

# 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: Isayah Anaya

Address: 4111 US Route 60

City: Humbane State: WV Zip Code: 25526

Phone: 304-859-0069 Email: allstarcarcare1@yahoo.com

- Individual
- Business Entity
- Non-profit

**Business Information:**

Name: TANDI INC.

Address: 4100 Ford Street S. Char, WV 25309

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.

TANDI provides Quality, Affordable Automotive Services. We are a proud WV State Inspection Station. Services include but not limited to Oil Change, tire rotation, fluid exchanges, brake Services, Steering and Suspension, Engine diagnostics, tuneup and more. The increase in individuals working from home and the fear of employees being in and out of their vehicles has resulted in a huge impact on our financial state. We have been striving for the means to provide a safer user friendly and comfortable atmosphere for our customers. Focusing on individualized service, less crowding and electronically accessible communicating, we believe will assist in moving forward following pandemic struggles.

1. How many employees does your small business employ? 4 currently
2. In what industry is your small business? Automotive repair
3. Has your small business incurred costs for COVID-19 mitigation and prevention measures? If so, describe the costs, mitigation, and prevention measures:

During Covid-19 considered time frame, we have spent an abundance on safety measures. purchases of steering wheel covers, seat covers, mats, masks, sanitizer, Clorox, and disposable tech invoices. Most of our expense is a loss of revenue due to unsafe conditions of people driving and/or working remotely.

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?)

Primarily we will invest in a few changes to allow our services to be used safely and comfortably. Increasing individualized service and less face to face contact. We intend to follow those purchases with new hires (2) and also provide remaining assistance for operating costs to stay profitable. Advertising drop off service and no contact pay/communication/pickup.

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

Thankfully, we were not forced to close our doors during pandemic. However as the increase and sudden stop to people traveling/working in community offices, we have faced a huge decline in revenue. A great deal are working remotely which means no vehicle maintenance.

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.

Significantly at first. There was a great time period where citizens were advised not to drive unless emergency, this resulted in a huge drop in services we provide. The continued encouragement to work remotely delays our progress greatly. Making certain customers can remain safe while visiting our business is extensive given the nature of services.

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 purchase the following for increased business and comfortable atmosphere for customers to return.

- Handheld devices for each technician to eliminate sharing
- Tablet for customer self-serve check in/out (wireless tap)
- Awning over front w/bench for outdoor seating availability
- Sign renovation for drop off/no contact services
- replenish safety/cleaning supplies for preventative measures
- repairs to waiting room to accommodate distant seating and individual handouts to eliminate reusables.

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.

NO.

## II. FINANCING NEEDS

Total Amount of Investment: 25,600.

Total Amount of ARP Funding Request: 25,000.

### III. SOURCES AND USES OF FUNDING

#### Sources of Funding

Source	Amounts	Terms	Is Funding Committed Yes/Pending

#### Use of Funds

Item and Description	Budget Amount	ARP Funds Needed	
		Yes	No
- Handheld devices (5) no contact		✓	
- Awning for outdoor Seating		✓	
- Lobby repairs for distant Seating		✓	
- Signage for drop off Services		✓	
- Tablet for program <sup>eliminate</sup> paper.		✓	
- extended ppp Supplies		✓	
- Tire Machine for expanded no contact Services		✓	
- Two Full Time techs		✓	

#### IV. NUMBER AND TYPE OF JOBS CREATED

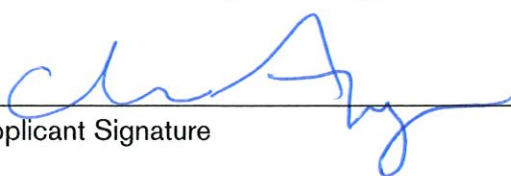
Year One: 2

Type(s): Oil Change tech, Tire Service tech

Year Two (projected): +2

Type(s): experienced tech, Lube tech

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

  
Applicant Signature

7.12.2022  
Date

Printed Name and Title: Isaiah Anaya 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](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.**