### CHICAGO Recovery plan

# **DEVELOPMENT GRANT DISBURSEMENT CHECKLIST**

### **DISBURSEMENT MILESTONES**

Once you have an executed contract, you have four milestone opportunities to request reimbursement.

Milestone	Disbursement Details
Permit(s) Issued	Can be reimbursed for eligible expenses <b>up to</b> 25% of your total grant amount.
Rough Inspection	Can be reimbursed for eligible expenses <b>up to</b> 50% of your total grant amount
Final Inspection	Can be reimbursed for eligible expenses <b>up to</b> 75% of your total grant amount
Full Occupancy	Can be reimbursed for eligible expenses <b>up to</b> 100% of your total grant amount

### **DISBURSEMENT CHECKLIST**

 $\infty$ °dgYZgïd<sup>®</sup>WZ°gZ<sup>4</sup>b WyghZY°you must provide proof of b ViZgVah°ej gX] VhZY<sup>®</sup>VcY<sup>1</sup> dg<sup>®</sup>Xdb eaZiZY;<sup>®</sup>VcY proof d[ eVnb Zci. (See samples on page 2-3)

#### Submit Contractor invoice(s) showing:

- ✓ Contractor name, address, date and invoice number
- ✓ Grantee's name and project address
- ✓ Itemized expenses and balance due date
- ✓ Contractor name matching the building permit

#### Submit receipt from Contractor to Grantee, showing:

- ✓ Contractor's name, address, date and invoice number
- ✓ Amount paid
- ✓ Date received

#### Note: the proof of payment is different from the receipt

\* Lien waivers and sworn statements are not necessary for items a grantee purchased themselves

#### Submit grantee proof of payment(s), showing:

- ✓ Account in grantee's name or a member of the grantee's organization
- $\checkmark\,$  Contractor's name, date and total amount paid
- ✓ Payment method, such as cancelled checks or bank statements, with transactions highlighted (cash not acceptable)

#### Submit partial or final lien waivers, showing\*:

- ✓ Names and amounts matching those on invoices
- ✓ Subcontractor waivers for GC (preferred) or grantee

## Submit sworn and notarized contractor's statement, showing\*:

✓ Names and amounts match those on invoices

## Submit sworn and notarized owner's statement, showing\*:

 $\checkmark\,$  Names and amounts match those on invoices

# CHICAGO

# **DEVELOPEMENT GRANT DISBURSEMENT DOCUMENTS**

Below are examples of documentation that you will need to submit with each disbursement request.

### **Contractor invoice and receipt**

Sill From Vame: Construction Company Name: Construction Street Address: 123 S. Braverman Dr. Chicago IL, 60623	Compar Street A	Iohn Testerson ny Name: Test Company ddress: 123 S. Courage Ln. IL, 60612	Invoice No Invoice Date: Due Date: 01/15/3	12/15/22
Description/Job Phase		Quantity/Hours	Price (\$)	Total (\$)
Test Company: Construction Supplies		Flooring Tiles 1234	\$10	\$12,345
Test Company: Construction Labor			\$50 	\$5,678
			6.1	
			Subtotal Sales Tax	\$18,023
	A		Other	N/A
			Total	\$18,023

### **Proof of Payment: Bank Statement**

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BAN John Testerse Test Company 123 S. Courag Chicago, IL, 61 STATEMENT OF TRANSACTION	, e Ln )612	
DATE	DESCRIPTION	AMOUNT
1/12/23	Purple Chair Suppliers Ltd	\$1,123
1/14/23	Blue Fixtures Ince	\$1,234
<mark>1/15/23</mark>	Construction Supplies	\$12,345
<mark>1/15/23</mark>	Construction Labor	<mark>\$5,678</mark>

		BANK	
Date Sent	Status	Recipient	Amount
1/15/23	Complete	Construction	\$18,023
W200000	Money Sent fro	om Test Company CHK (0123)	
	Email Address	Jdesjardins@Construction.com	
	Transaction Number	123456789	

# CHICAGO

# **DEVELOPEMENT GRANT DISBURSEMENT DOCUMENTS**

Below are examples of documentation that you will need to submit with each disbursement request.

### **Lien Waiver and Sworn Statement:**

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	F	INAL WAIV	ER OF LIEN			
STATE OF ILLINOIS		)		G	ty #	
COUNTY OF		<pre> ss</pre>		Escro	w #	
TO WHOM IT MAY CONCERN:						
WHEREAS the undersigned has been emp	loved by					
to fumish						
for the premises known as						
of which						is the owner.
	11.12					IS the owner.
THE undersigned, for and in con (\$) Dollar do(es) hereby waive and release any and	s, and oth	er good and valu	able considerations	, the receipt w	hereof is hereby	acknowledged,
mechanics' liens, with respect to and on apparatus or machinery furnished, and on all labor, services, material, fixtures, appa the undersigned for the above-described pr DATE	the money ratus or n remises, II COMP.	rs, funds or other of archinery, heretofo NCLUDING EXT ANY NAME	considerations due o ore furnished, or wh	r to become d	ue from the own	er, on account of
	ADDR	ESS				
SIGNATURE AND TITLE 💻						
* EXTRAS INLOUDE BUT ARE NOT LIMITED	TO CHAN	GE ORDERS, BOT	H ORAL AND WRITT	EN, TO THE CO	NTRACT.	
STATE OF ILLINOIS						
COUNTY OF		SS	CONT	RACTOR	'S AFFIDAV	TT
TO WHOM IT MAY CONCERN:		_ /				
THE UNDERSIGNED, (NAME)				BEI	NG DULY SWO	ORN, DEPOSES
AND SAYS THAT HE OR SHE IS (POSI	TION)					OF
(COMPANY NAME)						WHO IS THE
CONTRACTOR FURNISHING					WORK ON 1	THE BUILDING
OWNED BY						
That the total amount of the contract in payment of S unconditionally and that there is no claim and addresses of all parties who have furm for specific portions of said work or for m that the items mentioned include all labor :	prio either lega ished mat aterial ent	or to this paymen il or equitable to d erial or labor, or b ering into the com ial required to com	oth, for said work a struction thereof and aplete said work acc	s are true, con said waivers, and all parties I the amount d	rrect and genuin That the followi having contracts ue or to become	ng are the names or sub contracts due to each, and
		WHAT FOR	CONTRACT PRICE INCLDG EXTRAS*	PAID	PAYMENT	DUE
NAMES AND ADDRESSES						
NAMES AND ADDRESSES						
NAMES AND ADDRESSES						· · · · ·
NAMES AND ADDRESSES						
NAMES AND ADDRESSES						
NAMES AND ADDRESSES	G EXTRA	S* TO COMPLETE				
TOTAL LABOR AND MATERIAL INCLUDID That there are no other contacts for said	work outs	tanding, and that	there is nothing due			son for material,
TOTAL LABOR AND MATERIAL INCLUDE	work outs	tanding, and that	there is nothing due			son for material,
TOTAL LABOR AND MATERIAL INCLUDID That there are no other contacts for said	work outs be done u	tanding, and that	there is nothing due			son for material,
TOTAL LABOR AND MATERIAL INCLUDD That there are no other contact: for said labor or other work of any kind done or to DATE	work outs be done u SIG? RE ME TI	tanding, and that pon or in connect NATURE	there is nothing due			son for material,
TOTAL LABOR AND MATERIAL DYCLUDD That there are no other contact: for said abor or other work of any kind done or to DATE	work outs be done u SIG? RE ME TI TO CHAN	tanding, and that pon or in connect NATURE HIS GE	there is nothing due ion with said work o			oon for material,
TOTAL LABOR AND MATERIAL DECLUDD That there are no other contact: for said labor or other work of any hand does or to DATE SUBSCRIBED AND SWORN TO BEFOR SUBSCRIBED AND SWORN TO BEFOR SHITAS DECLUDE BUT ARE NOT LOWIED ORDERS. BOTH ORAL AND WRITTEN. TO TI	work outs be done u SIG? RE ME TI TO CHAN	tanding, and that pon or in connect NATURE HIS GE	there is nothing due ion with said work o	other than above	ve stated.	
TOTAL LABOR AND MATERIAL INCLUDE That there are no other contact: for said labor or other work of any kind done or to DATE	work outs be done u SIG? RE ME TI TO CHAN HE CONTR	tanding, and that pon or in connect NATURE HIS GE ACT.	there is nothing due ion with said work o	other than about	ve stated.	, ,

This document is BOTH a lien waiver (top) AND a contractor's sworn statement (bottom).

"This Payment" in the sworn statement must align with expenses submitted.

### **Sworn Owners Statement:**

STATE OF ILLINOIS	} ss		Guara	ntee No.	
COUNTY OF	j.	Escrov	w No		
The affiant,				being first duly swo	orn, on oath deposes
and says that he is the " owner/benefician	y of Trust No.	held by			
which is the owner " of the following descr	ribed premises in	Co	unty, Illinois, to wit	:	
That he is thoroughly familiar with all That with respect to improvements o That with only contracts let for the fun That this statement is a true and corr	n the premises the only w nishing of future work or n	ork done or materials fun naterials relative to the co	nished to date are ontemplated impro	as listed below; vements are as lis	ited below;
NAME AND ADDRESS	KIND OF WORK	ADJUSTED TOTAL CONTRACT INC. EXTRAS & CREDITS	PREVIOUSLY PAID	AMOUNT OF THIS PAYMENT	BALANCE TO BECOME DUE
	ARCHITECT				
	SURVEYOR				
	ENGINEER				
	SOIL TESTS	1			
	OUL ILOIS				
		-			
	GENERAL				
	CONTRACTOR				
	OFF-SITE				
	IMPROVEMENTS	1			
	-	1			
	OTHERS	-			
		1			
STRIKE ONE	THE UNDERSIGN	ED HEREBY APPROVE	S THE ABOVE AN	IOUNTS FOR PA	YMENT.
SIGNED		ADDRESS			
Subscribed and swon SEAL:	n to before me this		day of		
					Notary Public

This document is the owner's sworn statement.

"Amount of this Payment" must align with expenses submitted.