Small Business Improvement Fund (SBIF) Grant Application 2025:

The Small Business Improvement Fund (SBIF) provides noncompetitive grant funding for permanent building improvements and repairs in designated tax increment financing (TIF) districts across the city. Grants are available to cover 30% to 90% of eligible improvement costs. For commercial properties occupied by a single owner or tenant, the maximum grant is $150,000. For commercial properties occupied by multiple owners or tenants, there is a limit of $75,000 per applicant and $250,000 per property. The maximum assistance for industrial properties is $250,000.* These grants do not have to be repaid.

The SBIF grant is a **REIMBURSEMENT** for a percentage of eligible project costs. Applicants pay for project costs upfront. The City reimburses for agreed-upon project expenditures. Reimbursements may be structured in multiple phases or as one payment at the end of construction.

To determine whether your property or business is located in a TIF district, please use our SBIF locator tool. For more information on when applications for specific TIF districts open, consult the SBIF rollout calendar.

The SBIF grant is administered on behalf of the Department of Planning and Development by SomerCor. For more information about program rules and applicant requirements visit somercor.com/sbif.

**SBIF grants up to $250,000 are available along LaSalle Street in the Loop. Landlords and tenants of commercial properties are eligible to apply, with $50,000 bonuses available for certain applicants.*

I. APPLICANT INFORMATION

This information refers to the primary applicant to the SBIF program and the project location where SBIF funds will be utilized. The applicant is generally a business or property owner but may also be an authorized officer of an organization or company. SBIF applications and SBIF grants are non-transferrable between applicants and/or properties. Potential applicants who wish to apply for SBIF funds for more than one property must submit separate applications for each property.

1. Applicant Name (required)

First Name (required)

Last Name (required)

2. Applicant Phone Number (required)

3. Applicant Email (required)

4. Preferred Mailing Address (required)

Country (required)

Address (required)

Address Line 2 (optional)

City (required)

State, Province, or Region (required)

Zip or Postal Code (required)

Note: This is the address where we will send correspondence and important program notices.

5a. Project Address Street Number (required)

5b. Project Address Street Direction (required)

Note: N for North, S for South, W for West, E for East

5c. Project Address Street Name (required)

5d. Project Address Street Type (required)

Note: Ave for Avenue, St for Street, Pl for Place, Blvd for Boulevard, Dr for Drive

5e. Project City (required)

5f. Project State (required)

5g. Project Zip Code (required)

6. What TIF is this project in? (required)

Note: You can find out what TIF your project is in but using the SBIF locator tool.

7. What Ward is this project in? (required)

Note: If you don't know what Ward your project is in, you can use the locator tool to find your Ward.

II. APPLICANT TYPE

Questions in this section help define what kind of applicant you are within the context of the SBIF program. If you are starting a new business complete the application as you would if the business was established.

1. What type of applicant are you? (SELECT ONLY ONE) (required)

- Commercial Owner
- Commercial Tenant Owner (i.e., tenant, lessee)
- Commercial Multi-Tenant
- Commercial Landlord
- Industrial Owner
- Industrial Tenant
- Industrial Multi-Tenant
- Industrial Landlord
- Industrial Multi-Tenant
- Non-Profit Owner
- Non-Profit Tenant

Business Owner Information

Answer the following questions if you operate an existing business or not-for-profit organization at the project property. If you are a landlord and do not operate a business at this property, this section does NOT apply to you. Please skip this section and indicate 'Not Applicable' or select the 'Not Applicable' option.

2. Provide the legal business name for your business or not-for-profit. (required)

3. If applicable, provide the DBA ("doing business as," "assumed name," or "trade name") associated with your business or not-for-profit. (required)

Note: Enter 'Not Applicable' if not applicable.

4. Please describe your business (Example: Packaging company, hair salon, day care center, retail store, etc.). (required)

5. Is your business or not-for-profit a start-up? (required)

- ☐ Yes
- ☐ No
- ☐ Not Applicable

Note: Your business or not-for-profit may be considered a start-up if you have been in business for less than three years.

6. What year was this business established? (required)

Note: If your business is a start-up business or you're establishing your business put 0.

7. Is your business or not-for-profit a national chain or franchise? (required)

- ☐ Yes
- ☐ No
- ☐ Not Applicable

Note: If yes, your business is not eligible for SBIF funds per the SBIF ordinance.

8a. Does your business or not-for-profit have other locations? (required)

- ☐ Yes
- ☐ No
- ☐ Not Applicable

8b. If you have other locations, list location address(es) and briefly describe the activities performed (required)

Note: Enter 'Not Applicable' if not applicable.

Property Owner or Landlord Information

Answer the following questions if you own the project property either as an owner-operator or a landlord renting to business tenants. If you are a tenant applicant, this section does NOT apply to you. Please skip this section and indicate 'Not Applicable' or select the 'Not Applicable' option.

9. Provide the names of individuals or entities such as trusts or LLCs that have legal title to the property. (required)

10a. Do you currently have tenants at the property? (required)

- ☐ Yes
- ☐ No
- ☐ Not Applicable

Note: Be aware that to receive reimbursement for SBIF projects in vacant buildings, the applicant must provide proof that the portion of the property subject to the SBIF grant on the ground floor must be 100% leased up by a qualified SBIF tenant(s) who are actively operating.

10b. If yes, please list tenants and description of their businesses:(required)

Note: If you own the property and lease to your business, you do not have the option to apply as a tenant. The application will be treated as a property owner.

III. PROJECT DESCRIPTION AND BUDGET

Questions in this section refer to how SBIF funds will be utilized. Information in this section does not need to be final. For itemized project budget, for example, contractor estimates are not required – instead, please provide a well-informed "best guess" that can be used to evaluate the overall scope of the project.

1. Please provide a description of the project plan. (Example: Replace storefront of existing coffee shop and rehab bathrooms to make them ADA compliant.) (required)

Notes:

- All work is subject to the City of Chicago's Neighborhood Design Guidelines and the City of Chicago's Ground Floor Commercial Design Guidelines.
- The City of Chicago will issue applicants a Conditional Commitment Letter when their projects are approved. The City will not reimburse project work or construction expenses paid prior to issuance of the Conditional Commitment Letter.

2. Fill out the project budget table: (required)

Cost Category	Amount (US Dollar)	Additional Notes
Example: Tuckpointing	*$15,000*	
Total:		

3. What is the total estimated project cost? (required)

$

Note: Copy this amount from the table above.

4. Do you understand that the prices above are estimates and could increase, thus the final project cost may be different? (required)

- ☐ Yes
- ☐ No

IV. PROJECT FINANCING

The SBIF grant is provided as a reimbursement for a percentage of eligible project costs. Applicants pay for project costs up front. The City reimburses for agreed upon project expenditures. Reimbursements may be structured in multiple phases or as one payment at the end of construction.

SomerCor can assist applicants in exploring various lending options upon request. The following information will help SomerCor understand what assistance may be needed.

1. Do you currently have the funds or financing available for this project? (required)

- ☐ Yes
- ☐ No

2. Will you be seeking a loan or financing to fund construction? (required)

- ☐ Yes
- ☐ No

3. Do you need help securing a loan or additional financing to fund construction?(required)

- ☐ Yes
- ☐ No

4. How much money has been secured for the project so far? (required)

$

5a. Are you currently under consideration for or have you previously received funding from a City of Chicago program for this or another project site? (required)

- ☐ Yes
- ☐ No

Note: Examples of funding programs include SBIF, the Neighborhood Opportunity Fund (NOF), the Community Development Grant (CDG), and TIF

5b. If yes, please select from the following list

- ☐ SBIF (previous recipient)
- ☐ Neighborhood Opportunity Fund (NOF)
- ☐ Community Development Grant (CDG)
- ☐ TIF
- ☐ Other

Note: Applicants may apply for these programs at the same time but may not receive funding from more than one program for the same work concurrently.

5c. Please list the addresses of the sites where you are under consideration for or have previously received funding, the programs used, and the amount as well as the date provided, if applicable.

Note: Applicants must report if they have applied for and/or received other Direct City Financial Assistance for the property, including funding from the Neighborhood Opportunity Fund or Chicago Recovery Plan. Applicants may apply for these programs at the same time but may not receive funding from more than one program for the same work concurrently.

V. ADDITIONAL INFORMATION

Disclaimer: *Responses in this section are strictly voluntary and not required. Answers will have no effect on the consideration of your application.*

1. Please select the race(s) that you identify as:

- ☐ American Indian or Alaska Native
- ☐ Asian
- ☐ Black or African American
- ☐ Hispanic or Latino
- ☐ Middle Easter or North African
- ☐ White
- ☐ I prefer not to answer

2. Please select the gender(s) that you identify with:

- ☐ Male
- ☐ Female
- ☐ Non-Binary
- ☐ I prefer not to answer

3. Do you identify as part of the LGBTQIA community?

- ☐ Yes, I identify as part of the LGBTQIA community
- ☐ No, I do not identify as part of the LGBTQIA community
- ☐ I prefer not to answer

4a. How did you hear about this program?

- ☐ Social Media (Instagram Facebook, Twitter, etc.)
- ☐ Email or Newsletter
- ☐ Search Engine
- ☐ Word of Mouth
- ☐ In-Person Event
- ☐ City of Chicago Website
- ☐ Local Business Support Organization (similar to a chamber of commerce)
- ☐ Elected Official (can be an Alderman's newsletter)
- ☐ Other

4b. If other, please specify:

5. Is this a family-owned business?

- ☐ Yes
- ☐ No
- ☐ Not applicable

VI. APPLICANT CERTIFICATION

Applicant certifies that the information provided on this application is true and correct and that they have read and understand the SBIF Program Rules. The SBIF Program Rules are available for download at www.somercor.com/sbif/ and can be provided directly by any of SomerCor's SBIF staff listed below.

1a. Did anyone help you fill out this application? (required)

- ☐ No, I filled out this application myself
- ☐ Friend of Family Member
- ☐ Consultant
- ☐ Community Partner/Organization
- ☐ Other
- ☐ I prefer not to answer

1b. If yes, provide an individual or organization name and their contact information below:

2. I understand that the Small Business Improvement Fund (SBIF) grant is a reimbursement program. I acknowledge that I am responsible for paying or financing all eligible project costs upfront, and that reimbursement may occur in multiple phases or as a single payment upon project completion.

I understand that as an SBIF grant recipient, I am required to maintain an active licensed business within the City of Chicago and must not relocate or sell the property or business (as applicable) for three years after grant disbursement.

By typing my name and dating this application, I certify that the information provided is true and correct, and that I have read and understand the SBIF Program Rules as established by the City of Chicago(required).

Applicant Signature (required) Date (required)

Note: The SBIF Program Rules are available for download at www.somercor.com/sbif/ and can be provided directly by SomerCor.

Applicants are encouraged to learn about the SBIF program by attending or viewing a recorded informational webinar at https://chicago.gov/sbif. To confirm application receipt, please contact SomerCor at sbif@somercor.com after submission.

All applications must be received by SomerCor by **5:00 p.m.** Central Time on the deadline date.

Mailing and SomerCor Office Address:
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Se habla Español!