



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>

FY 2021 Income Limits Summary

Selecting any of the buttons labeled "Explanation" will display detailed calculation steps for each of the various parameters.

FY 2021 Income Limit Area	Median Family Income Explanation	FY 2021 Income Limit Category	Persons in Family							
			1	2	3	4	5	6	7	8
Cleveland-Elyria, OH MSA	\$78,600	Very Low (50%) Income Limits (\$) Explanation	27,550	31,450	35,400	39,300	42,450	45,600	48,750	51,900
		Extremely Low Income Limits (\$)* Explanation	16,550	18,900	21,960	26,500	31,040	35,580	40,120	44,660
		Low (80%) Income Limits (\$) Explanation	44,050	50,350	56,650	62,900	67,950	73,000	78,000	83,050

NOTE: Lake County is part of the **Cleveland-Elyria, OH MSA**, so all information presented here applies to all of the **Cleveland-Elyria, OH MSA**.

The **Cleveland-Elyria, OH MSA** contains the following areas: Cuyahoga County, OH; Geauga County, OH; Lake County, OH; Lorain County, OH; and Medina County, OH.

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) 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
 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

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.

Racial Categories	Race/Ethnic Origin
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 AND White	<input type="checkbox"/>
Asian AND White	<input type="checkbox"/>
Black/African American AND White	<input type="checkbox"/>
American Indian/Alaskan Native AND 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: _____

Job Category for this Position: <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: _____