

## Business Façade Grant Program Application

### CONTACT INFORMATION:

#### Applicant Information

Applicant name:

Mailing Address:

Phone/Cell #:

Email:

#### Business Owner Information

Business Owner Name:

Mailing Address:

Phone/Cell #:

Email:

City Local Business Tax Receipt Number:

#### Property Owner Information (if different than business owner)

If the applicant is not the property owner, a Property Owner Authorization Form must be completed and submitted with this Application.

Property Owner Name:

Mailing Address:

Phone/Cell #:

Email:

### SITE IDENTIFICATION AND HISTORY

Name of business or site:

If property is not occupied, will it be occupied upon completion of the project?

Location Address:

Year building was constructed:

Tax Parcel Number:

Existing Use:

Proposed Use:

What is the current condition of the building façade? Response may be separately attached.

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### **SCOPE OF WORK**

Provide a 1-2 paragraph summary of the proposed improvements and how the proposed improvements will enhance the Community Redevelopment Area. Response may be separately attached.

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### **REQUIRED MATERIALS TO SUBMIT WITH APPLICATION**

Please include the following attachments with your application before you submit:

- ☐ Current photos of building and issues that will be resolved under the Program.
- ☐ Signed and sealed plans (if required by City Building Department for the type of work proposed).
- ☐ Sketches, drawings, plans or architectural renderings which clearly depict the proposed improvements.
- ☐ Information regarding project components such as color swatches, pictures of added features, etc.
- ☐ Copy of a lease or rental agreement that indicates building will be occupied after rehabilitation (if applicable).
- ☐ Two written contractor estimates if purchase or labor is \$1,000 or greater (staff will review for reasonableness of cost).



**SIGNATURE PAGE**

I, \_\_\_\_\_, attest under penalty of perjury that the information contained in this City of Newberry CRA Application for Façade Grant is true and correct to the best of my knowledge. I understand that the Newberry CRA Business Façade Grant Program benefits are contingent upon funding availability and Newberry CRA approval and are not to be construed as an entitlement or right of a property owner or Applicant. Properties within the designated Newberry CRA boundary are not eligible for grant-funded programs when the work proposed to be funded would conflict with the goals expressed in the CRA Amended Community Redevelopment Plan. I understand that all improvements funded by any grant awarded must be consistent with the information submitted with this application and considered by the CRA. I have received and reviewed the Business Façade Grant Program Policies and Procedures (the "Procedures") and I agree that all work and activities funded by any grant award will be done in accordance with the Procedures. I further agree to comply with the Florida Public Records Law Requirements attached as Exhibit C to the Procedures for all labor and materials paid for by the grant award. I further understand that I am responsible for providing construction documents and obtaining any permits required for the proposed work, and hold harmless the City of Newberry CRA for any damage associated with this Application or the Newberry CRA Business Façade Grant Program.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Co-applicant

\_\_\_\_\_  
Typed or printed name and title of applicant

\_\_\_\_\_  
Typed or printed name of co-applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

State of \_\_\_\_\_ County of \_\_\_\_\_

The foregoing application is acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_, by \_\_\_\_\_, who is/are personally known to me, or who has/have produced \_\_\_\_\_ as identification.

NOTARY SEAL

\_\_\_\_\_  
Signature of Notary Public, State of \_\_\_\_\_