



Ford Motor Company and the Ford Motor Company Fund have partnered with the National Urban League to launch the Emergency Capital Access Program (ECAP). ECAP is a programmatic initiative that seeks to provide immediate access to capital for Black business owners – an important but often overlooked pillar of the economy - who are currently at a competitive disadvantage for accessing government or foundation relief available due to COVID-19. In addition to providing capital relief, Black small business owners will also gain access to post-grant counseling to support the survival and growth of the Black business community.

On behalf of Ford Motor Company and the Ford Motor Company Fund, the Urban League of Louisiana will administer ECAP for black-owned businesses in the Greater New Orleans area. This program will award micro-grants in the amount of \$1,500 to qualifying Black-owned businesses that have been heavily impacted by the COVID19 pandemic. Candidates will be required to participate in post-award counseling services. Eligible businesses:

- Must have been a client of the Urban League of Louisiana as of July 1, 2020
- At least 51% of the business is owned and operated by an African American/Black individual residing in and operating a business in the Greater New Orleans area
- Are located in Census tracts with greater than 25% Black residency
- Provide direct to consumer products and/or services
- Had revenue of less than \$150,000 in 2019
- Are able to demonstrate business losses of at least 25% as a result of COVID-19

Funding priority will be given to applicants that are graduates of either the Urban League of Louisiana's *Scale Up! Louisiana Program* or the *Women in Business Challenge Accelerator* programs.

Grant awards may be used for rent, utilities, inventory, accounts payable, fixed costs, employee wages and benefits. These are grant awards and repayment by the recipient is not required. Applications for micro-grants will be reviewed and awarded on a rolling basis until all allocated funds are dispersed.

#### **Required Documentation**

- Ford ECAP: Small Business Micro-grants Program Application
- Confirmation of Federal Employer Identification Number (EIN) or Social Security Number
- Documentation of the business owner or owners' state residency (such as a driver's license or a bill)
- Louisiana Secretary of State Confirmation of Good Standing [Verify and Download Here](#)
- 2019 federal tax return (Personal returns will be accepted for independent contractors and self-employed individuals.)
- 2019 income statement showing monthly sales – [Free Template if Needed](#)
- 2020 year-to-date income statement showing monthly sales (January - June) – [Free Template if Needed](#)
- IRS Form W-9 – [October 2018 Required Version](#)
- Other supporting documents as requested

Applicants should gather all required documentation prior to starting the application form. For questions regarding the Ford Emergency Capital Access Program, please contact the Urban League of Louisiana at [fordecap@urbanleaguela.org](mailto:fordecap@urbanleaguela.org).

**Contact Information**

Business Owner Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Legal Business Name: \_\_\_\_\_

Business Physical Address: \_\_\_\_\_  
*Street Address*

\_\_\_\_\_  
*City State ZIP Code*

Owner's Home Address: \_\_\_\_\_  
*Street Address*

\_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Business Information**

Business Website: \_\_\_\_\_

Business Structure (Sole Proprietor, LLC, LLP, LP, Corp, S-Corp, Other) \_\_\_\_\_ If "Other" Describe: \_\_\_\_\_

Federal ID (EIN) #: \_\_\_\_\_

Year Business Established: \_\_\_\_\_ Month Business Established: \_\_\_\_\_

Type of Business (Retail, service, food service, freelancer, etc.): \_\_\_\_\_

Products and Services Provided: \_\_\_\_\_

Total Sales in 2019: \_\_\_\_\_ Total Payroll in 2019: \_\_\_\_\_

Number of Employees Before the COVID-19 LA State of Emergency: Full-time: \_\_\_\_\_ Part-time: \_\_\_\_\_

Number of Current Employees: Full-time: \_\_\_\_\_ Part-time: \_\_\_\_\_

Was your business been a client of the Urban League of Louisiana prior to July 1, 2020	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Is your business at least 51% owned by an African American/Black individual?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Is your business operated in a Census Tract with 25% or more African America/Black residency?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Is your business in "Good Standing" with the State of Louisiana Secretary of State?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Does your business provide direct to consumer products and/or services?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you been in operation for at least 12 months? (Prior to March 11, 2020)	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you had a loss of revenue of 25% or more due to COVID-19 restrictions?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Do you have gross annual revenues of \$150,000 or less?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Is your business a graduate of the Urban League of Louisiana's Scale Up! Louisiana Program?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Is your business a graduate of the Urban League of Louisiana's Women in Business Accelerator Program?	YES <input type="checkbox"/>	NO <input type="checkbox"/>

Please provide a general description of COVID-19 impact on your business. Ex: Business closure, reduced hours of operation, employee layoffs, revenue decline, increased operating costs, inability to respond to home-delivery requests, interrupted supply/delivery, employee absenteeism that affects ability to serve customers, inability to serve customers for other reasons, decreased customers, etc. (Use additional page if necessary).

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If awarded, how do you propose to use the grant funds?:

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Please provide your plan for ensuring business viability for maintaining operations through 2020.

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**Please answer the following questions: Has the applicant:**

1. Been convicted of a criminal offense other than a traffic violation?  Yes  No, If yes, please explain.

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2. Been a debtor in bankruptcy or insolvency proceedings in the last seven years?  Yes  No, If yes, please explain.

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3. Been a party to any pending lawsuits or outstanding judgements in the past two years?  Yes  No, If yes, please explain.

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4. Been delinquent on any taxes in the past three years?  Yes  No, If yes, please explain.

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### Statement of Understanding & Certification by Applicant

I have read the program eligibility criteria for the Ford Emergency Capital Access Program and I certify that I am authorized to sign this application as, or on behalf of, the Applicant. I agree to assist the Urban League of Louisiana in verifying any of the information contained in this application from any available source as requested.

By signing below, I certify that all information in this application, and all information furnished in support of this application, is given for the purpose of obtaining a small business micro-grant and that the information provided is true and complete to the best of my knowledge.

### Authorizations and Certifications

- I authorize the Urban League of Louisiana, its subcommittees, and/or partner organizations to view, review, and discuss information submitted as part of this grant application.
- I authorize the Urban League of Louisiana, its subcommittees, and/or partner organizations to obtain additional public information about my business is necessary for application review.
- I certify that I own the business for which this small business micro-grant application is submitted.
- I certify that all information provided as part of this application (to include attachments and verbal communications) is true and verifiable.
- I certify that I have read and understand the small business micro-grant program guidelines.
- If this application leads to a grant award, I understand that false or misleading information in my application or interview may result in having to pay back grant monies.

### Applicant Signature

By signing below, the applicant represents, warrants, and certifies that the information provided herein is true, correct, and complete.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### To Apply / Contact Us

To apply to the Ford Emergency Capital Access Program, please contact the Urban League of Louisiana at [fordecap@urbanleaguella.org](mailto:fordecap@urbanleaguella.org) with the subject line: Ford ECAP Application and Documents – [Insert Business Owner's First and Last Name]. For questions about the program or the application process, please email [fordecap@urbanleaguella.org](mailto:fordecap@urbanleaguella.org).