

Dominion Energy is partnering with the Virginia Chamber of Commerce Foundation to temporarily expand its EnergyShare program to assist those small businesses impacted by the COVID-19 pandemic. Dominion Energy Virginia is pledging \$500,000 to help provide energy bill relief for small businesses, nonprofits, and houses of worship in its Virginia service territory. The program funding will be covered by shareholders and will not impact customer rates. Qualified businesses may be eligible for one-time assistance with their Dominion Energy electric bill up to \$1,000.

ELIGIBILITY CRITERIA

- Must be a for-profit business owned and independently operated, nonprofit with 501(c)(3) status, or house of worship
- Have an annual electric bill amount of \$15,000 or less based on 2020
- Must be licensed to do business in Dominion Energy's service territory with an active, business account separate from personal account(s)
- Certify business has loss of revenue and is need of financial assistance due to COVID-19
- Employ 50 or fewer people as of January 1, 2021

EXCLUSIONS

- Franchises or other business arrangements in which utility accounts are maintained by a parent company
- Government-owned business entities (except for businesses owned or controlled by a Native American Tribe)
- A business principally engaged in rental property by residential, commercial, or industrial tenants

HOW TO SUBMIT AN APPLICATION

vachamber.com/foundation/small-business-relief-program

The applicant must submit their completed and e-signed application via e-mail to Foundation@vachamber.com for review.

Upon submission of the application, the applicant will receive an e-mail confirming receipt of the materials.

The application period will remain open until the funds allocated to the program are exhausted. Applications will be reviewed on a first-come, first-served basis.

Questions/Comments:
Foundation@vachamber.com



Thank you to our partners:



Virginia Asian Chamber of Commerce
"Your Gateway to Economic Opportunity."



Small Business Relief Application

Please carefully review the eligibility criteria and exclusions before proceeding with the application. For customer eligibility requirements visit vachamber.com/foundation/small-business-relief-program.

Date _____ **Applicant Name** _____ **Business Name** _____

Business Address _____ **City** _____ **State** _____ **Zip** _____

Business Phone _____ **Best Contact Name** _____ **Phone** _____ **Email** _____

Dominion Energy Account Number _____ **Is your Dominion Energy bill current? (Check One)**
Yes No

Business Type (Check One)
Sole Proprietor Partnership LLC Franchise Self-employed 501(c)(3)
House of Worship Other: _____

Did you employ 50 employees or less as of January 1, 2021? (Check One)
Yes No

Check All That Apply
Minority-owned Veteran-owned Women-owned

Has your business been impacted by COVID-19? (Check One) **Business Operations (Check One)**
Yes No Open Closed

Total Business Revenue (Monthly) _____ **Total Business Expenses (Monthly)** _____

Has the business applied for other assistance? (Check One)
Yes No If yes, please list sources: _____

If experiencing a business hardship, please explain.

Statement of Application: I certify that the above statements and attachments are true and correct to the best of my knowledge. I understand that providing false information may result in disqualification of benefits. I understand that in requesting assistance from Dominion Energy's EnergyShare Small Business Relief program, the information given above may be shared or given to other organizations to determine need and eligibility. By signing this form, I am allowing this agency to share or exchange information about me, the business for which I have applied, and about my Dominion Energy Virginia business account and its information ("account information") with other agencies or organizations. Further, by signing this form I am authorizing the sharing or exchange of confidential information, including account information or personal information, to the EnergyShare Small Business Relief program, and, as needed for the reasons stated above, I allow access to all of my account information up to and including that pertaining to payment history, usage, and billing.

Applicant Signature _____ **Date** _____

Please e-mail completed application to foundation@vachamber.com. Application file name should include business name and submission date. *Example: 2020-0810-JohnsAutoShop*