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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: Nichole Dawn and David Matthew Holbert

Address: 177 Dewey Drive

City: Elkview State: WV Zip Code: 25071

Phone: 304-548-4505 Email: sn00p09@yahoo.com

Individual Business Entity Non-profit

Business Information:

Name: Take Me Home LLC

Address: 3 Main Street, Clendenin, WV 25045

Type of Ownership:

Sole Proprietor Corporation LLC Nonprofit

Type of Business:

Retail Business Service Restaurant Manufacturing

Other: Overnight Accommodations

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.

Take Me Home LLC operates four Airbnb-style overnight bedrooms in downtown Clendenin. The business operates on the second floor of the former Farmers & Citizens State Bank building on Main Street. Each rentable room includes a king or queen bed with private bathroom. The building includes space to build four additional rooms, which would bring the total available rooms to eight. This business plan focuses on adding four additional rooms to the current four, bringing the total available rooms available for overnight rent to eight.

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

The buildout of the rooms has been impact due to COVID-19. We experienced delays and costs for COVID-19 mitigation and prevention during construction of the four existing rooms. We purchased an industrial fan to create consistent airflow as we were remodeling each room. COVID tests were purchased for construction employees to maintain a safe worksite. All construction employees were vaccinated at the first opportunity.

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?)

The funds received will be used exclusively for construction remodeling and furnishing costs for the four additional rooms.

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

Since we opened in early 2021, we have not faced any periods of closure.

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.

The pandemic created a significant decrease in income of the business. Many people stopped traveling during the latter phases of the pandemic, which resulted in fewer rooms being rented. The resulting loss of income created delays and cost overruns in construction, as these funds were used to pay for construction materials and labor. The supply chain caused by the pandemic increased material costs, causing the construction costs to exceed those estimated in our business plan. COVID-19 has impacted our sales. We have received multiple last-minute cancellations due to COVID infections, especially during peak times. As a good business practice, we often refund guests due to this misfortune.

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?

We intend to use the funds for leasehold improvements.

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.

The requested funds are not for startup, but are to be used for expanding an existing business. We do anticipate supply-chain and labor issues due in part to the COVID-19 pandemic. We

II. FINANCING NEEDS

Total Amount of Investment: \$50,000

Total Amount of ARP Funding Request: \$25,000

IV. NUMBER AND TYPE OF JOBS CREATED

Year One: 1

Type(s): Room cleaning between visits

Year Two (projected): Same

Type(s): _____

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

David Matthew Holbert Digitally signed by David Matthew Holbert
Date: 2022.08.01 11:30:13 -04'00'

Applicant Signature

1 Aug 2022

Date

Printed Name and Title: David Matthew Holbert, Owner

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

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.