

# **Legacy Business Program Business Stabilization Grant RE-APPLICATION**

Version: August 1, 2025



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## Instructions

Have you previously applied for, and received, a Business Stabilization Grant from the Office of Small Business? If so, and if you believe you qualify for an additional year of Business Stabilization Grant funding under an existing lease to a Legacy Business, use this form to apply for that additional year of funding.

If you have not previously received a Business Stabilization Grant, or if you have entered into a new lease since you last received a Business Stabilization Grant (or extended an existing lease), please [apply for a new Business Stabilization Grant](#) instead.

To receive funds disbursed under the Business Stabilization Grant Program, applicants must register as Suppliers with the City and County of San Francisco. This application form will ask you for your Supplier ID. If you do not already have a Supplier ID, please see this [step-by-step guide on becoming a Supplier](#).

Funds disbursed under the Business Stabilization Grant Program are generally made payable to the Legacy Business's property owner. If the property owner wishes to assign its right to these funds to another entity—for example, to a property management company—please contact the Office of Small Business for assistance.

Before completing this application, please review the [Rules and Regulations for Business Stabilization Grants](#).

After you have completed this application, please email, hand-deliver or mail the completed application and required attachments to:

Legacy Business Program  
Office of Small Business  
1 Dr. Carlton B. Goodlett Place  
City Hall, Room 140  
San Francisco, CA 94102  
[legacybusiness@sfgov.org](mailto:legacybusiness@sfgov.org)

If there has been a change to the lease, please include a copy of the current lease between the property owner and the Legacy Business when you submit this application form.

## 1. Contact Information

### A) INFORMATION ABOUT THE LEGACY BUSINESS:

- 1) Legacy Business name: \_\_\_\_\_
- 2) Legacy Business address: \_\_\_\_\_

### B) INFORMATION ABOUT THE LEGACY BUSINESS'S PROPERTY OWNER:

- 1) Property owner name: \_\_\_\_\_
- 2) Property owner address: \_\_\_\_\_
- 3) Property owner city, state and zip code: \_\_\_\_\_
- 4) Property owner phone number: \_\_\_\_\_
- 5) Property owner email: \_\_\_\_\_
- 6) Property owner Business Account Number (BAN): \_\_\_\_\_
- 7) Property owner Supplier ID with the City and County of SF: \_\_\_\_\_

### C) INFORMATION ABOUT THE PERSON COMPLETING THIS FORM:

- 1) Name: \_\_\_\_\_
- 2) Street address: \_\_\_\_\_
- 3) City, state and zip code: \_\_\_\_\_
- 4) Phone number: \_\_\_\_\_
- 5) Email: \_\_\_\_\_

D) Is the person completing this form the property owner, or an officer, employee or other agent of the property owner?

Yes \_\_\_\_\_ No \_\_\_\_\_

E) If you checked "No" to question (D) above, please explain your relationship to the property owner: \_\_

\_\_\_\_\_  
\_\_\_\_\_

## 2. Certification of Square Footage Leased to the Legacy Business in San Francisco

I certify that the property owner leases the following amount of space to the Legacy Business in San Francisco:

\_\_\_\_\_ square feet

### 3. Business Activity

A) Was the Legacy Business closed or inactive for any number of days during the period covered by this Business Stabilization Grant Re-Application?

Yes\_\_\_\_\_ No\_\_\_\_\_

B) If “yes,” what dates was the Legacy Business closed or inactive? From when to when? \_\_\_\_\_

\_\_\_\_\_

C) Please describe the closure or inactivity: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### 4. Certification of No Material Changes to Lease

A) Have there been any changes to the lease between the property owner and the Legacy Business in the past 12 months?

Yes\_\_\_\_\_ No\_\_\_\_\_

If “no,” skip to Question 5. If “yes,” please complete the following:

B) On what date did the lease change? \_\_\_\_\_

C) Describe how the lease has changed: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

D) If there has been a change to the lease between the property owner and the Legacy Business, I certify that a copy of the current lease between the property owner and the Legacy Business has been submitted with this application form.

Yes\_\_\_\_\_ No\_\_\_\_\_ (“Yes” required to be eligible for grant)

## 5. Certification that the Property Owner Meets All Other Requirements of the Business Stabilization Grant

A) I have reviewed the [Rules and Regulations for Business Stabilization Grants](#). I certify that the property owner complies with those Rules and Regulations:

Yes\_\_\_\_\_ No\_\_\_\_\_ (“Yes” required to be eligible for grant)

B) In particular, I certify that the property owner complies with the following Rules and Regulations:

1) The property owner has no amounts owed to the City, as specified in Rule 5(A) of the Rules and Regulations:

Yes\_\_\_\_\_ No\_\_\_\_\_ (“Yes” required to be eligible for grant)

2) The property owner has complied with any requirement to register as a business with the Office of the Treasurer and Tax Collector, as specified in Rule 5(B) of the Rules and Regulations:

Yes\_\_\_\_\_ No\_\_\_\_\_ (“Yes” required to be eligible for grant)

3) The property owner is, to the best of its knowledge, not the subject of an Office of Labor Standards Enforcement investigation or enforcement action, as specified in Rule 5(C) of the Rules and Regulations:

Yes\_\_\_\_\_ No\_\_\_\_\_ (“Yes” required to be eligible for grant)

4) The property owner is not related by ownership, either directly or indirectly, to the Legacy Business, as defined in Rule 5(D) of the Rules and Regulations:

Yes\_\_\_\_\_ No\_\_\_\_\_ (“Yes” required to be eligible for grant)

5) The property owner is not an Ineligible Property Owner, as defined in Rule 6 of the Rules and Regulations:

Yes\_\_\_\_\_ No\_\_\_\_\_ (“Yes” required to be eligible for grant)

6) The lease between the property owner and the Legacy Business complies with all the Conditions for Leases specified in Rule 8 of the Rules and Regulations:

Yes\_\_\_\_\_ No\_\_\_\_\_ (“Yes” required to be eligible for grant)

## 6. Acknowledgments

Please read all of the following statements. You will be asked to acknowledge that you have read and understood all of them:

- I understand that all information provided in this application may be subject to disclosure under the California Public Records Act and/or the San Francisco Sunshine Ordinance.
- I understand that, whenever an application for a grant under Administrative Code 2A.246(c) is approved, the Office of Small Business shall, to the extent permitted by law, keep confidential all provisions in any lease submitted by a property owner in connection with the application, except to the extent that OSB relied on the content of any such provisions in deciding to award a grant to the applicant property owner.
- I understand that whenever an application for a grant under Administrative Code 2A.246(c) is denied, or before such an application has been either approved or denied, the OSB shall, to the extent permitted by law, keep confidential the entirety of any lease submitted by the property owner in connection with the application.
- I understand that the Business Stabilization Grant is an annual grant and must be reapplied for on or before the anniversary date of the first grant payment.
- I understand that any failure to reapply may affect my ability to receive future Business Stabilization Grants, as provided in Administrative Code Section 2A.246(c).
- I understand that the amount of the Business Stabilization Grant could vary and might be less than \$4.50 per square foot due to funding constraints.
- I understand that any willful or material misrepresentation in this application form may be cause for:
  - The termination of any pending grant;
  - An order to repay any grants previously awarded; and,
  - A prohibition on applying for, or receiving, future grants.

I have read and understood all of the statements listed above:

Yes\_\_\_\_\_

No\_\_\_\_\_

(“Yes” required to be eligible for grant)

## 7. Declaration and Signature

I, the Qualified Property Owner to the Registered Legacy Business \_\_\_\_\_  
\_\_\_\_\_ located at \_\_\_\_\_ in  
San Francisco, California, or the authorized representative of the Qualified Property Owner, certify under  
penalty of perjury that the statements in this application are true and correct to the best of my knowledge.

\_\_\_\_\_  
Applicant's Printed Name

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

## 8. Checklist

Include the following with your submission:

- ☐ Completed and signed Business Stabilization Grant Re-Application.
- ☐ Copy of the current lease if there has been a change to the lease between the property owner and the Legacy Business.