist small businesses and not-for-profits with purchasing Personal Protective Equipment (PPE) and fixtures necessary to prevent the spread of Novel coronavirus, COVID-19. We look forward to working with you to evaluate your project for possible financial assistance. To begin this process, please complete and return this Application along with required documentation.

COMPANY INFORMATION	
1.	Applicant Legal Name: USA Occupational Services
2.	Applicant Address: 902 JEFFERSON AVENUE, Buffalo ny 14204
3.	Legal Structure: <input type="checkbox"/> C-Corp. <input type="checkbox"/> S-Corp <input checked="" type="checkbox"/> LLC <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Not-for-Profit
4.	Applicant Contact Name: Laythanette Shine
5.	Contact Phone Number: 986-5965 Contact Email Address: usaoccupationalsvcs@gmail.com
6.	Type of Business: Please Describe Medical/Health Testing Services
7.	Please submit a completed W-9, a signed copy of the organization's 2019 Federal Tax Return including all schedules or a 2019 CPA Audited Financial Statement and an interim Profit & Loss Statement and Balance Sheet through at least June 30, 2020. <input checked="" type="checkbox"/> ATTACHED
8.	Number of years in business in Erie County 2 yrs.
9.	Ownership: Privately held companies, please attach a description of the company's ownership structure, including the % of ownership for each individual and entity owning 20% or more of the company. Not for Profit organizations, please attach a list of the organization's officers and directors. <input checked="" type="checkbox"/> ATTACHED
10.	Primary North American Industrial Classification System (NAICS) Code of the Company. Please provide at least the three-digit code, but the six-digit code is preferable 621999
11.	Company's Annual Revenue:
12.	What share of the company's product or service is sold within Erie County: 100%
13.	Miscellaneous Questions:
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principals or Board Members presently the subject of any litigation, or is any litigation threatened, which would have a material adverse effect on the Company's financial condition? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals ever settled a debt with a lending institution for less than the full amount outstanding? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Has the company, its affiliates or any of its principals ever filed bankruptcy, a creditor's rights or receivership proceeding, or sought protection from creditors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principal's delinquent on property, personal, and/or employment taxes?

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



- Yes No Has the Company or any of its principals or Board Members ever been convicted of any felony or misdemeanor, other than a minor traffic violation, or are any charges pending?
- Yes No Has the Company, its affiliates, or any of its principals, been cited for a violation of federal, State, or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution, or operating practices?
- Yes No Are there any outstanding judgments or lien pending against the Company, its affiliates, or any of its principals other than liens in the normal course of business? Amount: \$
- Yes No Has the company been accused of false or misleading statements, or been the subject of a proceeding or had any allegations made against them, by any federal, state, local agency or authority including but not limited to the SEC, FCC, FDA, or OSHA? If yes, please attach a written explanation to this application.
- Yes No Is the Applicant in compliance with the provisions prohibiting wage discrimination on the basis of gender as found in federal law, including the Equal Pay Act of 1963, Title VII of the Civil Rights Act of 1964, Federal Executive Order 11246 of September 24, 1965 and New York State Labor Law Section 194 (together "Equal Pay Law").

14. Qualifying Questions:

- Yes No Is the Applicant a small business or small not-for-profit corporation with not more than 50 employees?
- Yes No Is the Applicant a business or not-for-profit with a primary place of business located in Erie County, New York?
- Yes No Is the Applicant's primary place of business located in a highly distressed area? (see map at <https://www.ecidany.com/documents/HighlyDistressedAreaMap7-2-2013.pdf>)
- Yes No Is the Applicant a Certified Minority or Certified Women-Owned Business?
- Yes No Is the Applicant a Certified Service-Disabled Veteran-Owned Business?
- Yes No Was the Applicant in business at least one year prior to March 7, 2020?
- Yes No Was the PPE expenditure made, or is it contemplated to be made, on or after March 7, 2020?
- Yes No Has the Applicant applied for and/or received grant funding from another IDA and/or state or federal funding source to support the purchase of PPE identified in the Project budget below?
- Yes No Has the Applicant been negatively impacted by the COVID-19 Pandemic?

Narrative:

15.

- A. Provide a summary of all PPE equipment and fixture purchases previously purchased and the reason for their purchase.
- B. Provide a summary for all future PPE and fixture purchases the entity will be making, including an explanation of how it will be used (if applicable).
- Briefly discuss Applicants ties to the community and the impact of your work/service in Erie County.

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



EMPLOYMENT INFORMATION

Existing Jobs – A full-time equivalent job equals any combination of two or more part-time jobs that, when combined, constitute the equivalent of a job of at least 35 hours per week.

16. Indicate how many existing full-time equivalent jobs the Applicant and its related entities employ in all ERIE COUNTY LOCATIONS # Jobs in Erie County 2

Grant Request Budget

17.	PPE and/or Fixture Installation Description Items or Vendor Contract (attach additional sheet as necessary)	Est. Cost of PPE/Fixtures (attach copy of proposal)	Actual Expenditure on PPE/Fixtures (attach paid receipts)
	Posters 11"x17" - 3	\$ 18.00	
	Social Distancing Floor Decal (10pk)	\$ 140.00	
	Disposable Gowns & Gloves	\$ 209.00	
	Face Shield (10pack) / goggles	\$ 70.00	
	Sneeze Guards (2) * 70 ea.	\$ 140.00	
	FREE Standing Sneeze Guard (4 @ \$110 each)	\$ 440.00	
	Disinfect	\$ 65.00	
	Total Vendor Expense	\$ 1082.00	\$
	GRANT REQUESTED (grant will be calculated by multiplying eligible costs x 90%)	\$	\$

CERTIFICATION

18. Lathanette Shine, being duly sworn, state that I have read and understand all the questions and answers contained in the forgoing application and the documents that I have attached hereto; that I have supplied full and complete information in the answer to each question herein to the best of my knowledge, information and belief; and that all information I have supplied is true and correct. I further understand that false statements or intentional omissions made in this Application or in connection with the verification process may have an adverse consequence to my application/submission to the Erie County Industrial Development Agency.

In addition, I acknowledge that the Agency is subject to New York State's Freedom of Information Law (FOIL). I understand that all grant information and records related to this application are potentially subject to disclosure under FOIL subject to limited statutory exclusions.

Name of Company Official Completing Worksheet:

Title:

Date Completed:

USA Occupational Services

Owner

8.28.2020

Signature:

Lathanette Shine

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



Narrative:

15A.

Previously purchased PPE equipment: gloves, hand sanitizer, Lysol, bleach, hand wipes, COVID-19 awareness signs, ULINE Wipers, Tyvek Protective Gear (10); soap, and water.

Due to the nature of our work and the danger of COVID-19, it's in the best interest of me (the owner) to make sure clients are safe when they visited our office. We perform DNA test, drug test, FBI finger printing and hair test. ALL testing methods require us to TOUCH the client or be direct next to the client (shoulder to shoulder) when performing the testing.

15b.

To improve and expand our safety measures as best we can, I plan to add the following: 2 Workspace Sneeze Guards, custom mask, disposable face mask, additional Tyvek gear, 2 thermometers, labels, floor marking for safe distancing, 4 clear self-standing dividers for reception area, free standing hand-sanitizer, gloves, and eye glass protectors.

Each item listed above will be used daily in our office to keep our clients and staff from contracting or spreading the COVID-19 virus. All of the items mentioned above are required or promoted by the CDC to have in your business to prevent the spreading of COVID-19.

15c.

As a small business owner awarded contracts with Tesla, UPS, CSX, and many others, I intentionally moved USA Occupational Services to Jefferson Avenue due to the growing need to be more centrally located to those who need to access my services. A long-time resident of the East Side but without ownership of business property, I acknowledge the plight of many citizens in my community who lack convenient access to doctors, mental health professionals, senior citizen care, grocery stores, and many additional services afforded to other communities.

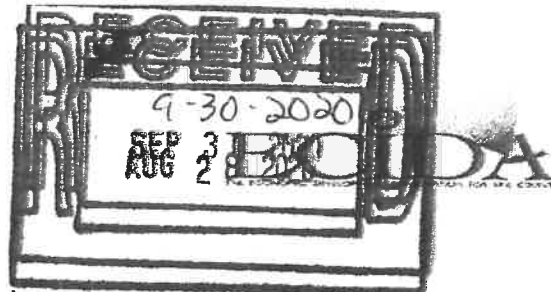
While COVID-19 can have many harmful effects, it is my belief that this consortium of decision makers, residents, and current business owners can accomplish a socially responsible, resident and business owner focused COVID-19 awareness plate form void of leaving residents displaced in its wake of the virus. Rather, empowering its residents to be invested and involved making the decision to be safe and alive by practicing the COVID-19 measures: Social Distancing, Washing Hands and Wearing a Mask.

When I visit Tesla, Amazon or CSX, I see what great measures they have taken to protect visitors and their employees and I say to myself, "I want the something for my employees, customers and the community in which I work in. This grant will help me put these safety measures in place

Grant Application Overview

APPLICANT	GRANT AMOUNT	PROGRAM PRIORITIES	STAFF RECOMMENDATION
West Side Community Services, Inc.	\$1,776.97	Highly Distressed ✓	Recommended for Funding
<p>Synopsis:</p> <p>West Side Community Services (hereafter WSCS), a not-for-profit organization located on Buffalo’s West Side, serves the needs of predominantly minority residents through a variety of programs and services. With a strong focus on prevention and guided by the values of equity, humility, and effectiveness and collaboration, WSCS offers education, arts, wellness, and prevention programs for young children, families, school-age kids and teens, adults, and senior citizens living in the West Side neighborhood. When the NYS disaster emergency closed WSCS to in-person services March-June, the organization continued to serve the neighborhood by providing a food pantry, organizing grocery delivery services and PPE giveaways. WSCS reopened their facility in July at a limited capacity and is planning to open full-day daycare and academic programing in October. As the only community center in the Niagara District, the WSCS has enhanced and expanded its services to meet the needs of the community, which has been adversely impacted by the coronavirus pandemic. WSCS is requesting support from the ECIDA’s Disaster Emergency Grant Program to offset the cost of PPE expenditures (masks, disinfectant, hand sanitizer and plexiglass barrier) to reestablish in-person services safely and prevent the further spread of COVID-19.</p>			

ERIE COUNTY COVID-19 DISASTER EMERGENCY GRANT APPLICATION



Thank you for your interest in the Erie County Industrial Development Agency's Disaster Emergency Grant Program to assist small businesses and not-for-profits with purchasing Personal Protective Equipment (PPE) and fixtures necessary to prevent the spread of Novel coronavirus, COVID-19. We look forward to working with you to evaluate your project for possible financial assistance. To begin this process, please complete and return this Application along with required documentation.

COMPANY INFORMATION		
1.	Applicant Legal Name:	WEST SIDE COMMUNITY SERVICES, INC.
2.	Applicant Address:	161 VERMONT STREET, BUFFALO NY 14213
3.	Legal Structure:	<input type="checkbox"/> C-Corp. <input type="checkbox"/> S-Corp <input type="checkbox"/> LLC <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Sole Proprietorship <input checked="" type="checkbox"/> Not-for-Profit
4.	Applicant Contact Name:	KATE HILLIMAN, EXECUTIVE DIRECTOR
5.	Contact Phone Number:	7168846616
	Contact Email Address:	director@wscsbuffalo.org
6.	Type of Business:	Please Describe Non-profit human services agency serving West Side
7.	Please submit a completed W-9, a signed copy of the organization's 2019 Federal Tax Return including all schedules or a 2019 CPA Audited Financial Statement and an interim Profit & Loss Statement and Balance Sheet through at least June 30, 2020.	
		<input type="checkbox"/> ATTACHED
8.	Number of years in business in Erie County	<u>42</u>
9.	Ownership: Privately held companies, please attach a description of the company's ownership structure, including the % of ownership for each individual and entity owning 20% or more of the company. Not for Profit organizations, please attach a list of the organization's officers and directors.	<input type="checkbox"/> ATTACHED
10.	Primary North American Industrial Classification System (NAICS) Code of the Company. Please provide at least the three-digit code, but the six-digit code is preferable	624110
11.	Company's Annual Revenue:	
12.	What share of the company's product or service is sold within Erie County:	%
13.	Miscellaneous Questions:	
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principals or Board Members presently the subject of any litigation, or is any litigation threatened, which would have a material adverse effect on the Company's financial condition?	
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals ever settled a debt with a lending institution for less than the full amount outstanding?	
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the company, its affiliates or any of its principals ever filed bankruptcy, a creditor's rights or receivership proceeding, or sought protection from creditors?	
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principal's delinquent on property, personal, and/or employment taxes?	

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals or Board Members ever been convicted of any felony or misdemeanor, other than a minor traffic violation, or are any charges pending?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company, its affiliates, or any of its principals, been cited for a violation of federal, State, or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution, or operating practices?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are there any outstanding judgments or lien pending against the Company, its affiliates, or any of its principals other than liens in the normal course of business? Amount: \$</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the company been accused of false or misleading statements, or been the subject of a proceeding or had any allegations made against them, by any federal, state, local agency or authority including but not limited to the SEC, FCC, FDA, or OSHA? If yes, please attach a written explanation to this application.</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant in compliance with the provisions prohibiting wage discrimination on the basis of gender as found in federal law, including the Equal Pay Act of 1963, Title VII of the Civil Rights Act of 1964, Federal Executive Order 11246 of September 24, 1965 and New York State Labor Law Section 194 (together "Equal Pay Law").</p>
14.	Qualifying Questions:
	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant a small business or small not-for-profit corporation with not more than 50 employees?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant a business or not-for-profit with a primary place of business located in Erie County, New York?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant's primary place of business located in a highly distressed area? (see map at https://www.ecidany.com/documents/HighlyDistressedAreaMap7-2-2013.pdf)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Applicant a Certified Minority or Certified Women-Owned Business?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Applicant a Certified Service-Disabled Veteran-Owned Business?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was the Applicant in business at least one year prior to March 7, 2020?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was the PPE expenditure made, or is it contemplated to be made, on or after March 7, 2020?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Applicant applied for and/or received grant funding from another IDA and/or state or federal funding source to support the purchase of PPE identified in the Project budget below?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Has the Applicant been negatively impacted by the COVID-19 Pandemic?</p>
15.	<p>Narrative:</p> <p>A. Provide a summary of all PPE equipment and fixture purchases previously purchased and the reason for their purchase.</p> <p>B. Provide a summary for all future PPE and fixture purchases the entity will be making, including an explanation of how it will be used (if applicable).</p> <p>C. Briefly discuss Applicants ties to the community and the impact of your work/service in Erie County.</p>

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**




EMPLOYMENT INFORMATION			
<i>Existing Jobs</i> – A full-time equivalent job equals any combination of two or more part-time jobs that, when combined, constitute the equivalent of a job of at least 35 hours per week.			
16.	Indicate how many existing full-time equivalent jobs the Applicant and its related entities employ in all ERIE COUNTY LOCATIONS	# Jobs in Erie County	9

Grant Request Budget			
17.	PPE and/or Fixture Installation Description Items or Vendor Contract (attach additional sheet as necessary)	Est. Cost of PPE/Fixtures (attach copy of proposal)	Actual Expenditure on PPE/Fixtures (attach paid receipts)
	SEE ATTACHED SHEET		
	Total Vendor Expense	\$	\$ 1974.41
	GRANT REQUESTED (<i>grant will be calculated by multiplying eligible costs x 90%</i>)	\$	\$ 1776.97

18. CERTIFICATION

I, Kate Hilliman, being duly sworn, state that I have read and understand all the questions and answers contained in the forgoing application and the documents that I have attached hereto; that I have supplied full and complete information in the answer to each question herein to the best of my knowledge, information and belief; and that all information I have supplied is true and correct. I further understand that false statements or intentional omissions made in this Application or in connection with the verification process may have an adverse consequence to my application/submission to the Erie County Industrial Development Agency.

In addition, I acknowledge that the Agency is subject to New York State's Freedom of Information Law (FOIL). I understand that all grant information and records related to this application are potentially subject to disclosure under FOIL subject to limited statutory exclusions.

Name of Company Official Completing Worksheet:	Title:	Date Completed:
Kate Hilliman, LMSW	Executive Director	9/21/2020
Signature: 		

ERIE COUNTY COVID-19 DISASTER EMERGENCY GRANT APPLICATION



(attach separate sheet if more room is needed)

West Side Community Services serves youth, families and seniors living in Buffalo's Niagara District of the West Side. From March - July we were closed and converted our in-person services to food pantries, PPE giveaway events, phone calling, and grocery delivery services for families and seniors. We re-opened with small, limited youth and senior programs in July and we continue to offer drop-in programs for youth and teens each day. We provide masks and hand sanitizer to all youth who attend our programs and have purchased masks for the community and our seniors, as well. We have easily spent over \$1,000 in sanitizing supplies, masks, gloves, barriers and hand sanitizers.

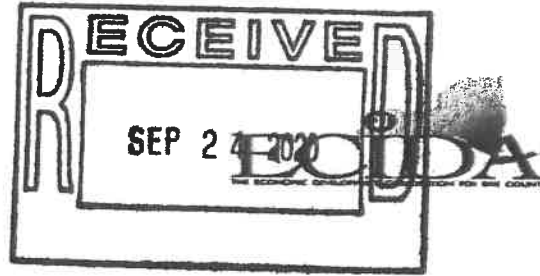
We plan to offer a full-day academic and child care program in October for working parents and we will need to do regular professional disinfection, which is expensive. In addition, we will need to purchase more PPE and sanitizing supplies to ensure our children and seniors remain safe. We will also be looking into installing more barrier devices particularly around our food service area.

We operate the only community center in the Niagara District. We provide daily support and resources to our youth and families and we are a lifeline for our area seniors. Since the Covid-19 crisis began, we have expanded services to include virtual and in-person tutoring, food pantries and giveaways, PPE giveaways, and provision of school supplies and other recreational needs. We are also the only community center currently open for drop-in evening activities and tutoring for teens. During a time when neighborhood violence, substance use and mental health crises are on the rise it is critical that we remain available to our youth and teens for support.

Grant Application Overview

APPLICANT	GRANT AMOUNT	PROGRAM PRIORITIES	STAFF RECOMMENDATION
Western New York Book Arts Collaborative, Inc.	\$2,396.20	Highly Distressed ✓	Recommended for Funding
<p>Synopsis:</p> <p>The Western New York Book Arts Collaborative, Inc. (hereafter Book Arts), located on Washington Street in the City of Buffalo, promotes greater understanding of printing and book-related arts through education, creation, and exhibition for a broad and diverse community. Book Arts refers to the creative and craft disciplines used to produce the structural elements of a book, such as printmaking, paper-making, calligraphy, origami, and bookbinding. Book Arts provides a variety of services (professional development, youth education, training, community print shop) to approximately 10,000 individuals annually. Book Arts signature education program, Printing Partners, provides access to 1,200 low-income youth of diverse cultural and ethnic backgrounds to participate in arts skill building within their neighborhoods.</p> <p>Book Arts estimates an anticipated financial loss of approximately \$73,000 attributes to the COVID-19 Disaster Emergency. The negative financial impact includes lost earned revenue, suspension of grant support and reduced annual donor base/fundraising. Book Arts is requesting support from the ECIDA Disaster Emergency Grant Program for actual and anticipated purchases of PPE (masks, thermometer, air filter, disinfectant, signage, plexiglass barriers) that will help keep staff and volunteers safe and allow for the safe reopening of the Center to the public.</p>			

ERIE COUNTY COVID-19 DISASTER EMERGENCY GRANT APPLICATION



Thank you for your interest in the Erie County Industrial Development Agency's Disaster Emergency Grant Program to assist small businesses and not-for-profits with purchasing Personal Protective Equipment (PPE) and fixtures necessary to prevent the spread of Novel coronavirus, COVID-19. We look forward to working with you to evaluate your project for possible financial assistance. To begin this process, please complete and return this Application along with required documentation.

COMPANY INFORMATION			
1.	Applicant Legal Name:	Western New York Book Arts Collaborative, Inc.	
2.	Applicant Address:	468 Washington Street, Buffalo, NY 14203	
3.	Legal Structure:	<input type="checkbox"/> C-Corp. <input type="checkbox"/> S-Corp <input type="checkbox"/> LLC <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Sole Proprietorship <input checked="" type="checkbox"/> Not-for-Profit	
4.	Applicant Contact Name:	Nicole Cooke	
5.	Contact Phone Number:	716-983-0562	Contact Email Address: nicole@wnybookarts.org
6.	Type of Business:	Please Describe Arts & Cultural Education Nonprofit (501c3)	
7.	Please submit a completed W-9, a signed copy of the organization's 2019 Federal Tax Return including all schedules or a 2019 CPA Audited Financial Statement and an interim Profit & Loss Statement and Balance Sheet through at least June 30, 2020.		
<input type="checkbox"/> ATTACHED			
8.	Number of years in business in Erie County		12
9.	Ownership: Privately held companies, please attach a description of the company's ownership structure, including the % of ownership for each individual and entity owning 20% or more of the company. Not for Profit organizations, please attach a list of the organization's officers and directors.		<input checked="" type="checkbox"/> ATTACHED
10.	Primary North American Industrial Classification System (NAICS) Code of the Company. Please provide at least the three-digit code, but the six-digit code is preferable		453920
11.	Company's Annual Sales:		
12.	What share of the company's product or service is sold within Erie County:	90 %	
13.	Miscellaneous Questions:		
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principals presently the subject of any litigation, or is any litigation threatened, which would have a material adverse effect on the Company's financial condition?		
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals ever settled a debt with a lending institution for less than the full amount outstanding?		
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the company, its affiliates or any of its principals ever filed bankruptcy, a creditor's rights or receivership proceeding, or sought protection from creditors?		
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Company or any of its principals delinquent on property, personal, and/or employment taxes?		
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company or any of its principals ever been convicted of any felony or misdemeanor, other than a minor traffic violation, or are any charges pending?		

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Company, its affiliates, or any of its principals, been cited for a violation of federal, State, or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution, or operating practices?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are there any outstanding judgments or lien pending against the Company, its affiliates, or any of its principals other than liens in the normal course of business? Amount: \$</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the company been accused of false or misleading statements, or been the subject of a proceeding or had any allegations made against them, by any federal, state, local agency or authority including but not limited to the SEC, FCC, FDA, or OSHA? If yes, please attach a written explanation to this application.</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant in compliance with the provisions prohibiting wage discrimination on the basis of gender as found in federal law, including the Equal Pay Act of 1963, Title VII of the Civil Rights Act of 1964, Federal Executive Order 11246 of September 24, 1965 and New York State Labor Law Section 194 (together "Equal Pay Law").</p>	
<p>14.</p>	<p>Qualifying Questions:</p>	
	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant a small business or small not-for-profit corporation with not more than 50 employees?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant a business or not-for-profit with a primary place of business located in Erie County, New York?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the Applicant's primary place of business located in a highly distressed area? (see map at https://www.ecidany.com/documents/HighlyDistressedAreaMap7-2-2013.pdf)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Applicant a Certified Minority or Women-Owned Business?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the Applicant a Certified Service-Disabled Veteran-Owned Business?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was the Applicant in business at least one year prior to March 7, 2020?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was the PPE expenditure made, or is it contemplated to be made, on or after March 7, 2020?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Applicant applied for and/or received grant funding from another IDA and/or state or federal funding source to support the purchase of PPE identified in the Project budget below?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Has the Applicant been negatively impacted by the COVID-19 Pandemic?</p>	
<p>15.</p>	<p>Narrative:</p> <p>A. Provide a summary of the need for the expenditures including all PPE and/or Fixtures the business or non-profit entity will be purchasing and how they will be used.</p> <p>B. Briefly discuss the Applicant's ties to the community and the impact of your work in Erie County.</p>	
	<p>400 characters (<i>attach separate sheet</i>)</p>	

**ERIE COUNTY COVID-19 DISASTER
EMERGENCY GRANT APPLICATION**



EMPLOYMENT INFORMATION			
<i>Existing Jobs</i> – A full-time equivalent job equals any combination of two or more part-time jobs that, when combined, constitute the equivalent of a job of at least 35 hours per week.			
16.	Indicate how many existing full-time equivalent jobs the Applicant and its related entities employ in all ERIE COUNTY LOCATIONS	# Jobs in Erie County	3

Grant Request Budget			
17.	PPE and/or Fixture Installation Description Items or Vendor Contract (attach additional sheet as necessary)	Est. Cost of PPE/Fixtures (attach copy of proposal)	Actual Expenditure on PPE/Fixtures (attach paid receipts)
	Please see attached sheet for item descriptions.		
	Total Vendor Expense	\$ 1,764.19	\$ 898.25
	GRANT REQUESTED (grant will be calculated by multiplying eligible costs x 90%)	\$ 1,587.77	\$ 808.43

18. CERTIFICATION

I, Nicole Cooke, being duly sworn, state that I have read and understand all the questions and answers contained in the forgoing application and the documents that I have attached hereto; that I have supplied full and complete information in the answer to each question herein to the best of my knowledge, information and belief; and that all information I have supplied is true and correct. I further understand that false statements or intentional omissions made in this Application or in connection with the verification process may have an adverse consequence to my application/submission to the Erie County Industrial Development Agency.

In addition, I acknowledge that the Agency is subject to New York State's Freedom of Information Law (FOIL). I understand that all grant information and records related to this application are potentially subject to disclosure under FOIL subject to limited statutory exclusions.

Name of Company Official Completing Worksheet:	Title:	Date Completed:
Nicole Cooke	Executive Director	9/22/2020
Signature:		



Narrative:

A. Provide a summary of the need for the expenditures including all PPE and/or Fixtures the business or non-profit entity will be purchasing and how they will be used. B. Briefly discuss the Applicant's ties to the community and the impact of your work in Erie County. 400 characters (attach separate sheet)

PPE & new fixtures are required to keep staff and guests safe as we continue to work in our studios & prepare to cautiously reopen to the public, in our space & at partner sites. We are WNY's only public studio devoted to print & book-related arts. Virtual options remain available but demand for in-person programs is high as Erie County residents seek hands-on experiences fighting the isolating effects of COVID, especially our free Printing Partners family workshops.

Szewczyk, Lori

From: Nicole Cooke <nicole@wnybookarts.org>
Sent: Tuesday, September 29, 2020 2:43 PM
To: Szewczyk, Lori
Subject: Re: ECIDA Disaster Emergency Grant Application

[Message is from an external source]

Hi Lori,

Thank you for the opportunity to amend our application; please see my response below.

- *Brief summary (paragraph) detailing how the pandemic/NYS emergency declaration has negatively impacted your organization/operation – email response is fine*

Between March 13 and May 1, 2020, Book Arts lost upwards of \$25,000 in earned revenue as a result of postponed events, cancelled workshops, reduced demand for commercial work, and unfulfilled education contracts. Unlike many of our cultural peers, our organization can boast significant levels of earned revenue, recorded at 47% of total in 2019. Its total anticipated loss (including only those funds that can be directly attributed to the COVID-19 crisis from March 16 - August 30, 2020) is expected to be about \$73,100. This is a conservative estimate as 2020 budget projections were based on the previous year's actuals with only slight increases made to reflect investments in staff development, marketing, branding, and community outreach over the past few years. (Between Book Arts focus on organizational & staff development and significant building renovation projects 2019 was a modest income generating year.) Losses include approximately \$15,000 in grant support that was projected from a funding partner who suspended all current applications in anticipation of crisis-related needs, but does not include any projected reductions to the organization's annual campaign, membership, or individual donor base (all of which are likely to come in lower than budgeted).

Best,

Nicole

On Tue, Sep 29, 2020 at 11:57 AM Szewczyk, Lori <lszewczyk@ecidany.com> wrote:

Hi Nicole:

Thank you for submitting your application to the ECIDA's COVID-19 Disaster Emergency Grant Program. Your proposal is currently being processed; however, we need some additional information to complete the review. At your earliest convenience, please provide the following:

- ✓ • Brief summary (paragraph) detailing how the pandemic/NYS emergency declaration has negatively impacted your organization/operation – email response is fine

Thank you for your attention in this matter.

Respectfully,

Lori A. Szewczyk

Director of Grants

Direct Line (716) 362-8363

lszewczyk@ecidany.com

ECIDA

95 Perry Street, Suite 403

Buffalo, NY 14203

Main (716) 856-6525

Fax (716) 362-8393

www.ecidany.com

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	<p>Nicole Cooke <i>Executive Director</i> WNY Book Arts Center, 468 Washington St. Buffalo, NY 14203 Shop for activity kits, stationery, artisan goods, & more at wnybookarts.org Join in on the fun! Sign up for our newsletter</p>
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