

NUMBER OF YEARS OPERATING IN YONKERS

Date: 2020-07-23 15:26:59

ID Number: 115

Grant/Loan Application

I AM APPLYING FOR	
Grant	
AMOUNT REQUESTED FOR GRANT	
\$10,000.00	
MY BUSINESS IS LOCATED IN A "HIGHLY DI	STRESSED" AREA:
Yes	
WERE YOU A FINANCIALLY VIABLE ENTITY F	PRIOR TO MARCH 7, 2020?
Yes	
NUMBER OF EMPLOYEES	BUSINESS TYPE
5	Retail
HAVE YOU BEEN NEGATIVELY AFFECTED BY	THE COVID-19 STATE DISASTER EMERGENCY?
Yes	·
PLEASE DESCRIBE HOW YOU HAVE BEEN NI	EGATIVELY AFFECTED BY THE COVID-19 STATE DISASTER EMERGENCY:
lost revenue due to the closing of bars, re-	staurants and other food service companies
ACQUIRING PERSONAL PROTECTIVE EQUIPM OF COVID-19 AND WILL REQUIRE SUPPORT	TO SURVIVE. GRANT PROCEEDS MUST BE USED FOR THE PURPOSE OF MENT OR INSTALLING EQUIPMENT NECESSARY TO PREVENT THE SPREAD ING INVOICES. Omers and employees. The purchase of ultra violet lights to insure
ARE THE FUNDS BEING REQUESTED UNDER	THIS PROGRAM ENOUGH FOR YOUR NEEDS?
Yes	
Business Information	
BUSINESS NAME	FEDERAL EIN NUMBER
All Star Beverage, Inc	
BORROWING ENTITY(IF DIFFERENT FROM B	USINESS NAME)
All Star Bverage	
BUSINESS ADDRESS	
821 NEPPERHAN AVE YONKERS, New York 10703 United States	
WEBSITE ADDRESS	DATE BUSINESS WAS ESTABLISHED:
	05/01/1972



Yonkers IDA Industrial Development Agency

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48 years	
TYPE OF BUSINESS	
S Corporation	
DOES THE BUSINESS HAVE ANY JUDGEMENTS OR TAX LIEN	S WITHIN THE PAST 3 YEARS?
No	
IF YES, PLEASE DESCRIBE	
PLEASE DESCRIBE THE BUSINESS YOU CONDUCT IN YONKE	RS
Wholesale /Retail Beverage Company	
PRIOR YEAR REVENUES (PLEASE USE YOUR MOST RECENT TAX FILING)	PRIOR YEAR REVENUE
2018	
HAVE YOU RECEIVED FUNDING FROM THE UNITED STATES PAYCHECK PROTECTION PROGRAM ["PPP"] OR EMERGENC GOVERNMENT PROGRAM SINCE THE BEGINNING OF THE ST	Y INJURY DISASTER LOAN ["EIDL"] OR ANY OTHER
Yes	
IF YES, DESCRIBE THE AMOUNT OF ASSISTANCE YOU HAVE EXPLAIN WHY THOSE FUNDS WERE INSUFFICIENT TO MEET	RECEIVED AND THE DATE IT WAS RECEIVED. PLEASE ALSO CONTINUING OPERATING NEEDS
8,000.00 on 6/05/2020 and was used for rent, payroll, util	ities and other operating costs.
LIST ANY AND ALL OTHER FUNDING YOU ARE CURRENTLY S TO COVID-19, INCLUDING BUT NOT LIMITED TO BANK LOAN FUNDING, ETC.	SEEKING OR HAVE RECENTLY BEEN AWARDED IN RESPONSE IS, SBA LOANS, PUBLIC OR PRIVATE LOANS, GRANT
none	
PLEASE DESCRIBE ANY OTHER SOURCES OF FUNDING AVAI	LABLE TO YOUR BUSINESS:
SBA	
Applicant Contact Information	
PRIMARY NAME OF CONTACT	
TITLE	PHONE NUMBER
President	
EMAIL ADDRESS	
and the state of t	

PRINCIPAL/OWNER INFORMATION

PRINCIPAL/OWNER FULL NAME

PERCENTAGE OF BUSINESS OWNED



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Yonkers IDA Industrial Development Agency

CITY STATE HOME PHONE CELL PHONE EMAIL DATE OF BIRTH SSN/EIN TOTAL HOUSEHOLD INCOME HOUSEHOLD SIZE IS THERE AN ADDITIONAL PRINCIPAL/OWNER? Yes IF YES, PLEASE LIST Additional Information IS THE PRINCIPAL PLACE OF BUSINESS WITHIN YONKERS? Yes HAS THE COVID-19 CRISIS RESULTED IN A DECLINE OF REVENUE FOR YOUR BUSINESS? Yes PLEASE DESCRIBE IS YOUR PLAN TO REMAIN IN OPERATION OR TO RE-OPEN THE BUSINESS AFTER ANY MANDATED CLOSURES AND/OR SOCIAL DISTANCING IS RELAXED? Yes IS YOUR BUSINESS OPEN NOW? Yes HAVE YOU FILED THE LAST TWO YEARS TAX RETURNS FOR YOUR BUSINESS? Yes DO YOU OWE SALES OR PAYROLL TAX TO NYS? No	Vincent Ruta		50	
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The second of th	IF YES, PLEASE DESCRIBE	Allows of the Middle Conference Conference in the study of the conference of the con		



Rent

Yonkers IDA Industrial Development Agency

DO YOU OWN OR RENT THE PROPERTY IN WHICH YOU OPERATE YOUR BUSINESS?

responsible for costs and attorney's fees if judgment is awarded to YIDA.

subject to challenge in any forum.

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WHERE IS YOUR BUSIN	S LOCATED?	
Storefront		
HAVE YOU APPLIED, AN	BEEN APPROVED, FOR ANY OTHER GRANTS OR LOANS RELATED TO COVID-19 RELIEF?	
Yes		
ed regionalization philips (shi npl., and shi the physician in hid data shiftilline (think-phylip), or or alone (see		
REPRESENTATION	AND WARRANTIES	
LOAN APPLICANTS ONL		
WUMBER OF FTE JOBS 1	BE RETAINED	
ne tama iliku ili asalasana iliku laja ka laja iliku ili ayan ya jama ili kukula pakada ka	1.0	
I hereby represent, collectively from Indu	arrant, and certify to the YIDA that I shall not receive more than \$25,000 in loans rial Development Agencies during the state disaster emergency.	
GRANT APPLICAN	ONLY	
• I hereby represent, purpose of acquiring	arrant and certify to the YIDA that I shall use the funds received by the YIDA for the ersonal protective equipment or installing fixtures necessary to prevent the spread of no period in which the state disaster emergency is in effect.	
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• I acknowledge that YIDA has the sole and absolute discretion as well as the final decision-making authority with respect the granting or denial of all applications submitted to this program. Such decisions are final and not

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Please upload the following documents below

2019 BUSINESS TAX RETURNS (OR MOST RECENT YEAR FILED) UPLOAD HERE FOR EACH

• 2018-Client-copy-All-Star-Beverage-LLC-1.pdf

2019 PERSONAL TAX RETURNS (OR MOST RECENT YEAR FILED)

• 2019-Client-Copy-Vincent-Ruta-1.pdf

BUSINESS FINANCIAL STATEMENTS AS OF 12/31/19

• 12-31-19-financials.pdf

INCOME AND EXPENSE STATEMENTS FOR PAST 12 MONTHS

• june-30-2020-PL.pdf

EIN VERIFICATION LETTER

W9.Sterling,05.08,2020.pdf

COPY OF DRIVER'S LICENSES OR STATE ISSUED IDENTIFICATIONS

• V.Ruta_.Drivers.License.pdf

Application will be deemed complete ONLY after all documentation has been provided. All approved applications will be posted on our website. You will be provided the opportunity to choose which information is redacted by a YIDA representative before any information is posted.