

Applicants will be required to self-certify adherence to the following:

Exhibit A

Applicant Certifications

YoCo CHIRP (**COVID-19 Hospitality Industry Recovery Program**) Fund Business Owner Certifications

NOTE: COMPLETE ALL FIELDS ON THE FORM PRIOR TO UPLOADING, add your initials to each line in the space provided and sign at the bottom.

The York County Economic Development Corporation (YCEDC), a subsidiary legal entity of the York County Economic Alliance (YCEA) serves as the Certified Economic Development Organization (CEDO) for York County. As such, the County of York has contracted with the York County Economic Alliance and its affiliated entity York County Economic Development Corporation as the authorized CEDO to administer this program. The YCEA, as the program administrators for the **YoCo COVID-19 Hospitality Industry Recovery Program (CHIRP)**, may rely on Applicant certifications for use of funds, business eligibility, owner information and financial information for both the business and the business owner or authorized representative, for all information that was submitted as any part of its grant application or final grant agreement documentation. Applicant must make this certification in good faith, taking into account their current business activity and their ability to access other sources of liquidity sufficient to support their ongoing operations in a manner that is not significantly detrimental to the business.

If the Applicant uses grant funds for unauthorized YOCO CHIRP (**COVID-19 Hospitality Industry Recovery Program**) purposes, the Commonwealth of Pennsylvania and/or the County of York and/or the YCEA will direct the Applicant, and the Applicant will be obligated, to repay those amounts. If Applicant knowingly uses the funds for unauthorized purposes, Applicant will be subject to additional liability, which may include, but shall not be limited to civil and/or criminal liability for fraud. If one of the Applicant's shareholders, members, partners, employees, representatives, or agents uses grant funds for unauthorized purposes, such shareholder, member, partner, employee, representative, and/or agent will be jointly and severally liable with the Applicant to the Commonwealth for such unauthorized use.

An authorized representative of the Applicant must certify such compliance under penalty of perjury and fines pursuant to 18 Pa. C.S. § 4904 to all the below:

1. _____ The Applicant's business selected for funding under YOCO CHIRP (**COVID-19 Hospitality Industry Recovery Program**) was in operation on February 15, 2020 and, if required, paid income taxes to the state and federal government, as reported on individual or business tax returns. The eligible applicant remains in operation and does not intend to permanently cease operations within one year of the date of application.

2. _____ Applicant's business operations are conducted primarily in York County, Pennsylvania defined as no less than 51% of annual business revenues (pre-COVID) were generated by sales and services conducted in York County, Pennsylvania. The Applicant confirms that such revenues are reflected on its most recently filed Pennsylvania tax return.

3. _____ COVID-19 has had an adverse economic impact on the Applicant's business and makes this grant necessary to support the ongoing operations of the Applicant.

4. _____ The grant will be used only to cover COVID-19 related economic impacts. Applicant acknowledges that if the funds are knowingly used for unauthorized purposes, the state and federal government may hold Applicant's business owner(s), its employees, agents, and/or representatives legally liable, which may include, but shall not be limited to civil and/or criminal liability for fraud.

5. _____ During the period beginning on January 1, 2021 and ending on June 30, 2021, the Applicant's business selected for funding in this Program has not and will not receive another grant under the CHIRP Program (**COVID-19 Hospitality Industry Recovery Program**).

6. _____ The Applicant's business has been and remains in compliance with all relevant laws, orders, and regulations during the period of the COVID-19 disaster emergency under the Pennsylvania Governor's proclamation dated March 6, 2020, and any and all subsequent renewals. The foregoing includes, but is not limited to, orders by the Governor, Secretary of Health, or other

commonwealth officials empowered to act during the emergency. Any noncompliant business will be ineligible for funding under this program and may be required to return all, or a portion, of the funds awarded.

8. _____ By executing this Certification, I hereby authorize the YCEA and its authorized representative under the YoCo CHIRP (**COVID-19 Hospitality Industry Recovery Program**) to request access to, and review of, the Applicant's Pennsylvania state tax returns and tax return information. By signing below, I hereby warrant that I am an authorized representative of the Applicant and have full authority to waive confidentiality under Pennsylvania law and authorize release of this information.

9. _____ As Applicant or authorized representative, I further certify that the information provided in the grant application submitted for this program and the information provided in all supporting documents and forms is true and accurate in all material respects. I understand that that knowingly making a false statement to obtain a grant under the program is punishable under penalty of perjury and fines pursuant to 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).

10. _____ As Applicant, I acknowledge that the YCEA will confirm the eligible grant amount using documents I have submitted and will provide additional information and documentation as requested in support of this application. I affirm that these tax documents are identical to those submitted to the Internal Revenue Service and any other applicable taxing authority. I also understand, acknowledge, and agree that the YCEA and its authorized representatives can share the tax information with state and federal authorized representatives for the purpose of compliance with federal and state grant requirements and reviews.

11. _____ **AVAILABLE FUNDS ARE LIMITED AND SIGNIFICANT INTEREST IS ANTICIPATED.** As Applicant, I recognize that there is no assurance that as the applicant, I will be awarded any grant of any size, regardless of how well I may meet the criteria used for awarding these grants and regardless of what the Applicant may have been told or read with respect to this grant program. As a condition and in exchange for the consideration of receiving and reviewing this application, as the Applicant, I hereby release, indemnify, and will hold harmless the County of York, Pennsylvania, York County Economic Alliance, York County Economic Development Corporation, their respective successors, assigns, partners, designees, and affiliates in facilitating, and administering this grant program and their respective Board of Commissioners, Boards of Directors, officers, employees, representatives, volunteers and committees of and from any and all claims and/or causes of action of any kind or type arising from or out of (a) their receipt and review of this application and any information or documentation of or concerning the Applicant, (b) any decisions, recommendations, or assistance provided by them with respect to this application, (c) the administration of this program and/or the award or denial of funds and/or the sufficiency thereof, and (d) any other matter or thing related to this program whatsoever.

Signature

Date

Print Name of Signer

| SIGN, PRINT AND DATE

