



## **Mentor Small Business Employee Retention Grant Program Guidelines**

The City of Mentor has established the Mentor Small Business Employee Retention Grant (Bridge the Gap) Program to assist small businesses that qualify and have been affected by the COVID-19 pandemic by providing grant funds to those that verify that they have retained or created a low-to-moderate income position as defined by the U.S. Department of Housing and Urban Development.

### **ELIGIBLE USES**

- \$1,000 maximum reimbursement for retaining or creating a low-to-moderate income position

See HUD Income Limits for Cleveland-Elyria MSA here:

<https://www.huduser.gov/portal/datasets/il/il2021/2021summary.odn>

### **GRANT CRITERIA**

These criteria fall in line with the HUD requirements and the City's Community Development Block Grant (CDBG) Comprehensive Plan.

Applicants must meet the following criteria to be eligible for the Bridge the Gap Program:

- Must certify grant will assist the business in retaining OR HIRING at least one (1) low-to-moderate income (LMI), full-time equivalent employee/position;
- Must have been in continuous operation and without closure (outside of mandatory State-imposed restrictions) since March 1, 2020;
- Must currently employ at least three (3) full-time equivalent employees and not more than 50 employees (may combine part-time employees to satisfy the three (3) employee requirement);
- Must retain employee or filled position for no less than one year (owner must interview at least 51% LMI people for vacant position(s));
- Cannot be a franchise with more than four (4) locations and all of which must be located within the state of Ohio, and must be independently owned and operated;

- Must be a for-profit business located within the jurisdictional boundaries of the city of Mentor and operate out of a physical location contained in B-1, B-1, B-1, M-1, M-2 and MIP zoned areas (home-based businesses not eligible);
- Is not in default or currently delinquent on any loan provided through the Mentor Economic Assistance Corporation;
- Must be current on property taxes and municipal fees;
- Owner must have a valid SSN, EIN, DUNS, and business bank account;
- Owner must be 18 years of age or older;
- Must have not filed for bankruptcy within the last 12 months;
- Must not have a conflict of interest with the City of Mentor (i.e., no persons employed by the City of Mentor and their immediate family, elected officials and their immediate family, or a person with a financial interest in a contract with the City of Mentor); and
- Agree to any regulatory or audit requirements as determined by the City of Mentor and/or the Department of Housing and Urban Development.

### **APPLICATION PROCESS**

- Application is to be made through the City of Mentor Economic Development Department.
- Applications will be reviewed, verified, and funds distributed on a first-come, first-served basis with applications able to be submitted via email on Friday, April 23, 2021 at 9:00 a.m. or later. Applications made earlier than that time will not be accepted. Applications for the program will be available on the Mentor Means Business website ([www.mentormeansbusiness.com](http://www.mentormeansbusiness.com)) starting on Wednesday, April 14, 2021.
- Applications must be complete, including the certification for position creation or retention (please see attached form).

**Please submit to:**            **Department of Planning and Development**  
 Email: [business@cityofmentor.com](mailto:business@cityofmentor.com)  
 Phone: 440-974-5740

MENTOR SMALL BUSINESS EMPLOYEE RETENTION GRANT PROGRAM APPLICATION  
"BRIDGE THE GAP" PROGRAM

APPLICANT INFORMATION

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

Applicant Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

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

Business Address (City, State, Zip Code): Mentor, OH 44060

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

Business Email Address: \_\_\_\_\_

Business Website: \_\_\_\_\_

Number of employees prior to the pandemic: \_\_\_\_\_

Current number of employees: \_\_\_\_\_

*Must have at least three (3) full-time equivalent positions and not more than 40.*

Does the applicant or co-applicant owe any property taxes or fees to the City of Mentor?

Yes  No

Is the applicant or co-applicant one or more of the following:

Involved in a political campaign?  Yes  No

A candidate or public official or foreign official?  Yes  No

An immediate family member of a political official?  Yes  No

A member of a local board or committee?  Yes  No

Received or expected to receive a financial interest or benefit from a CDBG-related activity or contract?  Yes  No

Has an immediate family member who received or expected to receive a financial investor benefit from a CDBG-related activity or contract?  Yes  No

If yes to any of the above questions, please provide details below:

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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Office use only:

Date and time application received: \_\_\_\_\_

Application Complete?    Yes    No



# CITY OF MENTOR

## CDBG JOB CREATION/RETENTION CERTIFICATION FORM

*This is a confidential form to be used for reporting job creation and retention to the City of Mentor, as required by the U.S. Department of Housing and Urban Development. Complete one (1) form for each job created or retained.*

### **EMPLOYEE SECTION**

*To be completed by employee.*

Employee Name: \_\_\_\_\_

Position Title: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State & Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

### **I. Race/Ethnic Origin:** Check one in the table below.

<b>Racial Categories</b>	<b>Race/Ethnic Origin</b>
American Indian or Alaskan Native	<input type="checkbox"/>
Asian	<input type="checkbox"/>
Black or African American	<input type="checkbox"/>
Native Hawaiian or Other Pacific Islander	<input type="checkbox"/>
White	<input type="checkbox"/>
American Indian or Alaskan Native <b>AND</b> White	<input type="checkbox"/>
Asian <b>AND</b> White	<input type="checkbox"/>
Black/African American <b>AND</b> White	<input type="checkbox"/>
American Indian/Alaskan Native <b>AND</b> Black/African American	<input type="checkbox"/>
Other	<input type="checkbox"/>

Do you identify as Hispanic/Latinx?  Yes  No

### **II. Annual Individual Income Status:** Check the one that applies. Account for the salary associated with this position. Family size is one (1) for CDBG-CV funds.

<input type="checkbox"/>	\$0 - \$16,000	<input type="checkbox"/>	\$26,601 - \$42,600
<input type="checkbox"/>	\$16,001 - \$26,600	<input type="checkbox"/>	\$42,601 +

### **III. Gender and Disability:**

Male  Female  Prefer not to answer

If female, are you head of household?  No  Yes

Disabled  Not Disabled

**CDBG JOB CREATION/RETENTION CERTIFICATION FORM**

**EMPLOYER SECTION**

*To be completed by employer.*

Company Name: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Company Street Address: \_\_\_\_\_

City, State & Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

**Position Information:**

This position is:  A New Position  A Retained/Existing Position

This position is:  Full-Time Position  Part-Time Position

Position Title: \_\_\_\_\_

Employee Hire Date: \_\_\_\_\_ Employee Start Date: \_\_\_\_\_

Number of Hours Per Week: \_\_\_\_\_ Was the employee unemployed prior to hiring?  Yes  No

Rate Per Hour: \_\_\_\_\_ Annual Rate: \_\_\_\_\_

<b>Job Category for this Position:</b> <i>Check the one that applies.</i>					
<input type="checkbox"/>	Official or Manager	<input type="checkbox"/>	Sales	<input type="checkbox"/>	Operative (Semi-skilled)
<input type="checkbox"/>	Professional	<input type="checkbox"/>	Office or Clerical	<input type="checkbox"/>	Laborer (Unskilled)
<input type="checkbox"/>	Technician	<input type="checkbox"/>	Craft Worker (Skilled)	<input type="checkbox"/>	Service Worker

**Mark and initial only for job retention:** I certify that this position was  threatened by layoff, out of area relocation or it was  a vacant position that our business could not fill if it wasn't for the Community Development Block Grant (CDBG) funded business assistance services. I hereby also certify that  the job is held by a low- or moderate-income person, or it will be turned over within the following two years, and steps will be taken to ensure that the job will be filled by or made available to a low- or moderate-income person.

**Initial:** \_\_\_\_\_

**Initial for job creation and retention:** If this job is not held by a low- or moderate-income person, I certify that I took reasonable action to ensure that low- to moderate-income persons received first consideration for filling this position. I also certify that this job is reasonably expected to turn over to a low- or moderate-income persons within two years.

**Initial:** \_\_\_\_\_

Signature of Company Representative: \_\_\_\_\_ Date Signed: \_\_\_\_\_

City of Mentor Representative: \_\_\_\_\_ Date Signed: \_\_\_\_\_