

**Webster Groves  
Shrewsbury  
Rock Hill**



## Chamber of Commerce

357 Marshall Avenue, Ste. 102, Webster Groves, MO 63119

Phone 314-962-4142 ~ Fax 314-962-9398

### **63119 Local Support for Small Business Recovery Fund** *Providing relief for owners of small businesses in the 63119 zip code.*

#### **~ Application ~**

The program makes grants to support owners of small businesses in the 63119 zip code who are experiencing a financial burden due to a disaster or other extreme situation. ***All information you provide is confidential.***

**Eligibility:** You are eligible to apply if you meet both of the following conditions:

- You are an owner of an independent bar, restaurant, entertainment venue, retail establishment, or other small locally owned business in the 63119 zip code.
- You have experienced financial burden due to the coronavirus pandemic, a qualifying event.

***Grant for individual support is a \$500 check mailed to applicant.***

**Application:** To be considered for grant support, read, print or save, and complete all pages of this application. *If you need help completing the application, contact [chamberinfo@go-webster.com](mailto:chamberinfo@go-webster.com).*

- Submit complete, signed application with all required documentation by methods on bottom of page three.
- Checks to applicant will be mailed directly to you at the address below.  
If this is an issue, tell us how in the box on page 2.
- You will be notified of your application status as quickly as humanly possible. Depending on volume of applications, turnaround could take several days. Please be patient with us. This is a new reality for us all.

#### **SECTION 1: INFORMATION ABOUT YOU**

Applicant Name (print clearly):		<input type="checkbox"/> Business Owner	
		<input type="checkbox"/> Self-employed	
Mailing Address:			
City:		State:	Zip:
Preferred phone: (     )		Email: (if we have questions, we will email you)	
<b>INFORMATION ABOUT WHERE YOU WORK</b>		Have you applied to this program before? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Employer or Business name (if self-employed, write your name):		<b>Qualifying sector:</b> <input type="checkbox"/> restaurant <input type="checkbox"/> bar <input type="checkbox"/> entertainment/music	
Business owner's name:		<input type="checkbox"/> retail, selling: _____	
Employer preferred phone: (     )		<input type="checkbox"/> service (childcare/ eldercare/ cleaning/hair/etc.) _____	
Employer email:		<input type="checkbox"/> Other small business, specifically: _____	
Business physical address, including zip code (CID grant dollars are tied to location):		Is this your primary source of income?	
Employers and Business Owners: Please provide the number of your employees:		Employers and Business Owners: When was your business established?	

## SECTION 2: DESCRIBE YOUR SITUATION

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## SECTION 3: THE FINE PRINT

An application does not guarantee grant support.

Information provided in this application will be confidential between you and the Chamber of Commerce Committee Members.

Your signature below certifies that you understand the paragraphs above; that the information you provided is true and complete; authorizes the Chamber of Commerce Committee Members to verify information provided in connection with processing this application; and releases the Webster Groves/Shrewsbury/Rock Hill Area Chamber of Commerce and its committee members, donors, and advisory committee, from any liability associated with the denial of or funding of this application.

Signature: \_\_\_\_\_  
Applicant Signature Date

### **Before you submit, complete the Application Checklist for your own peace of mind:**

- I read the requirements and I feel that I qualify.
- I have emailed chamberinfo@go-webster.com or called 314-962-4142 with any questions I had
- I completed Sections 1, 2 and 3 with all the details requested.
- I signed and dated my application.
- I am keeping a copy of my application for my files (take a picture of each page!).
- I am emailing or faxing my entire application and supporting documentation to 63119 Local Support for Small Business Recovery Fund.

The 63119 Local Support for Small Business Recovery Fund was established in 2020 to provide emergency relief to owners of restaurants, bars, entertainment venues and other small independent, locally owned businesses in the St. Louis region in response to the coronavirus pandemic.

The fund encourages gifts from individuals, foundations, and companies who believe in the power of community members helping each other.

The 63119 Local Support for Small Business Recovery Fund is a component fund of the Chamber of Commerce. The Chamber of Commerce does not discriminate on the basis of race, religion, creed, national origin, gender, age, color, gender identity, veteran status, physical or mental disability or any other protected class.

The Chamber of Commerce Committee Members are solely responsible for all decisions regarding charitable distributions from the fund.

### **Submit your completed, signed application with supporting documentation through one of these channels.**

**EMAIL:** to chamberinfo@go-webster.com

**FAX:** You may fax your application to 314-962-9398 but you MUST email chamberinfo@go-webster.com to alert us of the fax. Failure to email this information could result in significant delays.

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