



Economic Injury Worksheet

Include this Economic Injury Worksheet with the submission of the grant application.

Small Business or Community Organizations State of Washington Registered Name:		
Number of years in operation within Covington city limits: # _____	Grant amount requested (from \$2,500 to \$7,500): \$ _____	Estimated months of cash reserves remaining: # _____
In-home business or leased space? : _____		
Number of full-time employees (must be no more than 15): # _____	Business type (e.g., LLC, LP etc.):	
Number of full-time employees furloughed or laid off:	Business sector (e.g., hospitality):	
Likelihood of immediate business closure (If Washington remains at Phase 2) within 60 days from now (indicate one): High: _____ Medium: _____ Low: _____	Number of potential jobs lost upon permanent business closure:	
Is business continuing to pay employee salary and/or benefits during closure? Yes _____ No _____ Reason why:	Is business an ' essential business ' according to the State of Washington? Yes _____ No _____ If yes, please explain:	

Was business open to public or working under normal operating conditions during March – May 2020?

Yes ___ No ___

If business has received funding from alternative sources, please list (for example, PPP, EIDL, Working Washington grant, other cities, etc.):

Please note that if you have received other funding grants from an alternative source, you will NOT BE ELIGIBLE to receive this grant.

Has business applied for, but not been approved for, alternative grant sources?

Yes ___ No ___

If yes, which alternative grant source did you apply for?: _____

Briefly describe why it was not approved:

Brief business description of applicant's activities (for example, franchise details, business model, etc.):

Is business pending legal action (for example, eviction, bankruptcy, lawsuits, etc.)?:

Yes ___ No ___

If yes, please give a brief explanation:

Briefly describe the economic impact to business from COVID-19 or the Governor's "Safe Start Washington" order:

Briefly describe the difference between the business/organization's Q2 2019 revenue and Q2 2020 revenue:

If funded, would business reopen and likely completely recover? Please give a brief explanation of why or why not:

Please give a brief explanation of why your business will or will not require additional funding beyond this grant to reopen:

Please describe how business/organization has participated in the Covington community (such as supporting local activities, clubs, teams, charities, events, etc.):

Please attach gross receipts or 2019 Tax Return with your application.