**COMMERCIAL FAÇADE IMPROVEMENT**

**GRANT APPLICATION**

(Revised December 17, 2015)

**I. Applicant / Business Information**

**Applicants’ Name**:

Mailing Address: Click here to enter text.

City / State / Zip Code: Click here to enter text.

Phone / Fax / Email:

**Property Address**: Click here to enter text.

City / State / Zip Code: High Springs, Fl. 32643

**Business Name**:\*

Business Owner: Click here to enter text.

City / State / Zip Code: Click here to enter text.

Phone / Fax / Email:

**Property Owner**:

Mailing Address: Click here to enter text.

City / State / Zip Code: Click here to enter text.

Phone / Fax / Email: / Click here to enter text.

\*If the business is a partnership, attach a sheet listing name, address, and telephone number of each partner. N/A

\*If the business is a corporation, attach a sheet listing name, address, and telephone number of each shareholder and officer who owns any portion of the corporate stock. Publicly held companies are exempt. N/A

**II. Description of Facade Improvement**

Please provide a brief description of the planned façade improvement: [attach sheets as necessary]

New windows for the building will provide better aesthetics along with better energy costs as they are insulated.

Attach a drawing or rendering of the planned façade improvements, as well as any additional descriptive material. ON THE BID IT MENTIONS ELEVATIONS ON PAGES 2 & 3- THESE CAN BE USED FOR THIS

Attach at least three (3) photos of the building façade in its current condition.

**III. Cost of the Façade Improvements**

Please provide cost estimates for the planned façade improvements.

Architectural Façade Renovation: $Click here to enter text.

Replacement or Installation of Windows and/or Doors: $

Replacement or Installation of Permanent Awnings: $Click here to enter text.

Structural Alterations or Accessibility Improvements: $Click here to enter text.

Other:Click here to enter text. $Click here to enter text.

Total Project Cost: $Click here to enter text.

Grant Funds Requested: (See page 3 for grant limits) $Click here to enter text.

Please attach an itemized listing of costs or estimates from a minimum of three (3) licensed contractors.

**IV. Applicant’s Acknowledgements**

Please read and initial all of the following:

Click here to enter text.The undersigned applicant agrees to enter into a Façade Improvement Agreement with the Community Redevelopment Agency should it receive a grant from this Program.

Click here to enter text.The undersigned applicant agrees to utilize any grant funds received in strict conformance with the guidelines set forth by the Community Redevelopment Agency.

Click here to enter text.The undersigned applicant acknowledges that the grant application must receive approval by the Community Redevelopment Agency before any construction can commence. No grants will be awarded on an application if work has been started or completed.

Click here to enter text.The undersigned acknowledges that if the grant application is for buildings/properties within the Historic District must receive all applicable Certificates of Appropriateness from the Historic Preservation Board before the grant application is considered for funding.

Click here to enter text.The undersigned applicant acknowledges he/she will be required to obtain proper permitting through the Planning, Development and Codes Department before any application will receive an “approved” grant award. This includes any changes required to obtain a building permit. Variances and/or zoning change requests must be handled prior to award approval.

Click here to enter text.The undersigned acknowledges that “cash receipts” submitted for reimbursement will not be accepted due to auditing requirements - NO EXCEPTIONS. The undersigned applicant shall pay for materials and services by check, money order or by credit card. Verification of payment shall be submitted with reimbursement request.

Click here to enter text.Only properties located within the Community Redevelopment District are eligible for this grant.

Click here to enter text.All grant recipients must complete a W-9 Tax Form and will receive a 1099 Tax Form for their award.

Click here to enter text.The project must be completed in a timely fashion in strict accordance with the timeframe specified by the Community Redevelopment Agency within the Façade Improvement Agreement. In the event an extension is needed beyond the timeframe set in the Façade Improvement Agreement, the Grant Recipient must petition the Community Redevelopment Agency for approval documenting the reason for delay.

Click here to enter text.The Community Redevelopment Agency shall disburse funds to the grant recipient only upon demonstration that the work has been completed, but the entire project is not required to be completed prior to the distribution of funds. The Community Redevelopment Agency may distribute funds throughout the project.

Click here to enter text.The Community Redevelopment Agency shall have no liability for workmanship, design, or construction related to the project receiving grant funds under this program.

Click here to enter text.The undersigned applicant agrees to allow the CRA to photograph the project for use in future publications should the undersigned receive a grant under this program.

**V. Funding**

Click here to enter text.Under this grant program the applicant may request up to $5,000.

Click here to enter text.Grant funds can be used for up to 50% of total project costs, not to exceed $5,000.

Click here to enter text.Applicants must match grant funds dollar-for-dollar for goods and/ or services.

Click here to enter text.Work done by owner or applicant will not be funded for labor.

Click here to enter text.Applications will be evaluated by the Community Redevelopment Agency at a public meeting and scope and amount of grant will be determined on a case by case basis.

Click here to enter text.The Community Redevelopment Agency may make disbursements of funds to the Grant Recipient based upon the percentage of project completion.

**VI. Checklist**

Only completed applications will be accepted so please be sure you submit the following with this application:

.. List of all business owners including name, address and telephone number.

.. Drawings or renderings of the planned façade improvements, as well as any additional descriptive material. Additional drawings or renderings may be required at the request of the Community Redevelopment Agency depending on the scope and nature of the project.

.. Three (3) current photographs of the façade in its current condition.

.. Itemized list of costs or estimates from a minimum of (3) licensed contractors.

.. Applicable Certificates of Appropriateness.

.. Completed W-9 Tax Form.

**VII. Applicant’s Signature**

Click here to enter text. Click here to enter text.

Applicant’s Name Date

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Applicant’s Signature Date

STATE OF FLORIDA

COUNTY OF ALACHUA

Sworn to and subscribed before me by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_who is personally known to

me or produced \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_as identification, this \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_ ,

20\_\_\_\_\_\_.

Notary's Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SEAL: