

**FORM 1-6B**  
**MICROENTERPRISE BUSINESS PROJECT SUMMARY FORM**

<b>Section I – CDBG Recipient Information</b>				
Recipient Name		CDBG #		
<b>Duplication of Benefits (CDBG-CV Projects ONLY)</b> - Has the DOB form been submitted for this business to OCR before/with this set up form? Yes <input type="checkbox"/> No <input type="checkbox"/> If no, please attach to this form.				
<b>Section II – Business Information</b>				
Business Name		Business DUNS		
Owner Name				
Owner Name				
Business Address				
		NY	ZIP + 4	
Type of Business				
Total Number of Current Employees Including the Owner(s)				
Date Business Owner Completed Entrepreneurial Training				
Date Business was Awarded Microenterprise Assistance by Recipient				
Is this a Start-Up or Existing Business?		Start-Up <input type="checkbox"/>	Existing <input type="checkbox"/>	
Year Business Established				
Is the Business Located in a NY Main Street Target Area Program?				Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Section III – National Objective Information</b>				
The business must meet one of the following in order to be eligible for a NYS CDBG Microenterprise grant. Check whether the business will create at least one LMI job or if the owner(s) qualify as low- to moderate-income. (Select LMJ or LMCMC)				
<b>LMJ - LOW/MOD CREATION</b> 24 CFR 570.208(a)(4): Activities designed to create/retain permanent FTE jobs, at least 51% of which employ LMI persons.				
If LMJ: <input type="checkbox"/> Jobs will be made available to LMI Persons <input type="checkbox"/> Jobs will be held by LMI persons				
<b>LMCMC - LOW/MOD LIMITED CLIENTELE MICROENTERPRISE</b> 24 CFR 570.208(a)(2)(iii): Activities that are carried out under 24 CFR 570.201(o) and the owner(s) /entrepreneur(s) are LMI persons.				
<b>Section IVa – Job Creation Information</b>				
If the business is proposing to meet the LMJ National Objective, complete the chart below for each job title to be created.				
Job Classification Title and Skills Required	Full – Time Jobs		Part – Time Jobs	
	Total #	Total # LMI	Total #	Total # LMI
Total				
<b>Average Number of Hours Worked Per Week for Part-Time Jobs:</b>				
<b>Normal Hours of Operation:</b>				

<b>Section IVb – Job Retention Information (CDBG-CV Projects Only)</b>					
<b>Retention Eligibility</b> – Has a financial analysis been submitted for this business to OCR before/with this set up form? Yes <input type="checkbox"/> No <input type="checkbox"/> If no, please attach to this form.					
Full – Time Jobs		Part – Time Jobs		Average Number of Hours Worked Per Week for Part-Time Jobs:	
Total #	Total # LMI	Total #	Total # LMI		
				Normal Hours of Operation:	
<b>Section V – Scope of Work:</b> Please provide a brief scope of work for the business.					
<b>Section VI – COVID Connection (CDBG-CV Projects Only):</b> Please explain how the proposed business activities will prepare, prevent, and/or respond to COVID 19. Attach additional pages as needed.					
<b>Section VI – Project Cost Information</b>					
Use of Funds	Source Of Funds				
	NYS CDBG	Equity	Other	Other	Subtotal
Direct Assistance to Business					
% of Total Project Cost					
Entrepreneurial Training					
Program Delivery					
Total Amount of Funding					
<b>Section VII – Certification of Microenterprise Business Project Summary Form</b>					
I certify that, to the best of my knowledge, this project summary is an accurate and truthful reporting of project details.					
Typed Name of Chief Elected Official					
Signature of Chief Elected Official					
Date		CEO Title			
Prepared by	Name				
	E-Mail				
	Phone		Date		

Ulster County Economic Development Alliance  
P.O. Box 1800, 244 Fair Street  
Kingston, NY 12402-1800  
Tel: 845.340.3556



## Memorandum

To: Sarah Haley, Chair of Ulster County Economic Development Alliance  
CC: Timothy Weidemann, President, Ulster County Economic Development Alliance, Lindsay Simonson, Assistant Ulster County Attorney  
From: Kate Heidecker, Deputy Director Ulster County Economic Development  
Date: November 4th, 2021

Re: Ulster County CARES Small Business Assistance Program– Woodland Playhouse,  
Christina Davis, Sole Proprietor

### Applicant

Christina Davis, Sole Proprietor (100% owner)

### Business Description

Woodland Playhouse is a small center preschool licensed by the New York State Office of Children and Family Services and a certificated Universal Pre-Kindergarten provider through the Onteora Central School District. In addition, it provides summer camps licensed through Ulster County. Woodland Playhouse offers care for children between the ages of 3 and 5, and camp for ages 2 -12.

### Eligibility

Location: 5575 Route 28, Phoenicia NY

For-profit: Yes

Pre-COVID: Operating

Current: Operating

Distress: Closed completely during COVID but has since reopened with decreased enrollment but same staffing levels. Increased expenses and decreased profit.

L/M Micro: Yes

L/M Jobs: Project retains sole proprietor's business. Qualifies due to income.

Minority-Owned Business: No

Woman-Owned Business: Yes

Veteran-Owned Business: No

### Use of Funds

Business-related payments for subcontractors, cell phone, laptop computers, external drives, subscriptions, software, office furniture, equipment, travel costs all costs to be purchased/incurred within 120 days of award.

#### CDBG Underwriting

**Project Costs** – Applicant will use grant funds for paying subcontractors, marketing expenses, PPE, equipment, and cell phone, laptop computers, external drives, subscriptions, software, and business-related travel expenses to be incurred within 120 days of grant agreement execution. Documentation of business-related costs will be required prior to disbursement and must be eligible and reasonable.

**Commitment of Other Sources of Funds** – None required, but applicant is committing \$12,000 of their own funds.

**No Substitution of CDBG Funds for Non-Federal Funds** – There are no other non-federal grant sources available to assist in post-COVID business restoration costs.

**Financial Feasibility** – The company significantly reduced operations due to COVID. Company has non-disclosure agreements (NDAs) with clients but affirms that a considerable part of client base includes companies in the travel and transportation industry, as well as manufacturers. Their usual business models were hindered -- if not paused -- during Covid, and this impacted operations significantly. CDBG grant funds will allow business to regain capacity to serve these clients through continuing COVID volatility. With this assistance, the business appears to be financially sound going forward.

**Reasonable Return on Equity** – There is nothing in the company's historical operating performance that suggests that the proposed grant would produce an unreasonable return on equity or result in profitability substantially in excess of industry standards.

**Pro Rata Disbursement of CDBG Funds** – No matching funds are required. Documentation of all project expenditures will be required prior to the disbursement of CDBG funds.

#### Connection to Coronavirus

Per Ulster County's application to the CDBG-CV program, the proposed project meets the following program goals:

- Support of Sole proprietor business that meets LMI qualifications
- Investment in marketing plan to grow business
- Expenses related to altering operations to meet post-COVID customer expectations
- Purchase of PPE to support customer and staff safety

#### Recommendation

Applicant can be conditionally approved for a grant of up to \$35,000 based on being a Microenterprise with a low-moderate income owner. Based on eligible expenses, the maximum allowable grant award could be \$35,000