



FAR SOUTH CHICAGO NEIGHBORHOOD OPPORTUNITY FUND (NOF) COURSE APPLICATION

Application must be returned to Crystal Birl, crystal@farsouthcdc.org or Nikiesha Emery, nikiesha@farsouthcdc.org. Applications can also be mailed to or dropped off at: 9923 S. Halsted, Chicago, Ill. 60628. For more information, please call 773.941-4833.

APPLICANT INFORMATION

Name: _____
Address: _____
Phone: _____
E-mail: _____

BUSINESS INFORMATION

Business Name: _____
Business Address: _____
Business Phone: _____
Business E-mail: _____
Ward District: _____ SSA District: _____ TIF District: _____

BUSINESS TYPE (check one)

- Corporation Limited Partnership Not for profit Sole Proprietorship Other

If other, please specify: _____

Note: Applicant must provide proof of business recognized and certified by the State of Illinois.

DESCRIBE PROPOSED PROJECT (CHECK ALL THAT APPLY):

<input type="checkbox"/> New Construction	<input type="checkbox"/> Acquisition	<input type="checkbox"/> Exterior Improvements
<input type="checkbox"/> Interior Improvements	<input type="checkbox"/> Landscaping	<input type="checkbox"/> Electrical and/or Plumbing

Proposed Start Date: _____

Do you need financing? YES or NO | If so, about how much: \$ _____

The undersign Applicant hereby states the above information and attachments are true to the best of their knowledge.

Applicant Signature: _____ Date: _____

TO BE COMPLETED BY MANAGEMENT OFFICE:

Director Approval: _____ Date: _____