

****EMAIL YOUR APPLICATION, RECEIPTS & W-9 IRS TAX FORM TO THE CITY'S ECONOMIC DEVELOPMENT DIVISION**
economicdevelopment@chandleraz.gov | For questions, call (480) 782-3038**

SECTION I. BUSINESS INFORMATION

Business Name (Entity followed by DBA)			
Business Location Address		Number of Employees (at this location)	
City, State, ZIP Code		Business Phone (Including Area Code)	
Start Date In Chandler (REQUIRED)	E-mail address	City Business Registration #	Federal ID # / EIN #

SECTION II. BUSINESS TYPE

Retail Sales
 Restaurant/Bar
 Amusement
 Construction Contracting
 Service Based
 Wholesaler
 Manufacturer
 Commercial Rental
 Hotel/Motel
 Other

SECTION III. MAILING ADDRESS & PHONE NUMBER

Enter Name if Different from Section I (above) or Enter Care-Of Name

Mailing Address

City, State, ZIP Code

Phone (Including Area Code)

SECTION IV. BUSINESS OWNER (APPLICANT) INFORMATION

Owner Name

Home Address

City

State

ZIP Code

Phone

SECTION V. DECLARATION OF BUSINESS OWNER (APPLICANT): I certify that the business identified above

Is located within the municipal boundary of the City of Chandler	Yes <input type="checkbox"/>
Is not located within a residential property	Yes <input type="checkbox"/>
Is not operating as a Non-Profit, Not-for-Profit, 501(c)(3) or 501(c)(6)	Yes <input type="checkbox"/>
Has an active Business Registration through the City of Chandler's Tax & License Division	Yes <input type="checkbox"/>
Has 100 employees or fewer city-wide, including all commonly owned/managed businesses	Yes <input type="checkbox"/>
Is not affiliated with another business under common ownership/management that has applied for grant funds	Yes <input type="checkbox"/>
Is seeking grant funds to offset costs for Personal Protective Equipment and other health and safety initiatives	Yes <input type="checkbox"/>

SECTION VI. REIMBURSABLE EXPENSES

This grant program may reimburse between \$100 - \$500 to businesses to assist with purchasing personal protective equipment (PPE) and other health and safety-related items and services as a result of COVID-19. Please describe any expenses for which you are seeking reimbursement.

Please enter the amount of grant funds you are seeking based on the above expenses (\$100 - \$500)

\$

SECTION VII. BUSINESS OWNER (APPLICANT) SIGNATURE

I certify that the statements made in this application are true and complete to the best of my knowledge. I understand that I need to submit copies of receipts in order to be reimbursed. I understand that expenses that do not meet the program's reimbursement criteria will not be covered by grant funds.

Name	Signature	Title	Date
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Staff Use Only Below This Line

Application Reviewed By	Application Approved?	Grant Funds to be Awarded	Federal ID # / EIN #	Notification of Funding Sent to Business Owner?	Notification Date
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Request for Taxpayer Identification Number and Certification

**Give Form to the
requester. Do not
send to the IRS.**

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	<p>1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.</p> <hr/> <p>2 Business name/disregarded entity name, if different from above</p> <hr/> <p>3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____</p> <p>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</p> <p><input type="checkbox"/> Other (see instructions) ▶ _____</p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p><small>(Applies to accounts maintained outside the U.S.)</small></p>
	<p>5 Address (number, street, and apt. or suite no.) See instructions.</p> <hr/> <p>6 City, state, and ZIP code</p> <hr/> <p>7 List account number(s) here (optional)</p> <hr/>	<p>Requester's name and address (optional)</p> <hr/>

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number											
				-			-				
or											
Employer identification number											
				-							

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.