



## FAÇADE IMPROVEMENT PROGRAM

### APPLICATION

**Applicant Name:** \_\_\_\_\_

**Address of proposed improvements:** \_\_\_\_\_

**Daytime phone number:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Applicant is:** \_\_\_\_\_ Property Owner \_\_\_\_\_ Tenant (If the applicant is the tenant):

**Name of property owner** \_\_\_\_\_

**Mailing address of property owner** \_\_\_\_\_

**Name of applicant's business** \_\_\_\_\_

**Zoning District:** \_\_\_\_\_

**Type of structure:** \_\_\_\_\_ Commercial \_\_\_\_\_ Commercial and residential

**Proposed improvements for which funding is requested (check all that apply):**

\_\_\_\_ Window/door replacement \_\_\_\_\_ Windows/doors restoration

\_\_\_\_ Painting, (in conjunction with other façade improvements)

\_\_\_\_ Repair or replacement of deteriorated or missing architectural details

\_\_\_\_ Restoration of original openings \_\_\_\_\_ Storefront rehabilitation or renovation

\_\_\_\_ Masonry restoration or repair \_\_\_\_\_ Removal and replacement inappropriate features

\_\_\_\_ Replacement of inappropriate awnings \_\_\_\_\_ Accessibility improvements (exterior)

\_\_\_\_ Rear or side façade improvements (facing public spaces)

\_\_\_\_ Other \_\_\_\_\_

**Total estimated project cost of façade improvements \$** \_\_\_\_\_

**Façade improvement funds requested \$** \_\_\_\_\_

*Attach a detailed description of the work described above including photographs, drawings showing proposed improvements, colors, materials. Attach a minimum of two estimates for the proposed work.*

**STATEMENT OF UNDERSTANDING**

1. I agree to comply with the guidelines and procedures of the Johnsborg Façade Improvement Program.
2. I understand that I must submit detailed cost documentation, copies of bids, contracts, invoices, and receipts upon completion of the approved improvements.
3. I understand that Façade Improvement funds are subject to audit and taxation and that the Village is required to report the amount and recipient of said grants to the I.R.S.
4. I understand that work done before a Façade Improvement Agreement is approved by the authorized Village representative(s), project costs are not eligible for reimbursement through this program.

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

**AUTHORIZATION OF OWNER** If the applicant is other than the owner, the owner must complete the following certificate: I certify that I am the owner of property at \_\_\_\_\_, and that I authorize the applicant to apply for a reimbursement grant under the Johnsborg Façade Improvement Program and undertake the approved improvements.

**Signature of Owner:** \_\_\_\_\_