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Iowa Economic Development Authority

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Iowa Department of Revenue

Small Business Relief Grant & Tax Deferral Application

Iowa Economic Development Authority
1963 Bell Ave
Des Moines, IA 50315
iowaeda.com
Email: businessrecovery@iowaeda.com

Iowa Department of Revenue
1305 E Walnut St
Des Moines, IA 50319
tax.iowa.gov
Tax Guidance: tax.iowa.gov/request-tax-guidance

Prior to filling out this form, please read FAQs linked here.

Disaster Event: COVID-19 Pandemic	
Request:	<input type="checkbox"/> Grant (2-25 employees only) <input type="checkbox"/> Tax Deferral (any # of employees)
Grant Amount Requested: \$	Application Date:
Describe the Economic Injury (Loss of Sales or Revenues):	

Section I: Business Information		
1. Business Legal Name:		
2. D/B/A (doing business as):		
3. Organization Type:	<input type="radio"/> For-Profit <input type="radio"/> Non-Profit	
4. FEIN (SSN, if a sole proprietorship):		
5. Business Withholding Permit Number:		
6. Sales Tax Permit Number:		
7. Physical Business Address:		
8. County of Physical Business Address:	*Choose County	
9. Mailing Address (if different)		
10. Business Phone Number:		
11. Contact Email:		
12. Primary Business Activity:		
13. Date Business Established:		
14. Do you need assistance with Withholding Taxes through Department of Revenue?	<input type="radio"/> Yes <input type="radio"/> No	
15. Do you need assistance with Sales & Use Tax through Department of Revenue?	<input type="radio"/> Yes <input type="radio"/> No	
Section II: Ownership Information		
Owner Applicant 1		
Full Legal Name:		
Title		% Owned:
Owner Applicant 2		
Full Legal Name:		
Title		% Owned:
Section III: Impact of Disaster		
1. Employment on March 1st:		
2. Current Number of Employees:		
3. Number of Employees Working Remotely as Result of Disaster:		
4. What is the estimated loss of revenues from March 15 to April 15?	\$	
5. Describe how the funds will be utilized to maintain business operations or reopen after disaster.		

Section IV: Attachments

- A. 3-month income statement
- B. Revenues March 2019
- C. Revenues March 2020 – to date
- D. Balance Sheet (as of application date)
- E. Payroll prior to March 17th, 2020*
*Do not send employee SSN information. Use sample form [here](#), if needed.
- F. Attach Completed Business W-9 Form-
with [sample](#), if needed.

Section V: Certification & Release

1. Are there any judgments or court actions completed or pending against the applicant entity, or any current owners?	<input type="radio"/> Yes	<input type="radio"/> No
2. Has any current owner been accused or convicted of any wrongdoing or crime, other than a simple misdemeanor?	<input type="radio"/> Yes	<input type="radio"/> No
3. Have there been any current or past bankruptcies on the part of the applicant entity, or on the part of any owners?	<input type="radio"/> Yes	<input type="radio"/> No
4. In the last five years have there been, or are there currently any investigations of potential violations of public health, safety or environmental laws by the applicant entity, or any current owner?	<input type="radio"/> Yes	<input type="radio"/> No
5. In the last five years have there been, or are there currently any violations of antitrust laws by the applicant entity, or any current owner?	<input type="radio"/> Yes	<input type="radio"/> No
6. Is the applicant entity up to date and in good standing with the Department of Revenue for filings and payments of sales, use, and withholding taxes?	<input type="radio"/> Yes	<input type="radio"/> No
7. If yes to any of the questions 1 to 5 above, please provide explanation:		
<p>I hereby give permission to the Iowa Economic Development Authority (IEDA) and Iowa Department of Revenue (IDR) to research the Business' history, make credit checks, contact the Business' financial institutions, insurance carriers, and perform other related activities necessary for reasonable evaluation of this application. I also hereby authorize the Iowa Department of Revenue to provide to IEDA state tax information pertinent to the Business' state income tax, sales and use tax, and state tax credits claimed.</p> <p>I understand that all information submitted to IEDA and IDR related to this application is subject to Iowa's Open Record Law (Iowa Code, Chapter 22), unless specifically marked as confidential section.</p> <p>I understand that IEDA reserves the right to negotiate the financial assistance.</p> <p>Furthermore, I am aware that funds will not be disbursed until a contract has been executed and the appropriate terms have been met.</p> <p>I hereby certify that all representations, warranties, or statements made or furnished to IEDA and IDR in connection with this application are true and correct in all material respect. I understand that it is a criminal violation under Iowa law to engage in deception and knowingly make, or cause to be made, directly or indirectly, a false statement in writing for the purpose of procuring economic development assistance from a state agency or subdivision.</p> <p>Authorized Business Signature: _____</p> <p>Print Name: _____ Date: _____</p>		