

## **Rotary District 5130 Business Recovery Grant Program**

**Program Goals:** Assist in fire recovery for small businesses in the affected areas of Sonoma, Napa, Lake and Mendocino counties by providing an infusion of funds to allow for re-establishment of business operations. Emphasis is placed assisting agricultural, store front, and home businesses get back into operation and prevention from closure due to losses suffered as a result of the fires.

### **Program rules:**

- Grants of up to no more than \$5,000 will be made based upon demonstrated need.
- The approved grant does not need to be repaid.
- A business is only eligible to receive no more than 1 Rotary Business Recovery Grant.
- The grant may be approved to replace inventory, equipment, tools, uncovered repairs, et al necessary to the re-establishment of the business.
- Grants cannot replace lost revenues or employee wages
- Affected businesses that have insurance or have applied for business loans (private or government) are not prevented from applying for the grant.

### **Process:**

- Submit completed and signed Rotary Business Recovery Grant Application to the Rotary District 5130 Fire Relief Fund by either mail to PO Box 2921, Clearlake, CA 954522 or via email to [larca5130@gmail.com](mailto:larca5130@gmail.com)
- Business owner will be contacted by a member of the business grant sub-committee who will schedule a site visit to the business and discussion with owner(s)/applicant(s) regarding business needs, how the funds will be used and the impact of the grant on their ability to reopen or continue business operations. The subcommittee will also verify the status of the business prior to the loss associated with the fires.
- The committee will consider the request and assess the viability of the grants funds on allowing the business to remain open or reopen as a result of the grant.
- The business owner will be contacted with the results of their application in a timely manner by a representative of the sub-committee. Business owner will be asked to provide a progress report to the Rotary District 5130 Fire Relief Fund on the status of business operations and the effect of the grant received.

For more information, contact [larca5130@gmail.com](mailto:larca5130@gmail.com)

**Rotary District 5130 Business Recovery Grant Application**

The purpose of this application is to obtain information from you regarding your business, how it was affected by the recent wildfires of Sonoma, Napa, Mendocino and Lake Counties, how much financial assistance you need, and how you will use the funds if awarded to you. Please complete this application in its entirety. Questions - email [larca5130@gmail.com](mailto:larca5130@gmail.com)

Name(s): \_\_\_\_\_

Business Name: \_\_\_\_\_

Cell Phone : \_\_\_\_\_ Business Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Business Physical Address: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_

Number of Years in Business: \_\_\_\_\_ # of Employees (excluding owners): \_\_\_\_\_

Services or Products You Provide: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Impact of Fire on Business Operations: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Application Amount (up to \$5,000) \$ \_\_\_\_\_

Are you willing to provide us with documentation (receipts, cost breakdowns, etc) regarding the use of these funds? YES \_\_\_\_\_ NO \_\_\_\_\_

Are you willing to provide a progress report on status of business and the effect of the Business Grant on the sustainability of your business? YES \_\_\_\_\_ NO \_\_\_\_\_

To what degree, if any, are you insured for any of your losses?

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What is your current status of any insurance settlement/payments?

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Have you received any other resources, donations, or grants as a result of the fire? If so, please describe.

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Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

Title \_\_\_\_\_

Co-Applicant Signature \_\_\_\_\_

Submit completed grant application to:

Rotary District 5130 Business Grant Program

P. O. Box 2921

Clearlake, CA 95422

Or via email to [larca5130@gmail.com](mailto:larca5130@gmail.com)

**For Grant Approval Subcommittee Use Only:**

Comments:

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SUBCOMMITTEE RECOMMENDATION: Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

Date: \_\_\_\_\_

Signed: \_\_\_\_\_