MERIDIAN MUNICIPAL SMALL BUSINESS GRANT PROGRAM

APPLICATION INSTRUCTIONS

SMALLBUSINESSGRANTS@MERIDIANCITY.ORG (208) 489-0537

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REGISTERING FOR SOFTWARE

- 1. Access the website at: <u>https://portal.neighborlysoftware.com</u> <u>/meridianid/Participant/Login.</u>
- 2. Select the "Register" tab.



3. Complete the form and select "Continue".

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STARTING A NEW APPLICATION

1. Once you have logged in, select "Click here to start a new application."



- 2. Enter the name of your business.
- 3. Select "Start Application."

CHERIDIAN Home	NEW APPLICATION FOR MUNICIPAL SMALL BUSINESS GRANT PROGRAM
Good Morning, (Please provide a name for the application
MERIDIANS-	2 Organization Name
Start a New Application	3 Start Application
Municipal Small Business Grant Prog	ram Click here to start a new application

4. Select "Click here to continue."

Home	<u>گ</u>
Municipal Small Business Grant Program Application 1d: 30098	Application
View Users (1) Print Application	Please use the link below to continue the application process. For technical assistance related to the software, contact support@neighborlysoftware.com.
A. Applicant Information B. Business/ Organization Information	4 Click here to continue
C. Expenditure Summary D. Required Documentation Submit	N

SECTION A. APPLICANT INFORMATION

- Select A. Applicant Information from the left-hand navigation pane if you are not already on this screen.
- This section gathers basic information on the primary applicant and coapplicant (if applicable). It also provides hyperlinks to the Program Criteria, Idaho Rebounds Form IDA-20, a draft of the Grantee Agreement, and IRS W-9 form.

Home		
Municipal Small Business Grant Program Application 1d: 30098	A. Applicant Information Applicants should review the Program Criteria prior provide all required documentation:	to completing this application. Applicants shall complete and
View Users (1) Print Application	Online application for Meridian Municipal Smal Idaho Rebounds Identity Information Form (ID Eligible expense receipts - Upload in a single P	II Business Grant Program JA - 20) - Complete and upload DF
A. Applicant Information* B. Business/ Organization Information	Successful applicants will also be required to execute funds. Note that the City will issue a 1099 in early 20	e & Grantee Agreement and IKS W-9 form prior to release of 221 for the full grant amount.
C. Expenditure Summary D. Required Documentation	A.1. First Name A.2. Last Name	A.7. First Name A.8. Last Name
[] Submit	A.3. Affiliation	A.9. Affiliation

 Once you have completed all of the fields select "Complete & Continue" at the bottom of the page. You can also select "Save" and come back to this screen later. Once this section is marked complete a green check box will show on the left-hand navigation pane.

MERIDIAN Home		
Municipal Small Business Grant Program	A.5. Telephone Number A.11. Telephone Number	
Application	A.6. E-Mail	
é ș		
View Users (1) Print Application	No save history	_
A. Applicant Information* B. Business/ Organization Information	3 Save Complete & Continue	
C. Expenditure Summary		
D. Required Documentation		

SECTION B. BUSINESS/ORGANIZATION INFORMATION

- Select B. Business/Organization Information from the left-hand navigation pane if you are not already on this screen.
- Complete all fields on this screen. Incomplete data will delay the review of your application and may cause it to be denied.

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Municipal Small Business Grant Program Application 1d: 30098	B. Business/ Organization Information	on
View Users (1) Print Application	B.1. Official Business/Organization Name	B.8. How have your Business/Organization revenues been impacted by COVID-19? O No Change/Increase
A. Applicant Information	B.2. Employee Identification Number (EIN)	 Decreased: 1 - 30% Decreased: 31 - 50% Decreased: 51 - 75%
B. Business/ Organization Information* C. Expenditure Summary	B.3. Type of Business Organization	 Decreased: 76 – 100% B.9. These changes are anticipated to be:
D. Required Documentation Cubmit	If Other Industries Not Classified, please specify below:	 Temporary Permanent Unknown at this time

 Once you have completed all of the fields select "Complete & Continue" at the bottom of the page or "Save" to save your work and come back later.

Meridians- Home		ප
Municipal Small Business Grant Program Application Id: 30098	Organization Minority Owned Business / Organization Veteran-Owned Business / Organization N/A This step was last updated by crystalcampbell8.1.14@gmail.com on 10/3/2020 11:21:04 AM .	
 A. Applicant information B. Business/ Organization Information* C. Expenditure Summary D. Required Documentation Submit 	3 Save Complete & Continue	

SECTION C. EXPENDITURE SUMMARY

- Select C. Expenditure Summary from the left-hand navigation pane if you are not already on this screen.
- In this section you will provide an itemized list of the items you are requesting to be reimbursed. Each expense must be:
 - a. Related to COVID-19
 - b. Not previously reimbursed by any other assistance
 - c. Incurred between June 20 and December 30, 2020
 - d. Already paid for, this is reimbursement only
- 3. Select "Add Row."
- 4. For each row, enter a description of the receipt (e.g. Rent for August 2020, masks for clients, partition to assist with social distancing, etc.). This should make a clear connection between the expense and COVID-19. Each receipt must be on a separate line, do not combine them.
- 5. Enter the amount of each receipt next to its description. The total will automatically calculate and create an itemized list for reviewers.
- 6. Check the box to affirm you are not at risk of duplicating benefits.



7. Once you have entered an itemized list of what you are requesting to be reimbursed, select "Complete & Continue" at the bottom of the page or "Save" to save your work and come back later.

Home	\$ 2,000.0C \$10,000)
Municipal Small Business Grant Program	Add Row
Application Id: 30098	I affirm that these expenses have not been covered or reimbursed by any other federal or state grant or insurance
View Users (1) Print Application	No save history
 A. Applicant Information B. Business/ Organization Information 	7 Save Complete & Continue
C. Expenditure Summary * D. Required Documentation	
Cubmit •	N

SECTION D. REQUIRED DOCUMENTATION

- Select D. Required Documentation from the left-hand navigation pane if you are not already on this screen.
- 2. If you have not already completed the State's IDA-20 form, select the link and do so now. Save it as a PDF on your computer.

Select "Upload File" and choose the completed form that is saved on your computer.

 Make a single document that has all of your receipts combined in the order you listed them in Section C. You must provide proof that the expense has been paid. Rent reimbursement requests must also include an executed lease agreement. Select "Upload File" and choose the document that contains all of your receipts, in order.

Note: There should only be one document uploaded for this section. Not following these instructions may make it difficult to reconcile your request and delay review of your application.



 Once you have uploaded your documents select "Complete & Continue" at the bottom of the page or "Save" to save your work and come back later.

CMERIDIAN Home			2
Municipal Small	O IRS W-9 Form (Due Upon Approval)	pload File	
Business Grant Program Application Id: 30098	O ACH Form (Due Upon Approval)	pload File 🔶	
é é	No save history		
View Users (1) Print Application	Complete & Continue The Complete button is not active until all required documents have been upload Note: Required documents are indicated by(7).	ed.	
 S. Business organization Information C. Expenditure Summary 			
D. Required Documentation*	N		

SUBMIT

- Select Submit from the left-hand navigation pane if you are not already on this screen.
- Read through the certification and make sure you understand it. Complete all fields on this screen.

Home			Q
Municipal Small Business Grant Program Application Id: 30098	Submit Once an application is submitted, it can only	y be "Re-opened" by an Administrator.	
View Users (1) Print Application	I understand the City of Meridian will r Form IDA - 20 as a material representa entity.	ely on this application and certifications, also attested to in tion in making a disbursement of funds to the applying	
 A. Applicant Information B. Business/ Organization Information C. Expenditure Summary D. Required Documentation 	I understand and it is my intent to con- providing my signature by electronic m required by applicable law. I, therefore, certify that I have reviewen Criteria and that all information submit and accurate.	duct and process this application by electronic means and neans below satisfies all legal effect and enforceability as d the Meridian Municipal Small Business Grant Program tted in this request meets the criteria outlined and is true	
Submit"	Signature Signature here	Date	

Meridian Municipal Small Grant Program Application Instructions

3. Once you have completed all fields, select "Complete & Continue" at the bottom of the page or "Save" to come back later.

^ Municipal Small	Criteria and that all information sub and accurate.	were the Prendan Pranicipal anian business drain crugiann mitted in this request meets the criteria outlined and is true
Business Grant Program	Signature	Date
Application	Crystal Campbell	10/03/2020
10: 30098	Crystal Campbell	Phone
e e		(208) 489-0575
View Users (1) Print Application		
A. Applicant Information	No save history	
B. Business/ Organization	3 5219	Complete & Submit
C. Expenditure Summary	Jave	
D. Required Documentation		

NEED HELP?

Contact smallbusinessgrants@meridiancity.org or (208) 489-0537.