Town of Salisbury
CDBG-CV Microenterprise Assistance Program

Pre-Application

Please complete this form and return it to the
Microenterprise Assistance Program
5 Beach Rd, Salisbury, MA 01952

**Business Data:**
Business Name: ____________________________________________
Business Address: ___________________________________________
Type of business: _____________________________________________
Number of Employees: _________________________________________

**Owner Data:**
Name: _______________________________________________________
Address: _____________________________________________________
Phone: _______________ (home/cell) _________________ (work)

*If additional owner's please provide information on a separate piece of paper

**Microenterprise Activity Parameters**

a. For CDBG, the term "microenterprise" means a commercial enterprise that has 5 or fewer employees, 1 or more of whom owns the enterprise.
b. Owner(s) of the microenterprise must qualify under the Low-Moderate Income (LMI) (≤80% of the AMI, based on family size) Please check whether your total income is above or below the income range listed next to your household size.

<table>
<thead>
<tr>
<th>Household Size</th>
<th>*Income Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 person</td>
<td>$67,400 Under</td>
</tr>
<tr>
<td>2 people</td>
<td>$77,000 Under</td>
</tr>
<tr>
<td>3 people</td>
<td>$86,650 Under</td>
</tr>
<tr>
<td>4 people</td>
<td>$96,250 Under</td>
</tr>
<tr>
<td>5 people</td>
<td>$103,950 Under</td>
</tr>
<tr>
<td>6 people</td>
<td>$111,560 Under</td>
</tr>
<tr>
<td>7 people</td>
<td>$119,350 Under</td>
</tr>
<tr>
<td>8 people</td>
<td>$127,050 Under</td>
</tr>
</tbody>
</table>

*Income for Salisbury residents – call if you reside in another town/city and we will supply you with the income ranges

c. CDBG-CV grantees must prevent the duplication of benefits, which means grant funds may not be used to pay costs if another source of financial assistance is available to pay that cost. This must be certified through the application from the business.
d. Grants must be capped at up to $10,000 per business.
e. Funds may be used for working capital to cover business costs, such as rent, staffing, and utilities.

f. Microenterprise Assistance Program funds may not be used for major equipment purchases, purchase of real property, construction activities, business expansion, or lobbying.

**Microenterprise Required Minimum Eligibility Criteria:**
In order for a commercial enterprise to be eligible for a grant, it must:

a. Be a microenterprise, as defined above.

b. Be a for-profit entity (sole proprietorships, partnerships, corporations, or LLCs).

c. Have a physical establishment in the Town of Salisbury

d. Provide goods or services to multiple clients or customers.

e. Business must be currently in operation and have been established prior to 1/1/2019.

f. Be in good standing with the state and city/town:
   - Be current on all taxes due through 3/1/2020;
   - Active and valid state licenses/registrations
   - Not a party to litigation involving the state or municipality.

g. Be able to document a loss of income equal to or greater than requested assistance due to COVID-19.

h. Not be listed as one of the following excluded business types:
   - real estate rentals/sales businesses;
   - businesses owned by persons under age 18;
   - businesses that are chains;
   - liquor stores;
   - weapons/firearms dealers;
   - lobbyists; or
   - cannabis-related businesses.

**CDBG Staff**

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