

# Homer Glen Commercial Building Improvement Grant Program



## Application Submittal Checklist

Refer to the following checklist to ensure all required documentation is submitted with your application.

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- Meet with the Economic Development Director to review proposed project.
- Completely fill out the following application form and include relevant signatures.
- Complete the Disclosure of Beneficiaries with notarized signature.
- Attach proof of ownership (copy of Deed) or proof of a signed lease.
- IMPORTANT!** Attach the 2 required detailed contractor estimates with costs itemized for the **SAME SCOPE OF WORK AND MATERIALS** for each individual proposed improvement. The owner/business tenant may select the contractor of their choice, but the Village will determine the award amount based on the least expensive quote.
- Attach a completed W-9 form for Taxpayer Identification Number: [W9.pdf](#)
- Email digital photos to the Economic Development Department showing current conditions where proposed improvements will be made.

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## Application Form

Please completely fill out this application, including required documentation and signatures. Incomplete or missing information will delay the review process.

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Property owner or business tenant making this application verifies gross annual revenues do not exceed \$2 million.

**Circle One (required):**                      **True**                      **False**

*If circling "false," your property/business has gross revenues exceeding \$2 million and is not eligible for this grant assistance.*

### Applicant Information

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Name

Street Address

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City

State

Zip Code

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Mobile Phone Number

E-mail Address

Applicant is:     Property Owner                       Business Tenant

### Property Information

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Business Name

Business Street Address

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City

State

Zip Code

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Business Phone Number

Business E-mail Address

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Property Owner Name

Owner Phone Number

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Owner E-Mail Address

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## Proposed Improvements

Check all that apply (**contractors need to match this checklist with itemized cost estimates for each individual improvement type**):

- |   |  |
|---|--|
| <input type="checkbox"/> Façade improvements          | <input type="checkbox"/> Heating/air conditioning/electrical/plumbing    |
| <input type="checkbox"/> Signs                        | <input type="checkbox"/> Outdoor dining (new or expanding)               |
| <input type="checkbox"/> Awnings and/or canopies      | <input type="checkbox"/> Screening of service areas                      |
| <input type="checkbox"/> Windows and/or doors         | <input type="checkbox"/> Energy conservation enhancements                |
| <input type="checkbox"/> Life-safety improvements     | <input type="checkbox"/> Exterior lighting upgrades                      |
| <input type="checkbox"/> Accessibility (ADA) upgrades | <input type="checkbox"/> Improvements to sewer or water main hookups     |
| <input type="checkbox"/> Parking lot improvements     | <input type="checkbox"/> Stormwater management upgrades                  |
| <input type="checkbox"/> Sidewalk repair/replacement  | <input type="checkbox"/> Permanent landscaping visible from right-of-way |

Narrative description of proposed improvements (**required**):

Total Anticipated Budget: \$ \_\_\_\_\_

Total Grant Request: \$ \_\_\_\_\_

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## Grant Application Agreement

All information submitted with this application is true and accurate to the best of my knowledge. I have read and agree to comply with the guidelines and procedures of the Commercial Building Improvement Grant Program. I understand that the Village has the right and discretion to approve or deny any project or portions thereof. I understand that approved projects in this application must receive all required permit approvals from the Village of Homer Glen prior to construction.

The Owner invites Village representatives to make all reasonable inspections and take photographs of the subject property during the processing period of this application.

The Owner and Applicant agree to hold harmless the Village of Homer Glen and its representatives from all cost, injury and damage to any person or property whatsoever, any of which is caused by an activity, condition or event arising out of the performance, preparation for performance or nonperformance of any project improvement included in the award application. The above cost, injury, damage or other injury or damage incurred by or to any of the above shall include, in the event of an action, court cost, expenses of litigation and reasonable attorneys' fees.

I understand that failure to submit required project documentation or to complete improvements in accordance with the approved plans will deem the applicant's grant approval null and void and release the Village from its obligation to distribute the grant award.

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Applicant Signature	Printed Name	Date
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Property Owner Signature	Printed Name	Date
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**Approval for Grant Award under \$5,000:**

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Village Manager	Date
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**Approval for Grant Award of \$5,000:**

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Village Manager	Date
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Mayor with consent of Village Board of Trustees	Date
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## Disclosure of Beneficiaries

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1. Nature of Applicant (check one):

- Individual                       Trust/Trustee                       Corporation/Limited Liability Co.  
 Partnership                       Land Trust/Trustee                       Joint Venture

2. If applicant is an entity other than described in Section 1, briefly state nature and characteristics of applicant:

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3. If in your answer to Section 1, you checked anything other than *individual*, identify by name and address each person or entity which is a 5% or more shareholder in the case of a corporation, a beneficiary in the case of a trust or land trust, a joint venture in the case of a joint venture, or who otherwise has a proprietary interest, interest in profits and losses, or right to control such entity:

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4. Name, address, and capacity of person making this disclosure on behalf of the applicant:

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### Verification

As the undersigned, I hereby state that I am the person making this disclosure on behalf of the applicant, that I am duly authorized to make this disclosure, that I have read the above and foregoing Disclosure of Beneficiaries, and that the statements contained therein are true in both substance and fact.

Signature \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

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Signature & Seal of Notary Public