



BUSINESS OWNER AGREEMENT
City of Lincoln Small Business Stabilization Grant Program

By my signature below, I have read and understand the Small Business Stabilization Grant Program. I make the following representations and acknowledge agreement to the following terms and conditions:

- Upon approval of this application this application becomes a binding contract between the entity named below and the City of Lincoln.
- I am the duly authorized representative of the entity name below and can bind the entity to the terms of this Agreement.
- If funds are provided by the City, the funds will be used for the purposes set forth in the program.
- In no event shall the City's financial responsibility exceed the approved amount.
- I bear full responsibility for any and all tax consequences of receiving grant funds including, but not limited to, issuance of a 1099 by the City.
- There is no agency, employment, joint venture or other such relationship created by virtue of award of the grant. The City does not endorse the specific business.
- Applicant shall defend and indemnify the City and its employees from and against any claim, injury, liability, loss, cost and/or expense or damage including all costs and reasonable attorney's fees, arising from or alleged to arise from the activity or event.
- I affirm that this business does not engage in any illegal activities, is in compliance with the Internal Revenue Service, and is not pursuing damages against city of Lincoln related to the Covid-19 pandemic.
- The representations made by applicant in this Application are material terms of the Agreement, as is compliance with Small Business Stabilization Grant Program. The City may cancel this Agreement at any time upon discovery that any of the information set forth above is inaccurate, that these terms have been violated, or any provision of the Small Business Stabilization Grant Program has been violated.

Business Name _____

Business Owner Name _____

Signature _____

Date _____