



Midland Development Corporation  
 Small Business Assistance Program  
 Aid Application Form



**Check One:**

- Corporation
- Professional Corporation
- General Partnership
- Limited Liability Company (LLC)
- Sole Proprietorship
- Single-member LLC

Business Legal Name		Business TIN (EIN, SSN)	
Business Address		Business Phone	Email Address
Owner Name		Phone Number	Address
2019 IRS Form 940, Line 3			
\$			

*If any questions (1) - (7) below are answered "Yes," you are not eligible to receive Program Funding.*

Question	Yes	No
1. Is the Business a publicly traded entity?		
2. Is the Business a government entity?		
3. Is the Business a nonprofit organization of any kind?		
4. Is the Business a recipient of federal funding under the CARES Act or SBA Paycheck Protection Program?		
5. Is the Business part of an industry designated as NAICS 21 (Mining, Quarrying, and Oil and Gas Extraction)?		
6. Is the Business part of an industry designated as NAICS 5311 (Lessors of Real Estate)?		
7. Has the Business ever received funding from MDC?		



Midland Development Corporation  
 Small Business Assistance Program  
 Aid Application Form



*(See next page)*

*If all questions (1) – (10) are answered “Yes,” you may be eligible to receive Program Funding.*

Question	Yes	No
1. Is the Business located within the city limits of Midland, TX?		
2. Is the Business either headquartered in Midland, TX or a franchise that is wholly locally owned?		
3. Has the Business been in existence since January 1, 2019 or before?		
4. Can the Business provide one year of business financials and most recent tax return, in addition to all documentation listed below?		
5. Is the Business registered with the Texas Comptroller’s office and currently in good standing?		
6. Did the Business have fewer than fifteen (15) full-time employees at all times during calendar year 2019?		
7. Did the Business maintain a minimum of two (2) full-time employees (payroll hours equaling or exceeding 4,160 in 2019, or 2,080 hours per position) during calendar year 2019?		
8. Can the Business demonstrate a decline in revenue equal to or greater than 50% in the period April 1 <sup>st</sup> –30 <sup>th</sup> , 2020, in comparison to revenue from the period April 1 <sup>st</sup> -30 <sup>th</sup> , 2019?		
9. [If applicable] Can the Business prove that any employed family members have been on payroll since January 1, 2020?		

**By Signing Below, You Make the Following Representations, Authorizations, and Certifications:**

**CERTIFICATIONS AND AUTHORIZATIONS:**

I certify that:

- I understand I may not apply for Program Funds in excess of 25% of line 3 of my 2019 IRS Form 940, not to exceed \$25,000 (USD).
- I understand that Program Funds may be used only for approved Payroll Expenses.
- I understand that Community National Bank (CNB) operates as an independent contractor and not as an officer, agent, servant, or employee of the Midland Development Corporation (“MDC”).
- I understand that applications are to be approved on a “first come, first serve” basis.
- I understand that I am required to sign an affidavit certifying that I have no supplementary sources of capital, personal or otherwise.
- I understand that no owner or officer of any Business can be a family member or business partner of any current City Council member for the City of Midland, MDC Board member, or MDC employee.



Midland Development Corporation  
Small Business Assistance Program  
Aid Application Form



- I understand that, in the event my application is approved, I will be responsible for creating no less than 5 social media posts from Business's account promoting the MDC. I further understand that these posts must be made in good faith prior to December 15, 2020.
- I understand that I must provide proof that all awarded Program Funds have been expended on Payroll costs by 12/31/2020.
- I understand that final determination of eligibility will be made by MDC Board, with direction of MDC staff.
- I understand that my application may be denied for failing to meet any of the requirements listed above, or any reason deemed appropriate by MDC.

X

---

Signature of Authorized Representative



Midland Development Corporation  
Small Business Assistance Program  
Aid Application Form



DOCUMENTS AND INFORMATION:

Please provide the following documentation:

*If Business is designated as a Corporation, Professional Corporation, General Partnership, or LLC:*

- Color copy of government-issued ID, front and back
- Color copy of government-issued ID, front and back
- Organizational documents
- 1Q 2020 IRS form 941
- 1Q, 2Q, 3Q, 4Q IRS form 941
- 2019 IRS form W-3
- 2019 IRS form 940
- W-2 for all employees earning over \$100,000 (USD) annually
- 2019 Tax Return OR acceptable financial statements proving financial position for calendar year 2019
- Sales Tax Report for periods under review, OR 2019 bank statements proving financial position for calendar year 2019

*If Business is designated as a Sole Proprietorship or Single-Member LLC:*

- Color copy of government-issued ID, front and back
- 1Q 2020 IRS form 941
- 1Q, 2Q, 3Q, 4Q IRS form 941
- 2019 1040 Schedule C
- 2019 IRS form W-3
- 2019 IRS form 940
- W-2 for all employees earning over \$100,000 (USD)
- Payroll statement covering the period 02/15/2020
- 2019 Tax Return OR acceptable financial statements proving financial position for calendar year 2019
- Sales tax report for periods under review, OR 2019 bank statements proving up deposits, OR POS reports verifying sales for 2019 or any other acceptable form proving up sales



Midland Development Corporation  
Small Business Assistance Program  
Aid Application Form



- Upon delivery and receipt of the above information, I hereby authorize Community National Bank to provide the Midland Development Corporation any and all information submitted to CNB as part of the Small Business Assistance Program whether that information was provided in writing or orally. I understand that the decision to provide funding or deny my request is the sole discretion of MDC.
- I certify that all information submitted in this application and in all documents requested by MDC to determine eligibility are true, accurate, and complete. I understand that misrepresenting any information on this form or in the requested documents in relation to this application is a criminal offense punishable under federal law by fine or imprisonment.

X

---

Signature of Authorized Representative