Print Application

# COMMERCIAL BUILDING & SITE GRANT PROGRAM APPLICATION

**Applicant** (Please Print or Type)

Date:

Name:

Business Name:

Address:

City: State: Zip Code:

Phone Number: Fax Number:

Mobile Number: E-mail Address:

**Property Owner** (Please Print or Type) *This section can be left blank if the same as above.*

Name:

Business Name:

Address:

City: State: Zip Code:

Phone Number: Fax Number:

Mobile Number: E-mail Address:

**Please fill out the information below regarding the proposed development.**

Location/Address:

Tax Key Number(s):

Zoning:

Estimated Total Project Costs: $

Amount of Request: $

Proposed Starting Date:

Proposed Completion Date:

Brief Project Description:

**Required Attachments to this Application:**

- ☐ Cost breakdown of the project with this application that is broken down by category (design, materials, labor, etc.).
- ☐ Copies of bids or written cost estimates from contractors.
- ☐ Scale drawing showing alterations, colors, changes or improvements being proposed.
- ☐ Copy of a recent photo showing current condition of the building.

If this form has been filled out electronically, please click on the "Print Application" button on the top of page 1 or to the right of this text.

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Once the application is printed/filled out it can be submitted to the Planning Division along with any applicable information required for your submittal. Please see the attached sheet to ensure that the proper supporting documents are submitted along with this completed form.

**I HEREBY CERTIFY THAT I HAVE READ AND FULLY UNDERSTAND THE GRANT PROCEDURES AND FAILURE TO COMPLY WITH CITY REQUIREMENTS MAY RESULT IN THIS APPLICATION BEING WITHHELD FROM CONSIDERATION.**

Signature of the Property Owner:

Signature of the Applicant (working as "Agent" for the owner):

Print Name:

Print Name:

Date:

Date:

***For Planning Department Use Only***

Submittal Date:

Staff Signature:

Council Approval Date:

Amount Awarded:

Date Project Completed:

Date Funds Distributed: