Item #3.3 Approval of COVID-19 Disaster Emergency Grant Applications

June 2021 Grant Applicants

Business Name	Address	City	Түре	Grant Amount Requested	Dist	MBE	VET	WBE	Use of grant funds
@ Eleven Wings Cuisine	3225 Main Street	Buffalo	Retail	3,667.50	Yes	Yes	No	No	Purchase of PPE and Installation of Fixtures
ASA Janitorial Services	265 Glenwood Avenue	Buffalo	Service	10,000.00	Yes	Yes	No	Yes	Purchase of PPE only
Barbara D. Glover dba Miss Barbara's School of Dance	1832 Main Street	Buffalo	Retail	2,285.74	Yes	Yes	No	Yes	Purchase of PPE and Installation of Fixtures
Fit Fuel, LLC	3189 Eggert Road	Tonawanda	Retail	7,593.04	No	No	Yes	Yes	Purchase of PPE only
J. Malik LLC. d.b.a BurgeriM	1460 Hertel Avenue	Buffalo	Retail	9,702.90	Yes	Yes	No	No	Installation of Fixtures only

\$33,249.18

COVID 19 Disaster Emergency Grants Approved Sept 2020 – May 2021

Approval				Grant
Date	Business Name	City	Business Type	Amount
9/23/2020	A1 Express Inc.	Buffalo	Service	4,619.35
9/23/2020	ABC Learn and Play 2, Inc.	Buffalo	Service	9,087.92
9/23/2020	Arts Services Initiative of WNY, Inc.	Buffalo	Not for Profit	1,582.52
9/23/2020	Black Rock Historical Society	Buffalo	Not for Profit	1,264.50
9/23/2020	Explore Buffalo Inc.	Buffalo	Not for Profit	9,626.00
9/23/2020	Kirchmyer & Goode Physical Therapists, P.C.	West Seneca	Health Care	4,791.83
9/23/2020	MidCity Office	Buffalo	Service	6,168.49
9/23/2020	Peaceprints of WNY	Buffalo	Not for Profit	7,046.86
9/23/2020	Theodore Roosevelt Inaugural Site Foundation	Buffalo	Not for Profit	4,498.00
10/28/2020	Amy Lynn's Dance Studio	Orchard Park	Retail	5,331.87
10/28/2020	Beyond Boundaries Therapy For Kids	Hamburg	Service	1,328.28
10/28/2020	Buffalo and Erie County Botanical Gardens Society	Buffalo	Not for Profit	3,107.70
10/28/2020	Buffalo Center for Arts and Technology, Inc.	Buffalo	Not for Profit	5,474.36
10/28/2020	Buffalo String Works, Inc.	Buffalo	Not for Profit	1,685.82
10/28/2020	Children First Christian Childcare & Preschool	West Seneca	Service	10,000.00
10/28/2020	Computer SOS, Inc.	Buffalo	Service	7,195.65
10/28/2020	Eclips Hair Salon, Inc.	West Seneca	Service	1,742.10
10/28/2020	Explore & More Children's Museum	Buffalo	Not for Profit	9,846.00
10/28/2020	Martin House Restoration Corp.	Buffalo	Not for Profit	8,660.13
10/28/2020	Safe Mobility Service Rides, LLC	West Seneca	Service	2,192.51
10/28/2020	Trace Assets Protection Service LLC	Buffalo	Service	1,232.37
10/28/2020	USA Occupational Services	Buffalo	Service	1,000.00
10/28/2020	West Side Community Services, Inc.	Buffalo	Not for Profit	1,776.97
10/28/2020	Western New York Book Arts Collaborative, Inc.	Buffalo	Not for Profit	2,396.20
11/18/2020	110 Moreland Street, Inc.	Buffalo	Hospitality/Tourism	10,000.00
11/18/2020	716 Limousine LLC	Buffalo	Service	6,627.63
11/18/2020	Babz BBQ	Akron	Retail	5,033.84
11/18/2020	Bikeorbar LLC	Buffalo	Service	10,000.00
11/18/2020	Buffalo & Erie County Naval & Military Park	Buffalo	Not for Profit	5,481.05
11/18/2020	Buffalo Girlchoir	Buffalo	Not for Profit	1,223.06
11/18/2020	Buffalo Pediatric Associates, LLC.	Buffalo	Health Care	10,000.00
11/18/2020	C&R Housing	Buffalo	Construction	6,904.12
11/18/2020	Computers for Children (aka Mission Ignite)	Buffalo	Not for Profit	8,999.82
11/18/2020	Dasa Properties LLC	Buffalo	Real Estate	10,000.00
11/18/2020	Gerard Place Housing Development Fund Coy	Buffalo	Not for Profit	10,000.00
11/18/2020	Great Expectations Child Care Center, Inc.	West Seneca	Service	3,610.56
11/18/2020	La Casa De Nacho Inc.	Buffalo	Retail	9,764.00
11/18/2020	Little Spanish Garden LLC	Cheektowaga	Service	10,000.00

COVID 19 Disaster Emergency Grants Approved Sept 2020 – May 2021

11/18/2020	Nurse Practitioner Adult Health P.C.	Buffalo	Health Care	10,000.00
11/18/2020	Schutte-Buffalo Hammermill	Buffalo	Manufacturing	10,000.00
11/18/2020	Weaver Metal & Roofing, Inc.	Buffalo	Construction	8,584.77
12/16/2020	Burden, Hafner & Hansen, LLC	Buffalo	Legal	10,000.00
12/16/2020	EPIC - Every Person Influences Children, Inc.	Buffalo	Not for Profit	4,166.48
12/16/2020	Erin L. Reukauf dba Lyfe Beauty & Mind	Orchard Park	Service	7,805.22
12/16/2020	Gordon A. Kent, D.M.D., PC (Smile Center)	Cheektowaga	Health Care	10,000.00
12/16/2020	Manna Culinary Group	Buffalo	Retail	7,850.00
12/16/2020	Neill & Strong	Alden	Legal	2,029.60
12/16/2020	Rappold Family Dentistry, PC	Cheektowaga	Health Care	10,000.00
12/16/2020	Rec Room Holdings, LLC	Buffalo	Retail	8,642.51
12/16/2020	Salon 716 NY, LLC	Kenmore	Service	9,975.79
12/16/2020	Sheridan Medical Group	Tonawanda	Health Care	10,000.00
12/16/2020	SowFit Buffalo dba PBnJ Enterprises	Buffalo	Service	10,000.00
12/16/2020	Susan E. Bennett PT PC	Kenmore	Health Care	10,000.00
12/16/2020	Tammy Perison, DDS Family & Cosmetic Dental Care	West Seneca	Health Care	10,000.00
12/16/2020	The Igloo WNY LLC dba The Black Sheep Restaurant & Bar	Buffalo	Retail	4,098.41
12/16/2020	The Intersection Cafe, Inc. dba The Intersection	Buffalo	Retail	4,462.31
12/16/2020	Tremetris Nance dba Nance Nelson's Enterprise	Buffalo	Service	5,304.22
1/27/2021	A&B Heritage Inc. dba ASI Signage Innovations	Grand Island	Advanced Mfg	2,285.58
1/27/2021	A-Kleen Windows Inc.	Grand Island	Service	3,456.70
1/27/2021	Cold Narly Generation	Buffalo	Service	4,426.00
1/27/2021	Le Nails	Derby	Service	5,912.00
1/27/2021	Local Honey Beauty Hive	Buffalo	Service	6,041.00
1/27/2021	Mental Health Association of Erie County	Buffalo	Not for Profit	2,560.24
1/27/2021	Parent Network of NYS 1 dba Parent Network of WNY	Buffalo	Not for Profit	2,428.93
1/27/2021	Thin Man Brewery	Buffalo	Advanced Mfg	10,000.00
2/24/2021	Be Fit Fitness, Inc.	Lackawanna	Service	7,883.57
2/24/2021	Buffalo Glass Block Company	Buffalo	Warehouse Dist	4,034.13
2/24/2021	Buffalo River Fest Park, LLC / Valley Community Association Inc. Sole Member	Buffalo	Not for Profit	8,938.71
2/24/2021	Fika Midwifery PLLC	Buffalo	Health Care	9,786.67
2/24/2021	Greco Trapp, PLLC	Buffalo	Service	7,182.19
2/24/2021	Sherri's Little Angels Inc.	Buffalo	Service	4,743.70
3/24/2021	Buffalo Society of Natural Sciences	Buffalo	Not for Profit	10,000.00
3/24/2021	DawJ, LLC dba The Oakk Room	Buffalo	Retail	4,790.03
3/24/2021	Flax's Barber Shop	Buffalo	Service	6,492.60
3/24/2021	Flax's Gold Buyer	Buffalo	Retail	6,116.94

COVID 19 Disaster Emergency Grants Approved Sept 2020 – May 2021

3/24/2021	Heidi I. Jones Attorney & Consultant	Buffalo	Legal	5,687.12
3/24/2021	Kiddy Skateland, LLC	Buffalo	Service	10,000.00
3/24/2021	Limousine Acquisition Company, LLC dba Buffalo Limousine	Buffalo	Service	4,589.37
3/24/2021	Prime Care Transportation Inc.	Buffalo	Service	5,503.50
3/24/2021	Print2Web	Buffalo	Service	1,455.24
3/24/2021	Tappo of Buffalo, LLC	Buffalo	Retail	10,000.00
3/24/2021	Tappo Pizza, LLC	Buffalo	Retail	6,597.80
4/28/2021	Buffalo City Swim Racers	Buffalo	Not for Profit	8,980.37
4/28/2021	Buffalo Collegiate Charter School	Buffalo	Not for Profit	10,000.00
4/28/2021	Buffalo Film Works	Buffalo	Service	10,000.00
4/28/2021	Center for Exploratory and Perceptual Arts, Inc.	Buffalo	Not for Profit	4,431.76
4/28/2021	Country Club Catering of WNY Inc.	Derby	Retail	2,250.00
4/28/2021	ECMC Foundation, Inc.	Buffalo	Not for Profit	2,421.43
4/28/2021	Fostering Greatness Inc.	Buffalo	Not for Profit	9,090.08
4/28/2021	Kleinhan's Music Hall	Buffalo	Not for Profit	10,000.00
4/28/2021	Pappy Martin Legacy Jazz Collective	Buffalo	Not for Profit	9,794.44
4/28/2021	Trend Setters Beauty Salon	Grand Island	Service	3,870.96
4/28/2021	Young Audiences of Western New York	Buffalo	Not for Profit	3,953.61
5/26/2021	Alleyway Theatre, Inc.	Buffalo	Not for Profit	10,000.00
5/26/2021	BEAM Buffalo Area Engineering Awareness for Minorities	Buffalo	Not for Profit	1,217.14
5/26/2021	Buffalo Niagara Convention & Visitors Bureau, Inc.	Buffalo	Not for Profit	2,987.40
5/26/2021	Buffalo Niagara Convention Center Management Corporation	Buffalo	Not for Profit	10,000.00
5/26/2021	Central Terminal Restoration Corp.	Buffalo	Not for Profit	1,027.84
5/26/2021	D&M Refrigeration, Inc.	Buffalo	Retail	10,000.00
5/26/2021	Jos. A. Sanders & Sons, Inc.	Buffalo	Construction	4,625.75
5/26/2021	Niagara Lubricant Company Inc.	Buffalo	Manufacturing	9,234.00
5/26/2021	Ricotta & Ricotta Inc. dba Mangia Ristorante & Caffe'	Orchard Park	Retail	10,000.00
5/26/2021	Roach, Lennon & Brown, PLLC	Buffalo	Legal	3,381.07
5/26/2021	Surianello General Concrete Contractor, Inc.	Buffalo	Construction	3,809.93
5/26/2021	The Mog Inc.	Grand Island	Health Care	3,482.83

\$667,689.45

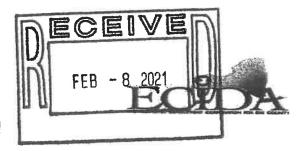
Grant Application Overview

June 2021

APPLICANT	GRANT AMOUNT	PROGRAM PRIORITIES	STAFF RECOMMENDATION
		Highly Distressed Area	
@Eleven Wings & Cuisine, LLC	\$3,667.50	MBE	Recommended for Funding

Synopsis:

- @Eleven Wings & Cuisine, LLC (hereafter @Eleven), located in the University Heights neighborhood of Buffalo, specializes in soul food with a healthy twist. The restaurant, which has been in business for two (2) years, recently received praise from Buffalo News Food Editor Andrew Galarneau and was featured in the local Black Restaurant Week spotlight in April.
- @Eleven was negatively impacted by the NYS emergency declaration and the conditions created by the coronavirus pandemic. The restaurant had only been in business for 3 months prior to the NYS Pause. The shutdown resulted in the loss of employees and a significant drop in business from the surrounding commercial/office/retail customers. @Eleven was forced to pivot by reducing the days/hours of operation and focusing on the takeout segment of the business. The restaurant has also been burdened with the increased cost of doing business. @Eleven is seeking funding assistance from the ECIDA to offset PPE/fixture (masks, gloves, disinfectant, signage, partitions, signage, and air purifier) expenditures to protect the health and safety of customers and employees.



Thank you for your interest in the Erie County Industrial Development Agency's Disaster Emergency Grant Program to assist small businesses and not-for-profits with purchasing Personal Protective Equipment (PPE) and fixtures necessary to prevent the spread of Novel coronavirus, COVID-19. We suggest you begin by reading the Grant Guidelines that can be found here: https://www.ecidany.com/documents//Grant%20Guidelines%208-18-20.pdf Please complete and return this Application along with the required documentation. Questions – contact us at 716.856.6525 x. 126

сом	PANY INFORMATION				1000 A A A A A A A A A A A A A A A A A A				
1.	Applicant Legal Name:	AT ELEVEN WI	NGS CUISINES	及 的复数人工作 电对应 法 医二十十分					
2.	Applicant Address: Please note that businesses and not- for-profits located in communities served by IDAs (Amherst, Clarence, Concord, Hamburg, and Lancaster) are not eligible.	3225 MAIN STRE BUFFALO, NY 1							
3.	Legal Structure:	☐ C-Corp. ☐ Limited Partne	□S-Corp □LLC ership □ Sole Prop	☐ General Pa	•				
4.	Applicant Contact Name:	Quincey	Moms						
5.	Contact Phone Number:	6464791663	Contact Email Address	: ambreis @ A	TELEVENF				
6.	Type of Business:	Please Describe	Restaura						
7.	schedules or a 2019 CPA Audit Balance Sheet.	Please submit a completed W-9, a signed copy of the organization's 2019 Federal Tax Return including all schedules or a 2019 CPA Audited Financial Statement and 2020 year-to-date Profit & Loss Statement and Balance Sheet.							
8.	Number of years in business in	Erie County			2				
9.	structure, including the % of ow	be a second a mar of the or Buttledhold a officers and							
10.	application. Please read Append	Ownership Type: Definitions of the following ownership types can be found in Appendix A of this application. Please read Appendix A before answering this question. Is your business (check all that apply): Minority-Owned Woman-Owned							
11.	Primary North American Indust provide at least the three-digit of	Primary North American Industrial Classification System (NAICS) Code of the Company. Please provide at least the three-digit code, but the six-digit code is preferable 722513							
12.									
12.	What share of the company's p	roduct or service is	s sold within Erie County	:	100%				



	□ Yes ☑ No Is the Company or any of its principals or Board Members presently the subject of any litigation, or is any litigation threatened, which would have a material adverse effect on the Company's financial condition?
	☐ Yes ☑ No Has the Company or any of its principals ever settled a debt with a lending institution for less than the full amount outstanding?
	☐ Yes ☑ No Has the company, its affiliates or any of its principals ever filed bankruptcy, a creditor's rights or receivership proceeding, or sought protection from creditors?
	☐ Yes ☑ No Is the Company or any of its principal's delinquent on property, personal, and/or employment taxes?
	☐ Yes ☑ No Has the Company or any of its principals or Board Members ever been convicted of any felony or misdemeanor, other than a minor traffic violation, or are any charges pending?
	☐ Yes ☑ No Has the Company, its affiliates, or any of its principals, been cited for a violation of federal, State, or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution, or operating practices?
	☐ Yes ☑ No Affiliates, any of the dinacipal ments of line and the Green busines? Amount:\$
	□ Yes ☑ No the the ceedhany base arguatel atitals and de islandistantate, the property probes, that subject
	agency or authority including but not limited to the SEC, FCC, FDA, or OSHA? If yes, please attach a written explanation to this application.
	□ Yes ☑ No basheaselingetaledsachmaly with the oranicion probleting was a discrimination
	Title VII of the Civil Rights Act of 1964, Federal Executive Order 11246 of September 24, 1965 and New York State Labor Law Section 194 (together "Equal Pay Law").
	How did hear about the ECIDA's COVID-19 Disaster Emergency Grant Program (i.e., radio, print news, word of mouth)? word of mouth
14.	Qualifying Questions:
	☑ Yes □ No is the Applicant a small business or small not-for-profit corporation with not more than 50 employees?
	∀es □ No Is the Applicant's primary place of business located in a highly distressed area? (see map at https://www.ecidany.com/documents/HighlyDistressedAreaMap7-2-2013.pdf)
	☑ Yes □ No Is the Applicant a Minority-Owned, Women-Owned or Veteran-Owned Business?
	☑ Yes ☐ No Was the Applicant in business prior to March 7, 2020?
	☑ Yes ☐ No Was the PPE expenditure made, or is it contemplated to be made, on or after March 7, 2020?
	☑ Yes □ No Has the Applicant applied for and/or received grant funding from another IDA and/or state or federal funding source to support the purchase of PPE identified in the Project budget below?
	☑ Yes □ No Has the Applicant been negatively impacted by the COVID-19 Pandemic?



	Narrative:
	A. Provide a summary of all PPE equipment and fixture purchases previously purchased and the reason for their purchase.
15.	B. Provide a summary for all future PPE and fixture purchases the entity will be making, including an explanation of how it will be used (if applicable).
	C. Provide a parrative to include: how your organization has been been as a second of the second of
	C. Provide a narrative to include: how your organization has been negatively affected by the State
	disaster emergency, why the funds are necessary, the applicant's ties to the community and the impact of your work/service in Erie County.
	(attach senarate sheet if more recent is need all
We hav	e previously purchased: Masks, Gloves, Plexiglass to create shield between customers and ees behind front counter, more cleaning supplies (industrial/commercial grade), additional initizer and touchless hand sanitizing station for customer, signage to enforce mandate of
employ	ees behind front counter, more cleaning supplies (industrial/commercial grade), additional
nang sa masks.	initizer and touchless hand sanitizing station for customer, signage to enforce mandate of
We will	continue to purchase and supply our staff with masks (up to 2 masks upod nor abits)
(which	continue to purchase and supply our staff with masks (up to 2 masks used per shift), gloves need to be changed multiple times per shift), cleaning supplies (commercial grade to kill on contact) and hand sanitizers for staff and customers (to boost safety). We would like to
viruses	on contact) and hand sanitizers for staff and customers (to boost safety). We would like to
aiso pu	chase the following:
- Additio	onal Plexiglass barrier(s) for the protection of our employees
- Audille	NGC SIGNAULE COLCUSTOMERS ENTORING THE BUILDING)
- 80 300	DUITIEF (ME 200 III) DO A ANAN MINARMA (manala Tanan 1991)
are able	tion on the spread of COVID-19 and airborne germs in general even with masks on, germs to travel and spread in the air. We want to purchase a high grade air purificants.
	to travel and spread in the air. We want to purchase a high grade air purifier to maintain or any and everyone on the premises.
	any and everyone on the premises.

Revised Budget 5/21/21



The service of	LOYMENTINFORMATION		
Exist const	ing Jobs — A full-time equivalent job equals any combination of two or more part-ti titute the equivalent of a job of at least 35 hours per week.	me jobs that, wh	en combined,
16.	Indicate how many existing full-time equivalent jobs the Applicant and its relations as of the date of application.	ted entities	3
Ciran	Request Budget		
17.	PPE and/or Fixture Installation Description Items or Vendor Contract (attach additional sheet as necessary)	For FUTURE PPE/Fixtures you plan to purchase – list and attach proposal copies	For PAST PPE/Fixture actual expenditures - list and attach pald receipts
	Masks	250	100
	Shield/Plexiglass \$1,200	200 X 6	75
	Gloves	250	250
	Cleaning Products	250	100
	Signage \$200	100 52	100
	hand sanitizers	200	100
	air punifier	500 x 2	
	Total Vendor Expense # 3,358	s 1750	\$ 725
-	GRANT REQUESTED (grant will be calculated by multiplying eligible costs x 90%)	s 1575	\$
		# 3667.	50
18.	CERTIFICATION (Quincey Morris all the questions and answers contained in the forgoing application and the doc hereto; that I have supplied full and complete information in the answer to each of my knowledge, information and belief, and that all information il have supplied full and complete information in the Application of my knowledge, information and belief, and that all information il have supplied to the false statements or intentional omissions made in this Application of the process may have an advertise to the content of the conte	iments that I have guestion herein d is true and con lon or in consert	re attached To the best rept. I further
	Verification process may have an adverse consequence to my application/submitted bevelopment Agency. In addition, it acknowledge that the Agency is subject to New York State's Freedounderstand that all grant information and records related to this application are disclosure under FOIL subject to limited statutory exclusions. of Company Official Completing Worksheet: Title: Member	m of Information patentially subje	s Laur Temus III
	incey Morris		M No observation to the state of the state o
Signat	ure: // /// /		

May 21, 2021

Lori Szewczyk ECIDA 95 Perry St Buffalo, NY 14203

Dear Lori:

Thank you for allowing me to submit my application for the ECIDA grant for Restaurants. With the current climate this grant is much needed. We opened at the first of the year and 3 months in Covid happened. Been a challenge for businesses and we are one of them. We lost a few employee's, we lost a day of our open schedule and hours for the days we are open. For example we had doctors office's and other businesses scheduled for lunches, but with no one in the offices that hurt and also we had to get rid of our lunch hour and 2 hours on the evenings. Not to mention the food cost went up, ppe masks, gloves, shields for counter, etc.

Thank you,

Quincey Morris

Grant Application Overview

June 2021

APPLICANT	GRANT AMOUNT	PROGRAM PRIORITEES	STAFF RECOMMENDATION
		Highly Distressed	
		Area	
ASA Janitorial Incorporated	\$10,000	MWBE	Recommended for Funding
C			

Synopsis:

ASA Janitorial Incorporated (hereafter ASA), located in the City of Buffalo, provides professional cleaning services for approximately 250 residential and commercial customers throughout the region with an estimated 70% located in Erie County. ASA, which also has an Atlanta location, has been in business since 2016.

ASA has been negatively impacted by the NYS disaster declaration and the impacts of the coronavirus pandemic. The business, which is deemed an essential service, never ceased operation; however, many of their commercial (retail) contracts were cancelled during the NYS Pause resulting in lost revenue. In addition to the surge in cost for materials, the business was also forced to incorporate new cleaning products and methods to meet CDC's recommendations for cleaning and sanitizing. ASA is seeking funding assistance from the ECIDA to offset the purchase of PPE (masks, gloves, coverall suits, electrostatic sprayers, signage, sanitizer, etc.) expenditures necessary for meeting NYS and CDC protocols and preventing the spread of COVID.





Thank you for your interest in the Eric County Industrial Development Agency's Disaster Emergency Grant Program to assist small businesses and not-for-profits with purchasing Personal Protective Equipment (PPE) and fixtures necessary to prevent the spread of Novel coronavirus, COVID-19. We suggest you begin by reading the Grant Guidelines that can be found here: https://www.ecidany.com/documents//Grant%20Guidelines%20B-18. 20.0df Please complete and return this Application along with the required documentation. Questions – contact us at 716.856.6525 x. 126

1.	Applicant Legal Name:		
2.	Applicant Address: Please note that businesses and not- for-profits located in communities served by (DAs (Amherst, Clarence,	365 Glenwood Ave Buffalo My 14208	
	Concord, Hamburg, and Lancatter) are not eligible.		
	legal Structure:	D C-Corp. BS-Corp DLC D General P	artnership
ne .	Applicant Contact Name: Contact Phone Number:	Ayosha Abanani	for-Profit
•	그는 집에 많아가면 나는 나는 나는 나고 그는 것이다.	7117-313-32 Sometr Email Address: Asayon teraliser	rice Du
	Please suturnly a community of the	Please Describe Associated Colonia & raid a signed copy of the organization's 2019 Federal Tax Return and Enancial Statement and 2020 year-to-date Profit & Loss Sta	*** I
_ :	Number of years in business in E	fie County	TTACHED
	Ownership: Privately held comp structure, including the % of own company. Not for Profit organ directors.	anies, please attach a description of the company's ownership pership for each individual and entity owning 20% or more of the please attach a list of the organization's officers and	Sugar S
	Clamerchin Tonas Postanta	te following ownership types can be found in Appendix A of this	ATTACRED
	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Comment of Manager and Manager	- 1
	Primary North American Indicate	G seman-nau60	d.15
	Primary North American Industria provide at least the three-digit col	il Classification System (NAICS) Code	هددا ماد

Mreverzeneptstreet. Com



- Yes No is the Company or any of its principals or Board Members presently the subject of any litigation, or is any litigation threatened, which would have a material adverse effect on the Company's financial condition?
- □ Yes solo Has the Company or any of its principals ever settled a debt with a lending institution for less than the full amount outstanding?
- □ Yes by No Has the company, its affiliates or any of its principals ever filed bankruptcy, a stephion's rights or receivership proceeding, or sought protection from stephiors?
- □ Yes p(No is the Company or any of its principal's delinquent on property, personal, and/or employment taxés?
- ☐ Yes ☐ We the Company or any of its principals or spard Wembers ever been convicted of any felony or misdemeanor; other thanks minor traffic violation, or are any charges pending?
- □ Yes No Has the Company, its affiliates, or any of its principals, been cited for a violation of federal, State, or local laws or regulations with respect to labor practices, instandous wastes, environmental pollution, or operating practices?
- ☐ Yes >>No Are there any outstanding judgments or lien pending against the Company, its affiliates, or any of its principals other than liens in the normal course of business?
- □ Yes 600 Has the company been accused of false or misleading statements, or been the subject of a proceeding or had any allegations made against them, by any federal, state, local agency or authority including but not limited to the SEC, FOC, FDA, or OSHA? If yes, please attach a written explanation to this application.
- □ Yes 5/10 Has the Applicant failed to comply with the provisions prohibiting wage discrimination on the basis of gender as found in federal law, including the Equal Pay Act of 1963, Title VII of the Civil Rights Act of 1964, Federal Executive Order 11246 of September 24, 1965 and New York State Labor Law Section 194 (together "Equal Pay Law").

How did hear about the ECIDA's COVID-19 Disaster Emergency Grant Program (i.e., radio, print news, word of mouth)?

14. Qualifying Questions:

- Acres: D No is the Applicant a small business or small not for-profit corporation with not more than 50 employees?
- Yes I No is the Applicant a business or not-for-profit with a primary place of business located in Erie County, New York?
- Thes I No is the Applicant's primary place of business located in a highly distressed area? (see map at https://www.ebidany.com/documents/Highly Distressed Area Map 7-2-2013.pdf)
- Jes No is the Applicant a Minority-Owned, Women-Owned or Veteran-Owned Business?
- Tes □ No Was the Applicant in business prior to March 7, 2020?
- ✓Yes □ No Was the PPE expenditure made, or is it contemplated to be made, on or after March 7, 2020?
- ☐ Yes \nabla \n
- Yes D No Has the Applicant been negatively impacted by the COVID-19 Pandemic?



:	Narrative: A.	Provide a summary of a reason for their purcha	ali PPE equipme	ent and fixture pu	rchases previo	ously purchased en	d the
15.	В.	Provide a summary for explanation of how it w	all future PPE a	nniicehiai			
	£C. 1	Provide a narrative to in disaster emergency, wh mpact of your work/se	nclude: how you w the funds are	ur organization h	as been negati ipplicant's ties	vely affected by ti to the community	e State and the
(attach sepa	rate sheet if more room	is needed)	unity4			
	9						
						9	
1983							
				•			

ASA Janitorial Services

265 Glenwood Ave. Buffalo, NY 14208

Erie County COVID19 Disaster Emergency Grant Application

Question 15: Narrative

A: Please provide a summary of all PPE equipment and fixture purchases previously purchases and the reason for their purchase:

All PPE Equipment and supplies were purchased to maintain my janitorial service, masks, hazmat suits, gloves, disinfectants, electrostatic sprayers, spongers, towels, mops brooms, anything pertaining to cleaning. We provide House cleaning and commercial cleaning.

B: Please provide a summary for all future PPE and fixture purchases the entity will be making, including an explanation of how it will be used (if applicable):

We will be purchasing kn95/surgical masks, hazmat suits, gloves, goggles/face shields, electrostatic sprayers for our commercial contracts. These sprayers and supplies are a constant necessity. Supplies will be used by all staff members of ASA JANITORIAL INC to comply with all CDC guidelines.

C: Provide a narrative to include: how your organization has been negatively affected by the State disaster emergency, why the funds are necessary, the applicant's ties to the community, and the impact of your work/service in Erie County:

March is our peak season, and the pandemic caused a loss of all contracts in mails, beauty stores etc. Additionally, employees quit due to fear of covid, and we had to stop payroll later in the year due to no employees and not enough work coming in. We helped the city by providing curbside trash pick ups when sanitation dept closed. We also gave free cleanings to the elderly community 65+ free. We are just now starting to pick up the pieces with this grant. It will help us provide the proper services and care for our clients and help the CDC keep all facilities and residential homes disinfected.



	OYMENT INFORMATION		17.3
<i>Existi</i> const	ng Jobs – A full-time equivalent job equals any combination of two or more part-tim Itute the equivalent of a job of at least 35 hours per week.	e jobs that, wh	en combined,
16.	Indicate how many existing full-time equivalent jobs the Applicant and its relate employ as of the date of application.	d entities	ا ک
Grant	Request Budget	- V	
17.	PPE and/or Fixture Installation Description Items or Vendor Contract (attach additional sheet as necessary)	For FUTURE PPE/Fixtures you plan to purchase — list and attach proposal copies	For PAST PPE/Fixture actual expenditures - list and attach paid receipts
	Total Vendor Expense		
	and the second s	\$	\$
	GRANT REQUESTED (grant will be calculated by multiplying eligible costs x 90%)	53500	\$54,500
l 8 .	Deing duly swore, state that it is a function of the duly swore, state that it is due to the questions and allowers contained in the forcology spulled followed the documents of that it have supplied that anticomplete imprination in the answer so each of this assweres, information that displication of the statements on intentional omissions smade in this applicable understand that false statements on intentional omissions smade in this applicable verification process may have an adverse consequence to my application verification process may have an adverse consequence to my application as industrial Development agency in addition, I acknowledge that the Agency as subject to New York State 4 Previous understand that all grant information and seconds related to this application are a disclosure under FOII, subject to limited statutory excusions:	nerits that the uestion herein sittle and von Tural Collinera brids the Eries	e stached in the bloc ext. Further on with the ; sounty
Jame	S Company (1985)		
A	of Company Official Completing Worksheet: Title: 1 Sha Aljun an Duner 1 Ire: Allun an Duner	Date Comple	V 10000 100 110

Grant Application Overview

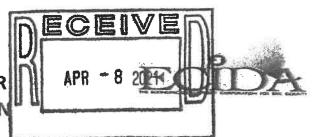
June 2021

APPLICANT	GRANT AMOUNT	PROGRAM PRIORITIES	STAFF RECOMMENDATION
		Highly Distressed	
Barbara D. Glover dba Miss		Area	
Barbara's School of Dance	\$2,285.74	MWBE	Recommended for Funding

Barbara D. Glover dba Miss Barbara's School of Dance (hereafter Miss Barbara's), the oldest minority owned dance studio in the City of Buffalo, has been a positive influence on area youth for fifty (50) years. Miss Barbara's mission is to not only develop dancers but to also develop the mind, body, and spirit of young people to help them realize their full potential as productive and contributing members of society. The lessons learned from teamwork, discipline and perseverance are lasting and students that strive to be the best learn the values of hard work, respect for self and others and determination.

Miss Barbara's has been negatively impacted by the NYS disaster declaration and the conditions created by the coronavirus pandemic. The business was closed for nearly eight months March-October 2020) during the Pause, which resulted in drastically reduced revenue. The dance school reopened to in-person instruction in October 2020 at reduced capacity. The class size restrictions and uncertainty regarding COVID has resulted in the loss of clients/revenue well into 2021. Miss Barbara's is requesting funding assistance from the ECIDA to offset the cost of PPE/fixture (masks, sanitizer, touchless dispensers, thermometer, and air purifiers) expenditures that were necessary to safely reopens and prevent community spread of COVID-19.





Thank you for your interest in the **Erie County Industrial Development Agency's Disaster Emergency Grant Program** to assist small businesses and not-for-profits with purchasing Personal Protective Equipment (PPE) and fixtures necessary to prevent the spread of Novel coronavirus, COVID-19. We suggest you begin by reading the Grant Guidelines that can be found here: https://www.ecidany.com/documents//Grant%20Guidelines%208-18-20.pdf
Please complete and return this Application along with the required documentation. Questions – contact us at 716.856.6525 x. 126

COMP	ANY INFORMATION				-17 37
1.	Applicant Legal Name:	Barbara D. Glove	er dba Miss Barbara's Sc	hool of Dance	N.S. P. BUN
2.	Applicant Address: Please note that businesses and not- for-profits located in communities served by IDAs (Amherst, Clarence, Concord, Hamburg, and Lancaster) are not eligible.		Suite 7, Buffalo, NY 142		<u>-</u>
3.	Legal Structure:	☐ C-Corp. ☐ Limited Partne	□S-Corp □LLC ership ✓Sole Proprie	☐ General Paretorship ☐ Not-fo	,
4.	Applicant Contact Name:	Barbara D. Glov			
5.	Contact Phone Number:	716-310-7297	Contact Email Address:	bdg12948@gmail.co	m
6.	Type of Business:	Dance School		1	
7.	Please submit a completed W- schedules or a 2019 CPA Audit Balance Sheet.	9, a signed copy o ted Financial State	f the organization's 2019 ment and 2020 year-to-d	ate Profit & Loss Stat	ncluding all ement and TACHED
8.	Number of years in business in	Erie County 50			
9.	Ownership: Privately held com structure, including the % of ow company. Not for Profit orga directors.	nership for each in	nch a description of the odividual and entity owning attach a list of the organ	g 20% or more of the	ATTACHED
10.	Ownership Type: Definitions of application. Please read Appendithat apply): Minority-Owned	dix A before answe	ring this question. Is your	n Appendix A of this business (check all	
11.	Primary North American Indust provide at least the three-digit of	rial Classification S code, but the six-dig	ystem (NAICS) Code of the git code is preferable	e Company. Please	
12.	What share of the company's p	roduct or service is	sold within Erie County:		100 %
13.	Miscellaneous Questions:				



	· · · · · · · · · · · · · · · · · · ·	a la the Commence of the Comme	TI' PROPERTY AND A STATE OF THE
	Tiles Fill	o Is the Company or any of its principals or Board Members presently the subject of any litigation, or is any litigation threatened, which would have a material adverse effect on the Company's financial condition?	
	□ Yes 🗹 No	Has the Company or any of its principals ever settled a debt with a lending institution for less than the full amount outstanding?	
	□ Yes v No	Has the company, its affiliates or any of its principals ever filed bankruptcy, a creditor's rights or receivership proceeding, or sought protection from creditors?	
	□ Yes v No	ols the Company or any of its principal's delinquent on property, personal, and/or employment taxes?	
		Has the Company or any of its principals or Board Members ever been convicted of any felony or misdemeanor, other than a minor traffic violation, or are any charges pending?	
	□ Yes 🗹 No	Has the Company, its affiliates, or any of its principals, been cited for a violation of federal, State, or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution, or operating practices?	
	□ Yes 🗹 No	Are there any outstanding judgments or lien pending against the Company, its affiliates, or any of its principals other than liens in the normal course of business? Amount:\$	
	□ Yes 🗹 No	Has the company been accused of false or misleading statements, or been the subject of a proceeding or had any allegations made against them, by any federal, state, local agency or authority including but not limited to the SEC, FCC, FDA, or OSHA? If yes, please attach a written explanation to this application.	
	□ Yes 🗹 No	Has the Applicant failed to comply with the provisions prohibiting wage discrimination on the basis of gender as found in federal law, including the Equal Pay Act of 1963, Title VII of the Civil Rights Act of 1964, Federal Executive Order 11246 of September 24, 1965 and New York State Labor Law Section 194 (together "Equal Pay Law").	
		How did hear about the FCIDA's COVID-19 Disaster Emergency Grant Program (i.e., radio, print news, word of mouth)?Landlord	
14.	Qualifying	Questions:	
	✓Yes □ No	ls the Applicant a small business or small not-for-profit corporation with not more than 50 employees?	•
	✓ Yes 🗆 No	Is the Applicant a business or not-for-profit with a primary place of business located in Erie County, New York?	
	✓ Yes 🗆 No	Is the Applicant's primary place of business located in a highly distressed area? (see map at https://www.ecidany.com/documents/HighlyDistressedAreaMap7-2-2013.pdf)	
	∡ Yes □ No	Is the Applicant a Minority-Owned, Women-Owned or Veteran-Owned Business?	
	√Yes □ No	Was the Applicant in business prior to March 7, 2020?	
	√Yes □ No	Was the PPE expenditure made, or is it contemplated to be made, on or after March 7, 2020?	
	□ Yes 💋 No	Has the Applicant applied for and/or received grant funding from another IDA and/or state or federal funding source to support the purchase of PPE identified in the Project budget below?	
	✓Yes 🗆 No	Has the Applicant been negatively impacted by the COVID-19 Pandemic?	



Narrative:

15.

- A. Provide a summary of all PPE equipment and fixture purchases previously purchased and the reason for their purchase.
- B. Provide a summary for all future PPE and fixture purchases the entity will be making, including an explanation of how it will be used (if applicable).
- C. Provide a narrative to include: how your organization has been negatively affected by the State disaster emergency, why the funds are necessary, the applicant's ties to the community and the impact of your work/service in Erie County.

attach separate sheet if more room is needed

- A. The purchase of touchless thermometers, touchless handsanitizer dispensers, children and adult masks, steriizer sprayer systems, and disinfectants that were necessary to protect students and independent teachers added the extra burden of virus prevention expenses.
- B. HEPA air purifiers for each classroom will need to be purchased in the future to comply with CDC recommended 4 to 6 turn overs of air an hour during class. Provide an environment that would be safe and help protect from the Covid-19 virus giving peace of mind to students, parents, and teachers and more students could return to classes.
- C. Miss Barbara's School of Dance, an institution synonymous with 'dance' and 'excellence' is the longest running African American owned and operated school of dance in the city of Buffalo's history. The school ignites dancers' potential one step at a time and has affected the lives of thousands of young people through the development of their minds, bodies and character through dance and is being shared over and over again in the lifestyles of its students. Many are successful doctors, lawyers, educators, politicians, nurses, pharmacists, scientists, engineers, artists, CPAs, entertainers and entreprenuers impacting the communities in Buffalo and Erie County and other areas of the world. Miss Barbara's School of Dance is a valuable community resource for many groups and organizations that require the use of choreographic and artistic services. The school donates countless volunteer hours to this end. Mandatory COVID-19 related closure by the state in mid-March wiped out dance school income. The dance school reopened for in-person classes in October, but enrollment is down due to restricted capacity limit and many parents being uncomfortable with returning to classes. Nobody wants to commit to anything long-term because they don't know what tomorrow will bring. Rent continues to accumulate. Restrictions on in-person class sizes make it difficult to cover overhead expenses. Students are feeling depressed and disconnected by being cut off from dance. In this time of much uncertainty, healthy expression and normalcy for children is crucial. There seems to be strong community support for local restaurants but not the same level of support for the services the dance school provides. Miss Barbara's School of Dance has been a place for all people of every ethnic background: students, professional dancers, dance enthusiasts, and those who simply need a break from their busy lives. The dance school season is September-June, the same as the school year. As an African American Female-owned small dance school that relies solely on income from classes and hit hard by the pandemic, grant funds are necessary to help pay for the added expense of ensuring safety for all.



EMPLO	DYMENT INFORMATION			
Existin constit	ng Jobs — A full-time equivalent job equals any of tute the equivalent of a job of at least 35 hours	ombination of two or more part-time per week.	obs that, wh	en combined,
16.	Indicate how many existing full-time equiva employ as of the date of application.	lent jobs the Applicant and its relate	d entities	The state of the s
Grant	Request Budget			
17.	PPE and/or Fixture Installation Description Items or Vendor Contract (attach additional	sheet as necessary)	For FUTURE PPE/Fixtures you plan to purchase — list and attach proposal copies	For PAST PPE/Fixture actual expenditures list and attach paid receipts
	Touchless Forehead Thermometers			\$ 57.98
	Germ-X Handsanitizer for dispenser			\$ 35.98
	Touchless handsanitizer dispensers			\$133.11
	Performacide spray kits			\$119.73
	Sterilizek sprayer			\$129.95 /
	Disposable protective face masks		\$ 25.98	\$ 12.99
	floor decals		2,025-98	\$ 23.99
a d file of the first of the state of the second of the se	Total Vendor Expense	Air Purities \$12,000	\$ 1,776.0 0+tx	\$513.73
	GRANT REQUESTED (grant will be calculated	by multiplying eligible costs x 90%)	\$ 2,500.00	\$2,539.71
			90% 2,285	5.74
18.	all the questions and answers contained in the hereto; that I have supplied full and complete of my knowledge, information and belief; and understand that false statements or intention verification process may have an adverse continuous trial Development Agency in addition, I acknowledge that the Agency is understand that all grant information and reconsidered under FOIL subject to limited statu	e information in the answer to each of that all information I have supplied hal omissions made in this Application sequence to my application/submiss subject to New York State's Freedom cords related to this application are p	nents that I had puestion herein is true and con n or in connect ion to the Erie	ve attached i to the best rect. I further ion with the County
Name	of Company Official Completing Worksheet:			27.4
realite !	or company official completing worksheet:	Title:	Date Comple	eted:
Barba	ra D. Glover	Owner	4/1/21	
Signatu	ire: Barbara D. Glaver			

Grant Application Overview

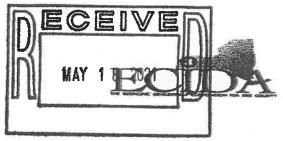
June 2021

APPLICANT	GRANT AMOUNT	PROGRAM PRIORITIES	STAFF RECOMMENDATION
		WBE	
Fit Fuel, LLC	\$7,593.04	VBE	Recommended for Funding

Synopsis:

Fit Fuel, LLC, located in Tonawanda, specializes in Fresh prepared meals that are designed to help clients meet their fitness and lifestyle goals. Whether seeking convenience, weight loss or optimal nutrition, Fit Fuel's diverse menu provides affordable healthy options to enjoy. With a culinary team that has over 60 years of restaurant experience, Fit Fuel helps clients nourish their body without sacrificing great taste.

Fit Fuel has been negatively impacted by the NYS disaster declaration and the conditions resulting from the coronavirus pandemic. Fit Fuel had been in business only seven (7) months prior to the NYS mandated Pause. Following the shutdown, in-store traffic significantly declined resulting in a 26% reduction in sales. The business attempted to pivot by offering contactless, free delivery; however, sales continued to decline. The decrease in sales revenue coupled with the increased cost of doing business, created a significant hardship for this young business. Fit Fuel is seeking funding assistance from the ECIDA to offset the cost of past and future PPE/fixture (gloves, masks, sanitizer, disinfecting wipes, sneeze screen, etc.) expenditures that were necessary to protect the health and safety of staff and clients.



Thank you for your interest in the **Eric County Industrial Development Agency's Disaster Emergency Grant Program** to assist small businesses and not-for-profits with purchasing Personal Protective Equipment (PPE) and fixtures necessary to prevent the spread of Novel coronavirus, COVID-19. We suggest you begin by reading the Grant Guidelines that can be found here: https://www.ecidany.com/documents//Grant%20Guidelines%208-18-20.pdf
Please complete and return this Application along with the required documentation. Questions — contact us at 716.856.6525 x. 126

(C)(VII)	AN INFORMATION AND A		$d_{M_{1}} = 0.05 \mathrm{M}_{2}$
1.	Applicant Legal Name:	Fit Fuel, LLC	
2.	Applicant Address: Please note that businesses and not- for-profits located in communities served by IDAs (Amherst, Clarence, Concord, Hamburg, and Lancaster) are not eligible.	3189 Eggert Rd. Tonawanda, NY 14150	
3.	Legal Structure:	☐ C-Corp. ☐ S-Corp ☐ General Par ☐ Limited Partnership ☐ Sole Proprietorship ☐ Not-fo	, *
4.	Applicant Contact Name:	Janice Wirth	
5.	Contact Phone Number:	716-432-31 07 Contact Email Address: fittue / 716 @ 94	woil com
6.	Type of Business: Food Service	Please Describe 1 () DO () NOA (
7.	Please submit a completed W-	9, a signed copy of the organization's 2019 Federal Tax Return in ed Financial Statement and 2020 year-to-date Profit & Loss Statement	ncluding all tement and
8.	Number of years in business in		<u>2</u>
9.	structure, including the % of ow	panies, please attach a description of the company's ownership mership for each individual and entity owning 20% or more of the inizations, please attach a list of the organization's officers and	ATTACHED
10.	Ownership Type: Definitions of application. Please read Appendithat apply): Minority-Owned	the following ownership types can be found in Appendix A of this lix A before answering this question. Is your business (check all Woman-Owned	
11.	Primary North American Industry provide at least the three-digit c	rial Classification System (NAICS) Code of the Company. Please ode, but the six-digit code is preferable	722300
12.	10	roduct or service is sold within Erie County:	100 %
13.	Miscellaneous Questions:		



	- Vac Mile	La Alia Canada de la Canada de
	i res princ	Is the Company or any of its principals or Board Members presently the subject of any litigation threatened, which would have a material adverse effect on the Company's financial condition?
	□ Yes 🛪 No	Has the Company or any of its principals ever settled a debt with a lending institution for less than the full amount outstanding?
	□ Yes 🗷 No	Has the company, its affiliates or any of its principals ever filed bankruptcy, a creditor's rights or receivership proceeding, or sought protection from creditors?
	□ Yes かNo	Is the Company or any of its principal's delinquent on property, personal, and/or employment taxes?
	□ Yes ★ No	pending?
	□ Yes t No	Has the Company, its affiliates, or any of its principals, been cited for a violation of federal, State, or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution, or operating practices?
	□ Yes 😿 No	Are there any outstanding judgments or lien pending against the Company, its affiliates, or any of its principals other than liens in the normal course of business? Amount:\$
	□ Yes No	Has the company been accused of false or misleading statements, or been the subject of a proceeding or had any allegations made against them, by any federal, state, local agency or authority including but not limited to the SEC, FCC, FDA, or OSHA? If yes, please attach a written explanation to this application.
	□ Yes 🔀 No	Has the Applicant failed to comply with the provisions prohibiting wage discrimination on the basis of gender as found in federal law, including the Equal Pay Act of 1963, Title VII of the Civil Rights Act of 1964, Federal Executive Order 11246 of September 24, 1965 and New York State Labor Law Section 194 (together "Equal Pay Law").
		How did hear about the ECIDA's COVID-19 Pisaster Emergency Grant Program (i.e., radio, print news, word of mouth)? WOLL OF MOVE
14.	Qualifying (Questions:
	X Yes □ No	Is the Applicant a small business or small not-for-profit corporation with not more than 50 employees?
	Y(Yes □ No	Is the Applicant a business or not-for-profit with a primary place of business located in Erie County, New York?
	□ Yes 🕅 No	Is the Applicant's primary place of business located in a highly distressed area? (see map at https://www.ecidany.com/documents/HighlyDistressedAreaMap7-2-2013.pdf)
	X Yes □ No	Is the Applicant a Minority-Owned, Women-Owned or Veteran-Owned Business?
	X Yes □ No	Was the Applicant in business prior to March 7, 2020?
	X Yes □ No	Was the PPE expenditure made, or is it contemplated to be made, on or after March 7, 2020?
	□ Yes X No	Has the Applicant applied for and/or received grant funding from another IDA and/or state or federal funding source to support the purchase of PPE identified in the Project budget below?
	¥Yes □ No	Has the Applicant been negatively impacted by the COVID-19 Pandemic?



	Narrative:
	A. Provide a summary of all PPE equipment and fixture purchases previously purchased and the
	reason for their purchase.
5.	B. Provide a summary for all future PPE and fixture purchases the entity will be making, including
	explanation of how it will be used (if applicable).
	C. Provide a narrative to include: how your organization has been negatively affected by the State disaster emergency, why the funds are necessary, the applicant's ties to the community and th impact of your work/service in Erie County.
-	(attach separate sheet if more room is needed)
	i
	See attacheel (page 3A)
	and while page 3.
	:
	: : :
	:

#15. Narrative:

A. PPE Previously Purchased:

- Masks required for all employees in the kitchen and all customer facing employees
- Hand Sanitizers required for employees and customer in all high tough areas to include pick-up/payment area
- Gloves are used to comply with food handling requirements and NYS mandated that gloves be changed frequently during COVID health emergency
- Cleaners and disinfectants required to be used in high risk areas and on frequently touched surfaces in both the kitchen and retail store
- Sneeze Guard required to comply with 6 ft social distancing in the payment area
- C. Fit Fuel offers prepared meals that are designed to meet the fitness and lifestyle goals of our customers. Whether a customer is looking for convenience, weight loss or optimal nutrition, our diverse menu provides healthy, affordable meals options. Our target market includes all ages and demographics.

We experienced a significant decrease in sales revenue and in-store traffic due to the disaster emergency (the month after the shutdown in-store traffic was down 53% and sales down 26%). Our business opened in April 2019 and as relatively new business, the sales decrease relating to this health emergency has been extremely challenging. To help drive sales, we moved to a contactless delivery and waived our \$10 delivery fee. However, we continued to experience decreased sales resulting from the pandemic. The cost of required gloves increased 450%. New requirements for other personal protection equipment for all employees resulted in significantly increased costs. Meat and poultry prices also increased significantly during this time.

Additionally, we regularly did tastings at local gyms to introduce gym members to our food; this stopped because food tasting was no longer an option and gyms were closed for most of 2020. We purchased a truck and set it up as a "mobile store" and planned to have the truck go to gyms and businesses so customers could buy meals from the truck. Our mobile store was scheduled to launch in Spring of 2020. Given the mandated closures, then limited capacity at gyms and the number of business having employees work from home coupled with the challenge relating to the hiring of additional employees, a launch date for our mobile store is not currently planned.

The grant money will be used for marketing/advertising (to include social media, radio and print), payroll, rent, utilities and PPE.

Page 3A



ÉVIRE	VAIENT INFORMATION			
Existin constit	g Jobs – A full-time equivalent job equals any coute the equivalent of a job of at least 35 hours p	ombination of two or more part-time per week.	jobs that, whe	n combined,
16.	Indicate how many existing full-time equival employ as of the date of application.	ent jobs the Applicant and its related	l entities	
	Request Budget			
17.	PPE and/or Fixture Installation Description Items or Vendor Contract (attach additional s	sheet as necessary)	For FUTURE PPE/Fixtures you plan to purchase – list and attach proposal copies	For PAST PPE/Fixture actual expenditures - list and attach paid receipts
	See attached (p	age 4A/B)		
	Total Vendor Expense		\$445531	\$6,441.48
Not the second of the second o	GRANT REQUESTED (grant will be calculated by	by multiplying eligible costs x 90%)	\$4,009.78	\$6,441.48 \$5,802.73
18.	all the questions and answers contained in the hereto; that I have supplied full and complete of my knowledge, information and belief; and understand that false statements or intention verification process may have an adverse continuutrial Development Agency in addition, I acknowledge that the Agency is understand that all grant information and recodisclosure under FOIL subject to limited statut	information in the answer to each q that all information I have supplied in all omissions made in this Application sequence to my application/submission subject to New York State's Freedom and related to this application are possible.	nents that I have uestion herein s true and cor- or in connect on to the Erie of Information	to the best rect. I further ion with the County
Name	of Company Official Completing Worksheet:	Title:	Date Comple	eted:
4+	Fuel, LLC	Member	5/15	/21
Signatu	ıre:		,	(1)

Page 4

Past.

×			PPE Past Expense		24
Date	PPE Item	Past PPE Expenditures	Including Tax	Visa	Check #
3/11/2020	Gloves	\$119.52	\$129.98		292
3/13/2020	70% Alcohol	\$7.16	\$7.79	χ	
3/26/2020	Gloves	\$89.64	\$97.48		296
4/12/2020	Masks	\$43.38	\$47.1843.38	x	
4/16/2020	Sanitizing Wipes	\$95.00	\$103.31		306
4/16/2020	Gloves	\$119.52	\$129.98		306
4/30/2020	Gloves	\$119.52	\$129.98		313
5/21/2020	Gloves	\$119.52	\$129.98		321
5/9/2020	Sanitizer Dispenser	\$38.60	\$41.98	Х	
6/11/2020	Gloves	\$173.33	\$188.50		328
6/25/2020	Masks	\$44.82	\$48.74	Х	
7/2/2020	Gloves	\$35.17	\$38.25		337
7/2/2020	Gloves	\$179.60	\$195.32		337
7/2/2020	Sanitizing Wipes	\$95.00	\$103.31		337
7/23/2020	Gloves	\$35.17	\$38.25		346
7/23/2020	Gloves	\$179.60	\$195.32		346
7/31/2020	Gloves	\$57.90	\$62.97		349
8/13/2020	Gloves	\$78.25	\$85.10		358
8/13/2020	Gloves	\$287.32	\$312.46		360
8/22/2020	Sneeze Screen	\$76.11	\$76.11	Х	300
8/24/2020	Masks	\$15.99	\$17.39	X	
9/14/2020	Masks	\$16.99	\$18.48	X	
9/24/2020	Gloves	\$248.64	\$270.40	^	385
10/5/2020	Masks	\$14.49	\$15.76	Х	363
10/15/2020	Sanitizer	\$60.83	\$66.15	^	400
10/26/2020	Gloves	\$349.95	\$380.57	Х	400
11/5/2020	Disinfecting Wipes	\$137.28	\$149.29	^	408
11/12/2020	Hand Sanitizer Gel	\$10.32	\$11.22	Х	400
11/14/2020	Gloves	\$319.96	\$347.96	X	
11/22/2020	Masks	\$12.99	\$14.13	X	
11/30/2020	Gloves	\$319.96	\$347.96	X	
11/30/2020	Gloves	\$399.95	\$434.95	X	
12/8/2020	Gloves	\$319.96	\$347.96	X	
12/28/2020	Masks	\$9.99	\$10.86	X	
1/3/2021	Gloves	\$179.98	\$195.73	X	
1/7/2021	Gloves	\$179.98	\$173.98	X	
2/2/2021	Masks	\$8.99	\$9.78	^	
2/4/2021	Gloves	\$79.99	\$86.99	Х	
2/15/2021	Gloves	\$269.97	\$293.59	X	
2/18/2021	Disinfecting Wipes	\$68.64	\$74.65	^	455
2/25/2021	Gloves	\$359.96	\$391.46	v	400
2/18/2021	Gloves	\$339.96 \$179.98	\$195.73	X X	
3/8/2021	Masks	\$179.98 \$8.99	\$195.73		
3/15/2021	Gloves	\$8.99 \$314.97	<i></i>	X	
3/25/2021	Sanitizing Wipes	\$314.97 \$3.32	\$342.53	X	
3/25/2021	Disinfecting Wipes		\$3.61	Χ	600
J 43 4041	pouncriug wibes	\$68.64	\$74.65		622 ھىلامىن
		Total	\$6,447.48 6,4	43.75	622 Very Lad
		90% of Total	\$5,802,73	5.79	9 28

Page 4A

TUTULE

Date	Supplier	PPEItem	Future PPE Expenditures (estimated based on current price)	Future PPE Expense Including Tax
May	WebstaurantStore	Gloves - 4 cases	\$359.96	\$391.46
May	Johnstone Food Service	Disinfecting Wipes	\$68.64	\$74.65
June	WebstaurantStore	Gloves- 8 cases	\$719.92	\$782.91
July	WebstaurantStore	Gloves -8 cases	\$719.92	\$782.91
August	WebstaurantStore	Gloves - 8 cases	\$719.92	\$782.91
September	WebstaurantStore	Gloves - 8 cases	\$719.92	\$782.91
September	Johnstone Food Service	Disinfecting Wipes	\$68.64	\$74.65
October	WebstaurantStore	Gloves - 8 cases	\$719.92	\$782.91
			Total	\$4/455-\$1
			90% of Total	Garnows

page 4B

Grant Application Overview

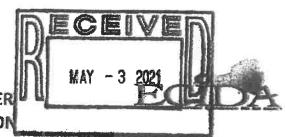
June 2021

APPLICANT	GRANT AMOUNT	PROGRAM PRIORITIES	STAFF RECOMMENDATION
I Mobile I I C dha Danna an D A	#0.702.00	Highly Distressed Area	
J. Malik LLC dba BurgerIM	\$9,702.90	MBE	Recommended for Funding

Synopsis:

J. Malik LLC dba BurgerIM (hereafter BurgerIM) located on Hertel Avenue in the City of Buffalo offers a fresh take on gourmet fast food. The business, which opened in September 2019, focuses on the following elements: Honesty and Integrity, Commitment, Consistency, Service Excellence, Quality and Freshness, and Teamwork.

BurgerIM was negatively impacted by the NYS disaster emergency and the conditions created by the coronavirus pandemic. The restaurant had only been in business for 6 months prior to the disaster emergency declaration, which resulted in the temporary closure of the restaurant as well as employee layoffs. The business reopened at reduced capacity in accordance with NYS Guidelines, which necessitated the costly construction of an outdoor seating area to allow for social distancing and comply with the City of Buffalo's patio use rules. Burger IM is seeking funding assistance from the ECIDA to offset the costs associated with patio/seating area construction (separation barriers, picnic tables, benches, awning, etc.) necessary to for customers and staff to maintain social distance.



Thank you for your interest in the Erie County Industrial Development Agency's Disaster Emergency Grant Program to assist small businesses and not-for-profits with purchasing Personal Protective Equipment (PPE) and fixtures necessary to prevent the spread of Novel coronavirus, COVID-19. We suggest you begin by reading the Grant Guidelines that can be found here: https://www.ecidany.com/documents//Grant%20Guidelines%208-18-20.pdf Please complete and return this Application along with the required documentation. Questions — contact us at 716.856.6525 x. 126

COM	PANY INFORMATION					
1.	Applicant Legal Name:	J.Malik LLC. d.b.a BurgerIM				
2.	Applicant Address:	1460 Hertel Ave, Buffalo NY 14216				
3.	Legal Structure:	☐ C-Corp. ☐ S-Corp ØLLC ☐ General Partnership ☐ Limited Partnership ☐ Sole Proprietorship ☐ Not-for-Profit				
4.	Applicant Contact Name:					
5.	Contact Phone Number:	347-741-3000 Contact Email Address: Burgerimbuffalo@gmail.co				
6.	Type of Business:					
7.	Please submit a completed W-9, a signed copy of the organization's 2019 Federal Tax Return including all schedules or a 2019 CPA Audited Financial Statement and an Interim Profit & Loss Statement and Balance Shee through at least June 30, 2020.					
8.	Number of years in business in Erie County		1.5			
9.	Ownership: Privately held companies, please attach a description of the company's ownership structure, including the % of ownership for each individual and entity owning 20% or more of the company. Not for Profit organizations, please attach a list of the organization's officers and ATTACHEI directors.					
10.	Ownership Type: Definitions of the following ownership types can be found in Appendix A of this application. Please read Appendix A before answering this question. Is your business (check all					
	that apply): 2 Minority-Own	The state of the s	i i			
11.	Primary North American Industrial Classification System (NAICS) Code of the Company. Please provide at least the three-digit code, but the six-digit code is preferable		722211			
12.	What share of the company's product or service is sold within Erie County:		100%			
13.	Miscellaneous Questions:					
	intigation, or is an	or any of its principals or Board Members presently the subject of any by litigation threatened, which would have a material adverse effect is financial condition?				
	☐ Yes ☑ No Has the Company for less than the	y or any of its principals ever settled a debt with a lending institution full amount outstanding?				
	☐ Yes ☑ No Has the company	r, its affiliates or any of its principals ever filed bankruptcy, a principals ever filed bankruptcy, a principals ever filed bankruptcy, a				



□ Yes ø	No is the Company or any of its principal's delinquent on property, personal, and/or employment taxes?
□ Yes ø	No Has the Company or any of its principals or Board Members ever been convicted of any felony or misdemeanor, other than a minor traffic violation, or are any charges pending?
□ Yes ø	Has the Company, its affiliates, or any of its principals, been cited for a violation of federal, State, or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution, or operating practices?
D Yes 1d	Are there any outstanding judgments or lien pending against the Company, its affiliates, or any of its principals other than liens in the normal course of business? Amount:\$
□ Yes ø	Has the company been accused of false or misleading statements, or been the subject of a proceeding or had any allegations made against them, by any federal, state, local agency or authority including but not limited to the SEC, FCC, FDA, or OSHA? If yes, please attach a written explanation to this application.
/ Yes &	Is the Applicant in compliance with the provisions prohibiting wage discrimination on the basis of gender as found in federal law, including the Equal Pay Act of 1963, Title XII of the Civil Rights Act of 1964, Federal Executive Order 11246 of September 24, 1965 and New York State Labor Law Section 194 (together "Equal Pay Law").
Qualifyi	ng Questions:
Ø Yes □	No is the Applicant a small business or small not-for-profit corporation with not more than 50 employees?
øYes □ i	ls the Applicant a business or not-for-profit with a primary place of business located in: Erie County, New York?
ziYes ⊡ l	Is the Applicant's primary place of business located in a highly distressed area? (see map at https://www.ecidany.com/documents/HighlyDistressedAreaMap7-2-2013.pdf)
øYes □ i	is the Applicant a Minority-Owned, Women-Owned or Veteran-Owned Business?
øYes □	No Was the Applicant in business prior to March 7, 2020?
ø Yes □	No Was the PPE expenditure made, or is it contemplated to be made, on or after March 7, 2020?
□ Yes ø!	Has the Applicant applied for and/or received grant funding from another IDA and/or state or federal funding source to support the purchase of PPE identified in the Project budget below?
ø Yes □	No Has the Applicant been negatively impacted by the COVID-19 Pandemic?
Narrative	
Δ	. Provide a summary of all PPE equipment and fixture purchases previously purchased and the
•	reason for their purchase.
	O Yes 20 O Yes 20 O Yes 20 O Yes 10 O Yes 20 O Yes 10 O Yes 20 O Yes 10 O Yes 20 O Y



	C. Provide a narrative to include: how your organization has been negatively affected by the State
	disaster emergency, why the funds are necessary, the applicant's ties to the community and the
	impact of your work/service in Erie County.
	(attach separate sheet if more room is needed)
	As a Restaurant gumer in Ruffalo I opered my hunings in Contact of 2040 to 1
	As a Restaurant owner in Buffalo, I opened my business in September of 2019, just before the pandemic, during the winter of Buffalo. When the Pandemic hit I had to temporarily close my restaurant and lay all of
	SIGN WITH INC HOU HIDE THURHOUT OF WHAT HEACHY WE WERE DESIDE WITH I DON NIVE and Eric county come out with mou.
	SOP's regarding outdoor dine-in, hand sanitizing stations and etc. We have had to limit indoor dine and built out a patio to accommodate those customers wanted to sit down.
	The patio involved purchasing commercial heaters, igloo like Plexi glass to separate guests. And also, the purchase of
	separation barriers for the inside when indoor dining resumes.
	This does not include all of the costs to install hand sanitizing stations, having additional labor to clean tables after each
	use etc.
:	
and our ar	e e
7	
3	
and the state of t	
1	
1	
1	
1	
· · · · · · · · · · · · · · · · · · ·	
1	

i i	



EMPL	OYMENT INFORMATION		7.4	
<i>Existi</i> consti	ng Jobs — A full-time equivalent job equals any of itute the equivalent of a job of at least 35 hours	combination of two or more part-time per week.	obs that, wh	en combined,
16.	Indicate how many existing full-time equivalent jobs the Applicant and its related entities employ			
Grant	Request Budget			
17.	PPE and/or Fixture Installation Description For FUTURE PPE/Fixtures you plan to purchase — list and attach proposal copies			For PAST PPE/Fixture actual expenditures list and attack paid receipts
	Out-door patio construction & indoor seperation ba	rriers- Haneen Construcion		\$10,781
	T-4-1 Manuface E			
	Total Vendor Expense		\$	\$\$10,781
	GRANT REQUESTED (grant will be calculated	by multiplying eligible costs x 90%)	\$	\$9702.9
18.	Junaid Malik all the questions and unswers contained in the hereto, that I have supplied full and complete of my knowledge, information and belief; and uniderstand that false statements or intention verification process may have an adverse continuous and Development Agency. In addition, I acknowledge that the Agency is understand that all grant information and reddisclosure under FOIL subject to limited status.	e information in the answer to each of d that all information I have supplied hal omissions made in this Application is equence to my application/submiss subject to New York State's Freedom cords related to this application are p	nents that I have uestion herein is true and cornect ion to the Erie of Information of Information of Information ion to the Erie of Information in the Information in Information Informatio	ve attached to the best rect. I further ion with the County
Name	of Company Official Completing Worksheet:	Tial		
Junaid Malik		Title: President, Owner	Date Completed: 03/21/2021	
Signat	ure: Call			

Szewczyk, Lori

From:

Junaid Malik <burgerimbuffalo@gmail.com>

Sent:

Thursday, May 20, 2021 6:36 PM

To:

Szewczyk, Lori

Subject:

Re: COVID-19 Disaster Emergency Grant Application

Attachments:

sig.tif; Burger IM Application_REv1.pdf

[Message is from an external source] Hi Lori,

Thank you for your email and reviewing my application. I sincerely apologize regarding my response to question #13, it was a mistake and is corrected and initiated in the attached application.

Details regarding the grant amount are as follows; I initially had no outdoor seating or patio option, No awning system or cover, it was a concrete pad with an 8 inch step to the indoor restaurant establishment, In 2020 NYS and city of buffalo rolled out a pilot program for Small Business Social Distancing Exterior Premises Use. In order to comply with the city of Buffalo's outdoor patio use Application we had to protect the sidewalk from walking pedestrians by building a temporary safety perimeter around the restaurant and other adjoining properties.

This patio needed to be socially distanced at a minimum of 6 ft, or have barriers in between. The contractor had to install an;

- Awning system to cover customers from Rain / snow / sunlight.
- Installed a heating element which involved running a gas line from the back of the kitchen to basement to front patio area, to protect customers who wanted to dine outside.

This was the cheapest and fastest, liable option available at the time to attract business and outdoor patronage.

If you have any questions please feel free to reach out to me.

Junaid Malik

Owner/Manager



BurgeriM - Buffalo

1460 Hertel Ave., Buffalo, NY 14216

Store Phone: (716) 495-8888

Mobile: (347) 741-3000

On Mon, May 17, 2021 at 2:07 PM Szewczyk, Lori < lszewczyk@ecidany.com wrote:

Mr. Malik.

Thank you for submitting your application to the ECIDA's COVID-19 Disaster Emergency Grant Program. Your proposal is currently being processed; however, we need some additional information to complete the review. At your earliest convenience, please provide the following:

- Review and verify your answer to Question #13 (attached compliance question highlighted in yellow). Please change and initial if necessary.
- Details regarding Grant Request Budget provide a brief explanation regarding the construction of four (4) picnic tables. Were there less expensive options for outdoor seating?

Thank you for your attention in this matter.

Lori A. Szewczyk

Director of Grants

Direct Line (716) 362-8363

lszewczyk@ecidany.com

ECIDA

95 Perry Street, Suite 403

Buffalo, NY 14203

Main (716) 856-6525

Fax (716) 362-8393

www.ecidany.com