



## COVID-19 Accounting or Professional Service Assistance Application

*Goal of program: Provide accounting or professional service assistance to businesses in Wrangell impacted by COVID-19 that are applying for local, state and federal COVID-19 relief assistance.*

The City and Borough of Wrangell will reimburse a business or non-profit up to \$200 for seeking accounting or professional services to assist businesses to apply for and make necessary reports to local, state, or federal COVID-19 relief programs, such as the Paycheck Protection Program (PPP), the Emergency Injury Disaster Loan (EIDL), the Alaska CARES Grant or other relief programs. The reimbursement will be made to the applicant upon submittal to the City and Borough of Wrangell of a receipt for payment of services to an accounting or professional service firm identifying that work performed was for COVID-19 relief assistance application or reporting needs. This program is for services provided retroactive to March 23, 2020 through August 30, 2020. This program will be first come, first served, upon receipt of a completed application until the funds are depleted. Funding assistance will be paid by check which must be cashed within 90 days.

Signed applications may be submitted to City Hall in person, by mail addressed to Wrangell CARES Act Funding Assistance, P.O. Box 531, Wrangell, AK 99929, or by email to [wrangell@wrangell.com](mailto:wrangell@wrangell.com). All applications must be completed in full with an original signature to be eligible for consideration for funding. Review may take up to two weeks. Please email questions to [wrangell@wrangell.com](mailto:wrangell@wrangell.com) and include a phone number. Staff will respond within 48 hours.

### **ELIGIBILITY CRITERIA**

1. This program pertains to accounting and professional services provided for COVID-19 relief application and reporting services March 23, 2020 to August 30, 2020.
2. A receipt for payment made to the firm assisting with COVID-19 relief assistance must be presented to the City and Borough of Wrangell.
3. A current Alaska Business License for the applicant.
4. If applicant is an LLC or Corporation, the following documentation showing good standing shall be provided: Articles of Organization and a Certificate of Organization for an LLC; or for corporations and non-profits, Articles of Incorporation and Certificate of Incorporation.



## COVID-19 Accounting or Professional Service Assistance

Received by: \_\_\_\_\_

Time: \_\_\_\_\_

Date: \_\_\_\_\_

Application No.: \_\_\_\_\_

***The following information is required for consideration for application review. All information will be kept confidential to the extent permitted by law and will only be used for evaluation of the GRANT award, or a GRANT audit. All questions must be answered.***

1. NAME OF BUSINESS OR ORGANIZATION REQUESTING ASSISTANCE:

\_\_\_\_\_

2. PHONE NUMBER (including area code): \_\_\_\_\_

3. MAILING ADDRESS: \_\_\_\_\_

\_\_\_\_\_

4. PHYSICAL ADDRESS:

\_\_\_\_\_

\_\_\_\_\_

5. EMAIL ADDRESS (For application contact):

\_\_\_\_\_

6. NAME AND CONTACT INFORMATION OF ACCOUNTING OR PROFESSIONAL SERVICE FIRM PROVIDING APPLICATION ASSISTANCE FOR COVID-19 RELIEF PROGRAMS:

Firm Name \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_

DATE APPROVED: \_\_\_\_\_

REJECTED: \_\_\_\_\_

DENIED: \_\_\_\_\_

AMOUNT APPROVED: \_\_\_\_\_

## 8. ATTACHMENTS

Please check the boxes that you acknowledge the statement and are attaching the requested information.

Attach a copy of current Alaska Business License for the applicant.

Attach a copy of Articles of Organization and Certificate of Organization for LLC, showing good standing for the applicant;

OR

Attach a copy of Articles of Incorporation and Certificate of Incorporation for Corporations or Nonprofits, showing good standing for the applicant.

Attach a copy of receipt of payment for accounting or professional services for COVID-19 relief application assistance.

Attach a copy of a signed and completed IRS Form W-9.

## NOTICES:

1. Applying for the City and Borough of Wrangell Accounting or Professional Assistance Grant DOES NOT GUARANTEE award of funding.
2. The Applicant agrees that the City and Borough of Wrangell will be held harmless from any claims arising from the application. The applicant waives and releases any claim arising out of or relating to the application that it may have against the City and Borough of Wrangell.
3. It is the sole responsibility of the Applicant to determine or to seek independent advice to determine the tax implications to the Applicant and its owners. Please confirm your understanding of these disclaimers by checking "Yes".

Yes

No

## CERTIFICATION:

APPLICANT: By signing my name, I certify that all the information provided in this application is true and accurate. I agree to assist the City and Borough of Wrangell in verifying any information provided in this application and to provide additional information, if requested.

I have read and understand this application. I am authorized to complete and submit this application on behalf of the Business or Organization. I verify that the statements contained herein are true, accurate and complete. I acknowledge that false and inaccurate statements made on the application are grounds for immediate rejection of the application.

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**Printed Name**

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**Signature**

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**Date**

DATE APPROVED: _____
REJECTED: _____
DENIED: _____
AMOUNT APPROVED: _____

# Request for Taxpayer Identification Number and Certification

**Give Form to the  
requester. Do not  
send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

<b>Print or type.</b> <b>See Specific Instructions on page 3.</b>	<b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	<b>2</b> Business name/disregarded entity name, if different from above	
	<b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.	<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
	<input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate	Exempt payee code (if any) _____
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ <b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.	Exemption from FATCA reporting code (if any) _____
	<input type="checkbox"/> Other (see instructions) ▶ _____	<small>(Applies to accounts maintained outside the U.S.)</small>
	<b>5</b> Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
<b>6</b> City, state, and ZIP code		
<b>7</b> List account number(s) here (optional)		

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>											
				-			-				
<b>or</b>											
<b>Employer identification number</b>											
				-							

## Part 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.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
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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](http://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)

- 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.*