BUSINESS PROTECTION PROGRAM Business Incentive



Handbook Includes:

- Program Details
- Process Checklist
- Application Forms







PROGRAM DETAILS

BUSINESS PROTECTION PROGRAM:

- Designed to help secure buildings during emergency shutdown
- Provides financial assistance for securing buildings during times of emergency. (For example boarding up windows and doors, decorating facade.) Interior improvements and security systems are not eligible.
- Grants up to \$2,000 for boarding and securing of a building as long as art is provided on the façade of the securing material.
- Grants are reimbursement of cost and can be retroactive to the date of the order by the governor (3/17/2020) to shutdown non-essential business
- Funding available annually on a first-come, first served basis and only available for the duration of the mandatory shutdown (4/16/2020) and is subject to change.

TIME FRAME:

- All projects receiving funds must be completed within 14 calendar days of the date application is approved by the City Manager, Executive Director of the Las Vegas Redevelopment Agency. Projects not completed within the specified 14 days forfeit all approved and allocated Business Protection funds.
- Reimbursement of funds takes approximately 14-30 business days once copies of all paid invoices, receipts, cancelled checks and photos of completed project, are received. (*Redevelopment Agency reserves the right to pay applicant in one lump sum or installments.*)

PROPERTY/BUSINESS REQUIREMENTS:

- Located within one of the City's Redevelopment Areas in tax district 203, 204, 207, 212, 213 or 214
- Zoned for commercial, industrial or mixed-use operations. Eligible zoning designations: P-R, N-S, O, C-D, C-1, C-2, C-PB, C-M, M, R-3, R-4
- Properties with multiple retail tenants and/or vacant store fronts will be limited to 1 grant per storefront

INELIGIBLE PROPERTIES:

- Single-family residential properties
- Multifamily residential properties not part of a larger mixed-use development
- Properties or projects not meeting eligibility requirements
- Businesses specifically excluded are essential businesses designated by the State of Nevada and businesses that hold non-restricted gaming licenses (restaurants can qualify)

APPLICANT REQUIREMENTS:

- Applicant must have a current, active business license issued by the city of Las Vegas; show proof of a current city of Las Vegas business license for both the property owner and tenant
- Complete all improvements within 14 days of approval
- Work must be performed within the time frame of the mandatory shutdown
- Pictures of boarding and art must be submitted to the agency before reimbursement and inspected by the agency.
- Prior to receiving matching contribution, submit all paid invoices, receipts, cancelled checks and photos of completed project. (*The Redevelopment Agency reserves the right to refuse payment for any change orders not authorized*).

APPROVAL POLICIES:

- Applications will be reviewed and considered in the order they are received
- Applicant participation in this program and approval of any grant monies is at the sole discretion of the Redevelopment Agency.
- Agency shall have the ultimate authority to accept or reject each application, and have complete authority to decide whether requested work is eligible for this program.
- Agency shall be obligated to commit funds only the applicant is approved by the city of Las Vegas Redevelopment Agency.
- Any action taken by the city of Las Vegas Redevelopment Agency is final. There is no appeal process for applications that are not approved.

QUALIFIER:

• Final selection of a contractor(s) is the sole responsibility of the participating applicant. The Agency shall offer no warranty on work performed. The applicant should obtain any desired warranty information from the contractor(s) in writing.

Email completed forms to Tera Anderson at **teanderson@lasvegasnevada.gov**. If you have questions call 702.229.6865

APPLICATION CHECKLIST:

All information included in this checklist must be submitted to the Redevelopment Agency before we can begin the process:

- All documents signed by person certified as one of company's principals
- List of proposed improvements with estimated project costs
- **Signed Real Property Owner Consent (Landlord completes)**
- **Copy of current city of Las Vegas business license for applicant**
- □ All applicable contractor bids, invoices, receipts or work orders
- **High-quality "after" image of property showing boarding up work**
- Completed supplier profile through the link below
 https://www.lasvegasnevada.gov/Business/Purchasing

BPP APPLICATION: PROPERTY OWNER APPLYING

Applicant's Owner Information:

Owner's Corporate Name (company name as listed on city of Las Vegas business license):

Corporate Officer Name and Title:
Corporate Mailing Address:
Project/Property Address:
Assessor Parcel Number(s):
Size of Building/Project (square footage, # of levels, # of seats):
In which of these eligible tax districts is the property located: 203 204 207 212 213 214

What classification is property zoned for? _____

Additional Businesses at Project Address	City Business License #

Owner's city of Las Vegas Business License Number:		
Federal Tax ID Number or Social Security Number:		
Owner's Office Phone #:	Cell #:	
Owner's Email Address:		

Please describe the importance of this program for your business.

Email completed form to Tera Anderson at **teanderson@lasvegasnevada.gov**. If you have questions call 702.229.6865

BPP APPLICATION: TENANT APPLYING

Applicant's Tenant Information:

Applicant's Corporate Name (company name as listed on city of Las Vegas business license):

Corporate Officer Name and Title:	
Project/Property Address:	
Assessor Parcel Number(s):	
Size of Building/Project (square footage, # of levels	, # of seats):
In which of these eligible tax districts is the propert	y located: 203 204 207 212 213 214
What classification is property zoned for?	
Corporate Mailing Address:	
Applicant's city of Las Vegas Business License Num	ber:
Federal Tax ID Number or Social Security Number:	
Applicant's Office Phone #:	Cell #:
Applicant's Email Address:	
Property Lease Expiration Date:	_ Option to Extend: Yes / No How long: years
Property Manager:	Phone:

Property Owner Information:

Owner's Corporate Name (company name as listed on city of Las Vegas business license):

Owner's Officer Name and Title:
Mailing Address:

Please describe the importance of this program for your business.

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ESTIMATED BUDGET FOR SECURING BUILDING

Use of Funds (Activity)	Estimated Cost
Total Budget	\$

Execution of Application

The applicant acknowledges that the Redevelopment Agency will not pay for work begun prior to the governor approval to shutdown non-essential business (3/17/2020). Any work started prior to this approval will be the applicant's responsibility. Furthermore, applicant acknowledges that the identified project must be completed within 14 days of the original approval date; if said project is not completed within 14 days, all funds approved and allocated for said project will be forfeited by applicant and the corresponding agreement terminated. Applicant acknowledges that it must expend its full contribution prior to any reimbursement of grant funds. Finally, the applicant acknowledges that they received consent from the property owner to complete exterior security improvements.

Signature:	Date:
Print Name:	
Title:	

Email completed form to Tera Anderson at **teanderson@lasvegasnevada.gov**. If you have questions call 702.229.6865

VIP PARTICIPANT AFFIDAVIT

STATE OF NEVADA }

} ss: COUNTY OF CLARK }

Ι, _	
be	ing first duly sworn, depose and state under penalty of perjury as follows:
1.	I am a corporate officer, managing member, or sole proprietor of the,
	a company duly organized in the State of Nevada as a,
	(Corporation/LLC/Sole Proprietorship).
	The Participant is seeking the assistance of the city of Las Vegas Redevelopment Agency ("Agency") to secure the
	property at("Site"),
	as more particularly described by the agreement ("Agreement") being contemplated by the city of Las Vegas
	Redevelopment Agency.

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

	2 Business name/disregarded entity name, if different from above		
on page 3.	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Ch following seven boxes.	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):	
		Trust/estate	Exempt payee code (if any)
Print or type. Specific Instructions	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partner Note: Check the appropriate box in the line above for the tax classification of the single-member or LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single is disregarded from the owner should check the appropriate box for the tax classification of its own	wner. Do not check owner of the LLC is gle-member LLC that	Exemption from FATCA reporting code (if any)
ecif	☐ Other (see instructions) ►		(Applies to accounts maintained outside the U.S.)
See S			and address (optional)
D	7 List account number(s) here (optional)		
Pa		sid Social sec	curity number
backı reside	your TIN in the appropriate box. The TIN provided must match the name given on line 1 to av up withholding. For individuals, this is generally your social security number (SSN). However, f ent alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other es, it is your employer identification number (EIN). If you do not have a number, see <i>How to ge</i> later.	or a	
	: If the account is in more than one name, see the instructions for line 1. Also see What Name		identification number
	ber To Give the Requester for guidelines on whose number to enter.		-
Par	t II Certification		

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- 3. I am a U.S. citizen or other U.S. person (defined below); and
- 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person ►
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/FormW9*.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

• Form 1099-INT (interest earned or paid)

Date ►

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

Cat. No. 10231X

Form **W-9** (Rev. 10-2018)

INTERNATIONAL ECONOMIC DEVELOPMENT COUNCIL AEDEO Accredited Economic Development Organization

Department of Economic and Urban Development

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Las Vegas City Council: Mayor Carolyn G. Goodman Mayor Pro Tem Michele Fiore, Ward 6 Councilman Stavros S. Anthony, Ward 4 Councilman Cedric Crear, Ward 5 Councilman Brian Knudsen, Ward 1 Councilwoman Victoria Seaman, Ward 2 Councilwoman Olivia Díaz, Ward 3

City Manager: Scott Adams Chief Operations and Development Officer: Jorge Cervantes Chief Financial Officer: Gary Ameling Chief Community Services Officer: Lisa Morris-Hibbler Chief Public Safety Services Officer: Tim Hacker Executive Director of Community Development: Tom Perrigo

