



City of Amsterdam Microenterprise Assistance Program (AMAP) Pre-Application

The City of Amsterdam is applying for a \$215,000 grant through the New York State Office for Housing and Community Renewal. If awarded, The City of Amsterdam’s Microenterprise Assistance Program (AMAP) will target small businesses by providing much-needed working capital for start-up ventures or expansion of existing businesses.

The City anticipates assisting upward of 18 new or expanding businesses with local AMAP grants. Businesses that qualify are eligible to receive grants ranging from \$5,000 - \$35,000 for their start-up or expansion projects. Grants are intended as working-capital for equipment, inventory, and operation, NOT for construction.

The deadline for all pre-applications is Friday, February 5, 2021.

**This pre-application is for pre-screening purposes only. Submittal of this form does not guarantee acceptance to the program if the City of Amsterdam is awarded the funding. Applicants will still be required to submit a complete application at that time. **

Program Rules and Eligibility:

1. Grants are intended as working-capital for equipment, inventory, and operation, NOT for construction.
2. Applicants’ planned or existing business operations **must be located within the City of Amsterdam.**
3. Businesses must contribute at least 20% of the cost of the project in **cash equity**; AMAP grants may not exceed 80% of the total project costs.
4. Applicants must be new and existing commercial enterprises with **five or fewer employees**, one or more of which may be the principal(s) and own the enterprise at the time of application.
5. Businesses receiving funding **must create one new job** offered to or made available to** persons from low-to-moderate-income (LMI) families*** **OR be owned by a person defined as LMI.** (See below for National Objectives/ LMI Limits for definitions).
6. New jobs must start **within the ****two-year State grant period** (roughly July 2021 – July 2023).
7. Businesses receiving grants must participate in an “Entrepreneurial Training Seminar,” as a **requirement** for receiving funds. Training dates will take place in Summer of 2021.
8. A minimum of 50% of grant funds will be awarded to start-up businesses. Start-up is defined as an enterprise that has been in business fewer than six months at the time of application.

National Objectives/LMI Limits

*A portion (51%) of CDBG program funds must benefit persons defined as low-or-moderate-income based on federal “HUD” standards, equivalent to 80% of the HUD Area Median Family Income (AMFI). HUD defines the AMFI for Montgomery County as \$62,600 in 2020. In order to qualify as LMI, persons must have combined **family incomes below the following limits** based on household size (i.e. # of persons):*

Montgomery County, NY

Family Size:	1 Person:	2 Persons:	3 Persons:	4 Persons:	5 Persons:	6 Persons:
Income Limit:	\$37,650	\$43,000	\$48,400	\$53,750	\$58,050	\$62,350

Notes: *Full-time-equivalent (FTE) job is any combination of two or more part-time jobs that, when combined, constitute the equivalent of at least 40 hours per week.

** -- “Available to” LMI persons means the position must be advertised fairly and require no special skills or educational levels beyond a high school education.

***-- Family income limits are for year prior to employment; there is no cap on salary for jobs created.

****-- The two-year State grant period starts the date that the City of Amsterdam is awarded the Microenterprise Grant Program Funding



City of Amsterdam Microenterprise Assistance Program (AMAP) Round 3 Pre-Application

Applicant Information

Name of Business: _____
Name of Principal Contact (must be business owner): _____
Mailing Address: _____
Phone: _____ Email: _____

Business Location

Business Address: *(physical location – current/anticipated)*: _____
(If location not yet secured, an executed lease agreement will be required prior to distribution of funds)

Type of Business: __ Start-up __ Expansion:
How many years in business? _____
Number of employees: _____

Type of Project: (Check all appropriate) **Note: Construction, labor, and real estate are ineligible expenses for this program.**

__ Fixtures __ Inventory __ Working Capital __ Equipment __ Machinery
__ Other, if eligible: _____

Describe project and intended use of funds; be sure to justify grant expenses: *(Attach additional sheets if necessary)*

Job Creation Eligibility

Is job creation included in your project proposal? __Y __N

**If yes, please explain - Include number of jobs and job descriptions. *If no, please refer to LMI Owner Eligibility section below.*

LMI Owner Eligibility

If project does not include job creation, please complete information below to determine eligibility

Annual Gross Family Income: _____ # In Household: ____ Single Parent: __Y __N

Business Start-Up/ Expansion Request

Total grant amount may not exceed \$35,000; grant may not exceed 80% of total project costs.

Estimated cost of project: \$ _____ Grant Request: \$ _____

Anticipated Project Start Date: _____

Anticipated Expansion Completion/Business Opening Date: _____

Signature: _____ Date: _____

Please send all completed applications by **2/5/2021** to:

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518-841-4304