

Req	uired
Ва	ackground & General Information
1.	Business Legal Name *
2.	Business DBA (if different)
3.	Physical Address *
4.	Please select the county where your business is located. *
	Ashe Avery Mitchell
	Watauga Yancey
5.	Mailing Address (if different)
6.	Company Website *
7.	Years in Business *

8.	FEIN *
9.	Is the business up to date on its Unemployment Insurance taxes? *
	○ Yes
	○ No
10.	Is the business in good standing with the Internal Revenue Service (IRS)? *
	Yes
	○ No
11.	NAICS Code *
12.	Authorized Representative *
12	Authorized Representative Phone Number *
14.	Authorized Representative Email *
15.	Number of NC Employees
16	Number of non-NC vasidant ampleyage *
10.	Number of non-NC resident employees *
17.	Number of Affected NC Employees *

20. Aver	age wage of non-NC resident affected employees? *
21. Com	pany Ownership *
\circ	Sole
\circ	Partnership
\bigcirc	Corporation
\circ	Other
22. Is the	e company owned by someone from an underserved group? If so, please select all that apply. *
	Disabled
	Female
	Minority
	Veteran
	N/A
23. Was	the business affected by Hurricane Helene? *
\bigcirc	Yes
\circ	No
24. If yes	s, please describe.
25. Prov	ide a brief description of the company including the products, services, industry, occupations, and any othe
back	ground information. *

26.	Describe in detail what measures you have already taken to avoid laying off personnel and/or to be able to bring employees back to work after a layoff or closure. See Application Guide for examples. *
27.	Provide a brief narrative of the layoff aversion plan including information on the specific needs of the employer, the layoff aversion activities, the timeline for the project and any other relevant information. See Application Guide for examples. *

Amount of Funds Requested

amount of Business Edg This is a reimbursement Initial quotes/estimates	t of funds requested AND a description of what is included in this amount. The maximum e Hurricane Helene Layoff Assistance funding a company may request is \$10,000. Please note: program. Funds will be disbursed after proof of payment is provided for approved invoices. may be submitted for initial consideration, but receipts/paid invoices will be needed for final are based on availability and notification of grant award approval. *
	ed other sources of Hurricane Helene related relief such as insurance, FEMA assistance, SBA loan, governmental sources? *
Yes	
○ No	
0. If yes, please list what ki	nd and how much financial assistance was received. *
1. Is there anything you wo	ould like to add about your current situation? *
2. To the best of my knowl	edge, I verify the information contained within this application is true and accurate. *
Yes	
O No	

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