

# ALL KAN

## SMALL BUSINESS ASSISTANCE GRANT APPLICATION



### Kanawha County Commission

407 Virginia Street East  
Charleston, WV 25301

For more information call 304-357-0101

### I. APPLICANT INFORMATION

#### Applicant:

Name: Daniel L Reed II

Address: 117 Rocky Lane

City: Charleston State: WV Zip Code: 25313

Phone: 304-543-3198 Email: danreed4242@gmail.com

Individual       Business Entity       Non-profit

#### Business Information:

Name: Reeds Diner DBA Happy Days Cafe'

Address: 600 D Street, South Charleston West Virginia 25303

#### Type of Ownership:

Sole Proprietor       Corporation       LLC       Nonprofit

#### Type of Business:

Retail       Business Service       Restaurant       Manufacturing

Other: \_\_\_\_\_

Is your business registered with SAM.gov?       Yes       No

Provide a brief description of the business that is starting or expanding. Your attached business plan can more fully explain your products or services, so please be brief but informative.

We are a 50'60's themed restaraunt. We specialize in Burgers, Hotdogs, Hoagies, and Daily home style cooked specials. We are a full service sit down style restaraunt. We employ ten full time employees. I am a Veteran and myself and my wife own the business. My step daughter is our manager. We employ 3 other family members and are a family ran business.

1. How many employees does your small business employ? 10
2. In what industry is your small business? Food Service
3. Has your small business incurred costs for COVID-19 mitigation and prevention measures? If so, describe the costs, mitigation, and prevention measures:

We have spent over \$20,000.00 in Covid-19 related expenses. Cleaning supplies, sanatzizer, disposable utensels and one time use products. We constructed barriers to help prevent contact and to promote social distancing etc. Increased our curbside advertising and delivery service advertising to increase business lost through restricted indoor dining.

4. How will you use the funds received from the Small Business Assistance program? (e.g., Will you hire new workers, provide on-the-job training, obtain technical assistance, support payroll, benefits, rent, utilities, or other operating costs?)

Currently due to Covid related issues we are behind in rent for nearly \$9000.00, We are lucky and have a very understanding landlord and he would like to see us remain in business and a tenant in his building. We also have debt that we owe to a supplier that through an error in their billing process they failed to bill us for 18 months. They then, during the middle of the covid, contacted us with a large bill that we were unaware of. They never billed us and payment was supposed to be draft withdrawn from our checking account and this was never done. We didn't catch it until they called 18 months later. We currently are on a payment plan with them to settle the debt. The debt is in the neighborhood of \$12,000.00. We would use this grant to get this caught up as well as our rent as well as printing new menu's to further promote our delivery service and curbside, as well as, additional advertising with local radio and print.

5. Has your small business faced periods of closure as a result of the COVID-19 pandemic? If so, please describe.

Yes, during covid the Governor shut down inside dining for several months. during that time frame we had days of gross sales of \$300.00 and less on some days. Currently we operate on a budget of \$1100.00 to \$1200.00 per day to break even. Luckily business has increased and we are running days of \$1500.00 to \$1800.00 on average now. That sounds great but due to inflation and cost of goods that some times only allows us to show minimal profit or to just break even.. Cost of goods has been a roller coaster changing weekly.

6. Has your small business experienced loss of revenue or financial hardship as a result of the result of the COVID-19 pandemic? If so, please describe.

Yes, As explained above, during covid we saw decreased revenues of 60 to 75% on average and worse some days. On some instances we saw 80-90% decrease. We were only able to make payroll and keep the doors open due to circumstances which allowed me to withdrawal from my emplorer 401k retirement plan. Basically taking out my retirement from my pocket to keep the restaraunt afloat.

6. Do you intend to use your small business assistance funds for capital expenditures? If so, what capital expenditures do you intend to make and what is your time for completion of capital expenditures?

Mainly to use to catch up debts and advertising. If I have leftover funds I would like to have a neon sign that I had purchased before covid repaired and installed. As well as new signage for the building. Currently using banner signage. I would also like to have our floors re-done due to the age and condition.

7. Are you requesting funds to open a startup business? If yes, did you lose expected startup capital or face other difficulties, cost increases, or delays due to the COVID-19 pandemic? Please describe fully.

n/a

## II. FINANCING NEEDS

Total Amount of Investment: \_\_\_\_\_

Total Amount of ARP Funding Request: \$25,000.00



### IV. NUMBER AND TYPE OF JOBS CREATED

Year One: Retained 10

Type(s): Food Service Industry, Cooks, Servers, Dishwasher

Year Two (projected): Increase to 11

Type(s): Food Service Industry, Cooks, Servers, Dishwasher

**This application is being submitted with the information that is correct and complete, to the best understanding of the applicant.**

Daniel L Reed II Digitally signed by Daniel L Reed II  
Date: 2022.07.07 12:29:48 -04'00'

7/7/2022  
Date

Printed Name and Title: Daniel L Reed II

**ATTACHMENT: Your business plan MUST contain the following information:**

- Description of the business and its goods and/or services
- Demand for proposed for goods or services
- Target market and marketing approaches
- Amount of funding required to capitalize the business and operate with adequate cash flow
- How the ARP funds will be used including a description of the work done or equipment purchased
- Three year operating pro forma

**The ARP program requires the following information:**

- Personal financial statement
- Personal or business tax return
- Building lease if applicable

### HOW DO I SUBMIT MY APPLICATION?

**Email the completed application to:** [kimmallory@Kanawha.us](mailto:kimmallory@Kanawha.us)

**Mail the completed application to:**

Kanawha County Commission  
Attention: Kim Mallory  
PO Box 3627, Charleston, WV 25336

**Submitted applications will be made publicly available and will be posted on the County's website.**