



Illinois Department of Commerce & Economic Opportunity

BIG Round 2 Preparation Updated 09.16.20

This round of the Business Interruption Grant program will make more than \$200 million available for businesses experiencing losses or business interruption as a result of the COVID-19 pandemic.

DCEO, through its grant administrator Accion, will begin accepting applications for this round of Business Interruption Grants on Thursday, September 17, 2020.

The application questions posted in this document are designed to allow business owners time to review, assess their eligibility and gather any documents needed to complete the application. Asterisks represent required fields.

On Thursday, September 17, this will be replaced with an online submission portal that will collect applicant information and required documents.

Business Owner Information

1. Business Owner Name*
 - a. First Name
 - b. Last Name
2. Business Owner Email*
3. Business Owner Phone Number*
4. Business Owner Address*
 - a. Address Line
 - b. City
 - c. State
 - d. Zip

Business Information

1. Business Name*
2. Doing Business As (DBA) Name
3. Business Address*
 - a. Address Line
 - b. City
 - c. State
 - d. Zip
4. Industry*
 - a. Accommodation and Food Services
 - b. Administrative and Support
 - c. Agriculture, Forestry, Fishing and Hunting

- d. Arts, Entertainment, and Recreation
 - e. Construction
 - f. Education Services
 - g. Finance and Insurance
 - h. Health Care and Social Assistance
 - i. Information
 - j. Management of Companies and Enterprises
 - k. Manufacturing
 - l. Mining
 - m. Other Services
 - n. Professional, Scientific, and Technical Services
 - o. Public Administration
 - p. Real Estate Rental and Leasing
 - q. Retail Trade
 - r. Transportation and Warehousing
 - s. Utilities
 - t. Waste Management and Remediation Services
 - u. Wholesale Trade
5. Is your business in any of the following Heavily Impacted industries?*
- a. Event center
 - b. Music venue
 - c. Performing arts venue
 - d. Indoor recreation
 - e. Amusement park
 - f. Movie theater
 - g. Museum
 - h. Charter/Shuttle bus service
 - i. None of the above
6. If your business is over 50% indoor recreation, what type of indoor recreation do you provide?
- a. Trampoline park
 - b. Indoor Playground
 - c. None of the above
7. If none of the above, what is the capacity of your indoor space?
- a. 100 or less
 - b. More than 100
8. If in a Heavily Impacted industry, what percentage of your business is dedicated to this industry?
- a. Over 25%
 - b. Over 50%
 - c. Over 75%
 - d. 100%
9. Is your business in any of the following industries or activities?*
- a. Independently-owned retail
 - b. Restaurant
 - c. Bar or Tavern
 - d. Gym or Fitness Center
 - e. Promotion of tourism or lodging and accommodations
 - f. Support service of arts or events

- g. None of the above
10. If in one of the industries above, what percentage of your business is dedicated to this industry?
 - a. Over 25%
 - b. Over 50%
 - c. Over 75%
 - d. 100%
 11. Business FEIN*
 12. Business DUNS
 13. Business Website
 14. Business Social Media Handle
 15. When did you start your business?*
 16. What was your business revenue in 2019?*
 17. Have you received any of the following emergency aid? Please select all that apply*
 - a. Paycheck Protection Program (PPP)
 - b. EIDL Loan
 - c. EIDL Grant
 - d. Illinois Hospitality Grant
 - e. City of Chicago Together Now Grant
 - f. Illinois Business Interruption Grant
 - g. Any emergency grant from the city or county you are located in
 - h. I have not received any emergency funding
 18. Did you receive technical assistance or outreach from any of the following entities?*
 19. Are you a sole proprietor without a separate business bank account? *
 - a. Yes
 - b. No
 20. If Yes, do you attest to this business having suffered at least \$5K in losses due to the pandemic?
 - a. Yes
 - b. No

Required Documents

If non-Heavily Impacted Industry

1. 2019 Tax Return*
2. July 2019 Bank Statement*
3. August 2019 Bank Statement*
4. July 2020 Bank Statement*
5. August 2020 Bank Statement*
6. Signed W-9*
7. Business owner ID*

If Heavily Impacted Industry

1. 2019 Tax Return*
2. July 2019 Bank Statement*
3. August 2019 Bank Statement*
4. July 2020 Bank Statement*
5. August 2020 Bank Statement*
6. Signed W-9*
7. Business Rent or Mortgage for July and August
8. Business Utilities for July and August
9. Business Insurance for July and August
10. Payroll Expense Report for July and August
11. Proof of business loan payment for July and August
- Business owner ID*

Survey

1. With what gender do you identify?
 - a. Female
 - b. Male
 - c. A gender not listed here
 - d. Prefer not to respond
2. With what race do you most identify?
 - a. American Indian, Indigenous, Native American, or Alaskan Native
 - b. Asian American or Pacific Islander
 - c. Black or African American
 - d. White or Caucasian
 - e. Multiracial
 - f. Prefer not to respond
3. Are you Hispanic or Latinx?
 - a. Yes
 - b. No
 - c. Prefer not to respond
4. Are you a veteran?
 - a. Yes
 - b. No
 - c. Prefer not to respond
5. Are you a disabled small business owner?
 - a. Yes

- b. No
- c. Prefer not to respond

Business Attestations

Under penalty of perjury, the person clicking the box below warrants that he/she is authorized to execute this application on behalf of the applicant and warrants that all statements contained in this application are true, accurate and complete as of the date furnished to the State.*

- a. Yes
- b. No

Businesses will also be required to complete acknowledge that they certify understanding of the requirements of the grant, should they be selected. These certifications are posted [here](#).