



Charles C. Kokoros  
Mayor

## TOWN OF BRAintree

One JFK Memorial Drive  
Braintree, Massachusetts 02184  
Tel: 781-794-8100

### **Braintree Small Business COVID-19 Relief Program Pre-Application Guide**

#### **Braintree Small Business COVID-19 Relief Program**

The Mayor's Office is administering a small business relief program for Braintree businesses impacted by the severe economic interruption related to the impact of COVID-19. The program provides short-term working capital assistance to enable the viability of the business during the severe economic interruption related to the impact of the COVID-19 pandemic. Grant funding may be used for rent, mortgage payments, staffing, utilities, personal protective equipment, and costs for adapting to operations during the pandemic. This Program is funded with \$320,000 of Community Development Block Grant (CDBG-CV) funds. This guide will help you complete the pre-application form and understand better the process for receiving assistance. We have included some Frequently Asked Questions (FAQs) at the end.

To be eligible for assistance, you must meet the following criteria:

- Business must be a microenterprise (a commercial enterprise that has 5 or fewer employees, 1 or more of whom owns the enterprise).
- Business owner(s) must qualify under the Low-Moderate Income (LMI) Limited Clientele national objective criteria. All owners of the business must earn an annual income equal to or less than 80% of their Area Median Income (AMI) based on family size (see appendix A).
- A small locally owned enterprise with a brick and mortar location in the Town of Braintree. If a franchise, the parent company must be based in the Commonwealth of Massachusetts.
- A small for profit business (sole proprietorships, partnerships, corporation, or LLC)
- A small locally owned business that provides goods or services to multiple clients or customers.
- A small locally owned business must be currently in operation and have been established prior to October 1, 2019, though priority will be given to businesses established prior to January 1, 2019.
- A small locally owned business that can demonstrate at the time of application it is current on all state and local taxes.
- The business must be able to document a loss of income greater or equal to the amount requested due to COVID-19. Example documentation: Personal or business tax returns, business financial statements, sales, year/year quarter/quarter comparisons.
- Not listed as one of the following excluded business types:
  - real estate rentals/sales businesses;
  - businesses owned by persons under age 18;
  - businesses that are chains;
  - liquor stores;

- weapons/firearms dealers;
- lobbyists; or
- cannabis-related businesses.

Requirements of any grant award:

- Business owners must provide income verification.
- The grant is to be used for payment of rent, mortgage payments, staffing, utilities, personal protective equipment, and costs for adapting to operations during the pandemic. The maximum total grant award to any small business is \$10,000.
- Documented loss equal to or greater than the requested assistance due to COVID-19.
- Only one micro business per owner is eligible for submitting an application. Multiple applications from co-owners or others affiliated with a previously submitted application will not be awarded.
- Grant funds will be advanced to the business to pay for eligible costs, and documentation of what the grant funds paid must be provided to the Town within 30 - 45 days.
- Grant funds cannot be used to reimburse costs paid by another source. The business will be required to submit a signed Duplication of Benefits Certification for CDBG-CV Funds Form (Appendix A of Final Application).

The Town will award and disburse grants based upon eligibility criteria on a first come, first served basis until available funds are exhausted. If you meet the eligibility criteria, a representative from the Town will contact you via e-mail to complete a full application and submit the necessary back up documentation. Failure to provide accurate information in the pre-application may result in your removal from the program at this stage. Also, failure to respond to staff in a timely fashion may result in your removal from the program and reallocation of your assistance to another eligible business. Once you have completed the final application and submitted all necessary documentation, you will be eligible to receive assistance in the amount of up to \$10,000.00.

If you need assistance completing the form, you may contact the Mayor's Office at 781-794-8100 or [smallbusinessrelief@braintreema.gov](mailto:smallbusinessrelief@braintreema.gov) - please include your name, address, and phone number.

## Appendix A

“Low- to moderate-income” is no more than 80% of the Area Median Income, based on current income, as determined by the U.S. Department of Housing and Urban Development. The income limit is based on the number of people living in your household, including any roommates, children, and immediate or extended family living with you. Business owner may live outside of Braintree area. Please see [https://www.huduser.gov/portal/datasets/il/il2020/select\\_Geography.odn](https://www.huduser.gov/portal/datasets/il/il2020/select_Geography.odn) for income limits for your city of residence.

Income Limits for the Boston-Cambridge-Quincy, MA-NH HUD Metro FMR Area for FY2020:

Household Size	Household Income Limit
1 PERSON	Less than \$67,400
2 PERSONS	Less than \$77,000
3 PERSONS	Less than \$86,650
4 PERSONS	Less than \$96,250
5 PERSONS	Less than \$103,950
6 PERSONS	Less than \$111,650
7 PERSONS	Less than \$119,350
8 PERSONS	Less than \$127,050

### Frequently Asked Questions (FAQs)

**1. *Who is eligible for Braintree Small Business COVID-19 Relief Program? What type of assistance will I receive?***

Businesses that have been impacted by the severe economic interruption related to the impact of the COVID-19 pandemic are eligible. The business must be a microenterprise (a commercial enterprise that has 5 or fewer employees, 1 or more of whom owns the enterprise). The business owner(s) must qualify under the Low-Moderate Income (LMI) Limited Clientele national objective criteria. All owners of the business must earn an annual income equal to or less than 80% of the Area Median Income (AMI) based on family size. Business that meet the eligibility criteria will receive assistance in the amount of up to \$10,000 through the Braintree Small Business COVID-19 Relief Program.

**2. *What do I need to do if I'm eligible? What documents do I need to provide?***

If you are eligible, you will be required to submit documents to the Town to verify your eligibility and to help us provide you with business assistance. Businesses will be asked to provide a copy of their lease/rental agreement, information about their monthly expenses, information about their employees and proof of household income (see question 7), and personal or business tax returns, business financial statements, sales,

year/year quarter/quarter comparisons. Some businesses may be asked to provide additional documentation. We will never ask about your citizenship status or ask for any immigration documentation.

The Town is committed to your privacy. If you are eligible, your application may be subject to a monitoring by the Town and DHCD in order to meet CDBG program requirements. Your information will not be shared outside of the Town or DHCD.

**3. *Is the funding a grant?***

Yes, the assistance through the Braintree Small Business COVID-19 Relief Program is a grant. The grant will require repayment only if the terms of the grant agreement are not met.

The Mayor's Office staff will work with eligible business owners to complete the full application. Staff will help answer any questions you have and will review your application once it is complete. If the staff approves your application, we will issue a grant agreement. Grant funds will be advanced to the business to then pay for eligible costs, and documentation of what the grant funds paid must be provided to the Town within 30 - 45 days. Grant funds cannot be used to reimburse costs paid by another source. The business will be required to submit a signed Duplication of Benefits Certification for CDBG-CV Funds Form (Appendix A of the Final Application).

**4. *Is there a cap on how much assistance I can receive from the Braintree Small Business COVID-19 Relief Program?***

You may receive up to \$10,000 in assistance.

**5. *If I'm not eligible for the Braintree Small Business COVID-19 Relief Program, what should I do?***

If you are not eligible for this program, you may still be eligible for business assistance from other local sources.

**6. *What do I do if I can't fill out the form online because of a disability, lack of internet access, a language barrier, or some other reason?***

If you need assistance completing the form, you may contact 781-794-8100 or [smallbusinessrelief@braintreema.gov](mailto:smallbusinessrelief@braintreema.gov). Please include your name, address, and phone number.

**7. *How do I calculate my current family income?***

Please see [https://www.ecfr.gov/cgi-bin/text-idx?SID=db9966875c02b9b808b58d2494874a6a&mc=true&node=sp24.1.5.f&rgn=div6#se24.1.5\\_1612](https://www.ecfr.gov/cgi-bin/text-idx?SID=db9966875c02b9b808b58d2494874a6a&mc=true&node=sp24.1.5.f&rgn=div6#se24.1.5_1612)

Income information means information relating to a family's income, including:

(1) All employment income information known to current or previous employers or other income sources that HUD or the processing entity determines is necessary for purposes of determining an assistance applicant's or participant's eligibility for, or level of assistance in, a covered program;

(2) All information about wages, as defined in the State's unemployment compensation law, including any Social Security Number; name of the employee; quarterly wages of the employee; and the name, full address, telephone number, and, when known, Employer Identification Number of an employer reporting wages under a State unemployment compensation law;

(3) With respect to unemployment compensation:

(i) Whether an individual is receiving, has received, or has applied for unemployment compensation;

(ii) The amount of unemployment compensation the individual is receiving or is entitled to receive; and

(iii) The period with respect to which the individual actually received such compensation;

(4) Unearned IRS income and self-employment, wages and retirement income as described in the Internal Revenue Code, 26 U.S.C. 6103(l)(7); and

(5) Wage, social security (Title II), and supplemental security income (Title XVI) data obtained from the Social Security Administration.

**8. *How do I calculate my family size?***

Family includes, but is not limited to, the following, regardless of actual or perceived sexual orientation, gender identity, or marital status:

1. A single person, who may be an elderly person, displaced person, disabled person, near-elderly person, or any other single person; or
2. A group of persons residing together, and such group includes, but is not limited to:
  - i. A family with or without children (a child who is temporarily away from the home because of placement in foster care is considered a member of the family);
  - ii. An elderly family;
  - iii. A near-elderly family;
  - iv. A disabled family;
  - v. A displaced family; and
  - vi. The remaining member of a tenant family.

**9. *How do I verify my income?***

If you used 2020 projected total household income to determine LMI, please provide the following income verification:

1. Wages or distributions paid to the owner for most recent 8-week period
2. Wages or other income & pay stubs for most recent 8-week period
3. Wages or other income

4. Pay stubs for most recent 8-week period for every member of your household age 18+ working for an employer
5. Unemployment verification letter & pay stubs for most recent 8-week period of unemployment benefits
6. Benefit statement, verification letter or periodic statement for: Public Assistance, Child Support, VA, Unemployment, Social Security, SSI, disability and each pension/investment income source stating the amount and frequency of benefit (All that apply)
7. 2 months of any/all checking and savings accounts for every member of your household age 18+ working for an employer

***10. What documentation is needed to demonstrate that the COVID-19 pandemic has caused a loss of income equal to or greater than the requested assistance?***

Some examples of documentation would be to show loss of income through bank statements, budgeting or unemployment payments.

***11. How is “currently in operation” defined? If a business was in operation but closed because of COVID, are we eligible for this funding?***

“Currently in operation” means that the business has not permanently closed, gone out of business, filed for bankruptcy.

***12. Am I eligible if I’m an immigrant? Is this assistance included in the public charge rule?***

We do not collect information about immigration status. Immigration status does not affect eligibility for this program. The type of assistance being offered through the Braintree Small Business COVID-19 Relief Program is not included in the public charge determination.

***13. Why are you asking about my race and ethnicity?***

We collect this information for data collection purposes only. Your race and ethnicity do not impact your eligibility for rental assistance or your likelihood of being selected for an award. We use the aggregate data to ensure that our program is accessible to everyone in our community.

***14. Will there be more funding available later? Will I be eligible for future programs?***

There is currently no funding available to fund this program after this first round of assistance. If funding becomes available and the program runs again, the Town reserves the right to change the eligibility criteria, amount of assistance, and other aspects of the program.