



Find your place

**Small Business Disaster Assistance  
Program**

Administered by  
**Community Development Services Department**

Adopted by City Council  
05/05/2020

**CITY OF OCALA  
SMALL BUSINESS DISASTER ASSISTANCE  
PROGRAM**

**Purpose:**

The purpose of the Small Business Disaster Assistance Program (SBDAP) is to assist small businesses within the Ocala city limits and utility service areas that may, or may not, qualify for other state and federal disaster assistance programs. This program is intended for the purpose of business retention and provides limited assistance to small businesses as a result of a national, state or local disaster declaration including pandemics.

Under this program the City may, on a first-come, first-qualified basis provide financial assistance to a company that meets the Eligibility Requirements as well as Program Administration criteria.

**Authorization:**

This program is established under the City's Economic Investment Program and is authorized by the Ocala City Council.

**Source of Funds**

Funding will be allocated to the program at the discretion of City Council.

**Program Administration:**

1. The program will pay up to \$2,500 as a one-time grant to be used toward operational expenses. In the case of a natural disaster (e.g. hurricanes, earthquakes, etc.), funds may be used for payment of emergency repairs or insurance deductibles.
2. Recipients must apply for the funds and submit documentation (such as lease agreement, mortgage and/or utilities) supporting the requested grant amount.
3. Funds are to be used only for operational expenses such as lease or mortgage payments, or utility expenses not covered by other Federal, State or Local programs
4. The program is managed by the City's Economic Development office
5. Applications will be received and awarded on a first-come, first-qualified basis contingent upon availability of funding.
6. Incomplete applications will not be processed.

**Eligibility Requirements:**

1. Small business identified as 25 or fewer individuals paid as employees or contract labor
2. Locally owned
3. Non-chain
4. Business must be located within the city limits or within the Ocala Utility Services territory
5. Must have been current with lease/mortgage payments, taxes and utility payments at the time of the emergency declaration.
6. Cannot have any liens, warrants or judgments against the owner or the business at time of application
7. Cannot have any outstanding code violations at the time of application

**Exclusions:**

1. Home-based businesses
2. Non-profit entities
3. Funds cannot be used for any payroll purposes including, but not limited to salaries, bonuses, retirement contributions or payments, severance pay, etc.

**Process:**

The application process is administered by the **Community Development Services Department**. Interested parties must submit their application to the Community Development Services Department. Only completed eligible applications will be processed for funding consideration. The estimated timeframe from receipt of **completed** application to payment is four weeks. The process may be delayed if the applicant does not respond to requests for information in a timely manner.

**Steps:**

1. Eligible company submits completed application to the City. Application must include a copy of each of the following:
  - Current lease agreement or mortgage
  - Most recent RT-6 quarterly wage report (or similar document acceptable to city)
  - Most recent utility bills (water, sewer, garbage, phone, Internet, gas)
  - Recent Sunbiz annual report (if business is registered on Sunbiz)
  - City of Ocala Business Tax Certificate, if applicable
  - Completed W-9 signed by an authorized owner
  - Completed New Vendor Information form
  - Completed Electronic Funds Transfer form(Additional information may be requested)
2. Submit complete application to the contact on the application form. Applications will be date and time stamped in order of receipt.
3. Within five (5) business days of receipt, City reviews application for eligibility and completeness of document submission and provides notice of award.
4. Staff initiates the payment process which may take up to two weeks based on City's payment processing schedules.

**CITY OF OCALA  
SMALL BUSINESS DISASTER ASSISTANCE PROGRAM  
APPLICATION**

Apply on-line at [ocalacitygrants.org](http://ocalacitygrants.org)

Send questions to: [citygrants@ocalafl.org](mailto:citygrants@ocalafl.org)

**COMPANY RELATED QUESTIONS  
(Existing Location)**

**Company:** (Applicant) \_\_\_\_\_

**Primary Contact:** (Title) \_\_\_\_\_ **Secondary Contact:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Physical Address:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Web Page:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Type:** (ie. Sole Proprietor, Corporation, Partnership) \_\_\_\_\_

**Parent Company:** \_\_\_\_\_

**Industry:** (hospitality, retail, personal services, etc.) \_\_\_\_\_

**City of Ocala Business Tax Certificate Number, if applicable:** \_\_\_\_\_

Is this business minority owned? Yes \_\_\_\_\_ No \_\_\_\_\_

Is this business women owned? Yes \_\_\_\_\_ No \_\_\_\_\_

**ASSISTANCE RELATED QUESTIONS**

**Number of Employees on payroll as of March 1, 2020.:**

Number	Average Monthly Payroll for past 12 months.
_____	\$ _____

**Grant Amount Requested (up to \$2,500):**

\$ \_\_\_\_\_

**Explain what operational expenses will be paid with this grant (supporting documentation required, such as lease agreement, last utility bill):**

\_\_\_\_\_

**GENERAL QUESTIONS**

**Are federal and state employee withholding tax payments current?**

Yes \_\_\_\_\_ No \_\_\_\_\_ (If no, explain)

\_\_\_\_\_

**Are sales and other business tax payments current?**

Yes \_\_\_\_\_ No \_\_\_\_\_ (If no, explain)

\_\_\_\_\_

**Are business and personal (including partners) federal and state income tax payments current?**

Yes \_\_\_\_\_ No \_\_\_\_\_ (If no, explain)

\_\_\_\_\_

**Are payments to vendors and suppliers current?**

Yes \_\_\_\_\_ No \_\_\_\_\_ (If no, explain)

\_\_\_\_\_

**Are property tax and utility payments current at the existing business location?**

Yes \_\_\_\_\_ No \_\_\_\_\_ (If no, explain)

\_\_\_\_\_

**Is the company or any of its partners involved in any judgments, liens, or pending litigation?**

Yes \_\_\_\_\_ No \_\_\_\_\_ (If yes, explain)

---

**Has the company or any of its partners declared bankruptcy in the last 5 years?**

Yes \_\_\_\_\_ No \_\_\_\_\_ (If yes, explain)

---

**Has the applicant applied for, intending to apply for, or has received any financial assistance from other governmental entities for this disaster? Receipt of SBA and PPP loans will not disqualify the applicant from this grant program.**

Yes \_\_\_\_\_ No \_\_\_\_\_ (If yes, explain)

---

**Does the company or property owner have any outstanding code violations?**

Yes \_\_\_\_\_ No \_\_\_\_\_ (If yes, explain)

---

I hereby certify this application to be true and accurate to the best of my knowledge and understand that providing false information is a violation punishable by law. I understand that application consideration is contingent on favorable review of the company's completed application and that all requested documents are genuine. I further state and agree to adhere to all ordinances of the City of Ocala and understand that by approving this application the City is not waiving compliance with requirements of the current code of ordinances and adopted building regulations.

---

Company Name (Type or Print)

---

Signature

---

Type or Print Name and Title

---

Date