



COVID-19 Relief Fund

Grant Application

Criteria: To qualify for funds from the Coshocton Port Authority Emergency Relief fund:

1. Must be a business in Coshocton County that has been impacted by the COVID-19 pandemic.
2. Provide a narrative about your business and demonstrate the financial impact COVID-19 has had on your business.
3. Provide the mortgage/rent/utility documents. (Invoice or Statement)

Please forward grant applications to the attention of Brenda Stamper brendastamper@coshoctoncounty.net).

Date: _____

Name of Organization: _____

EIN #: _____

Person Submitting Request: _____

Contact Information:

Agency address: _____

Phone: _____

Email: _____

Website: _____

What other funds are you seeking to assist you through this difficult time: _____

Have you been granted any of the requested funds? _____

Date funding needed: _____ Request Amount: \$ _____

The awarded amount will be determined based upon need. The maximum amount awarded will be \$3500. Coshocton Port Authority will pay the creditor(s) directly should your request be granted. The Emergency Relief Fund Committee reserve the right to approve or reject an application. Your business is strongly encouraged to file for the Federal/State level disaster relief. As well as work with SBDC while experiencing a closure/reduction in business to ensure their success once business returns to normal activity. You will be notified promptly of any decision or need of further documentation.

I agree to that our organization meets the stated criteria for this micro grant and have provided the required documents for review.

Applicant Signature _____