City of Hastings
DOWNTOWN DEVELOPMENT AUTHORITY
FAÇADE & FENCING/SCREENING IMPROVEMENT GRANT APPLICATION

APPLICANT INFORMATION

1. Property/Business Owner
   Name: ________________________________

2. Business
   Name: ________________________________

3. Property
   Address: ________________________________

4. Phone Numbers: 
   Home: ________________________________
   Work: ________________________________
   Email: ________________________________

5. Is the building/property owned by the applicant?  YES  NO

6. Is this the first time applying for a façade grant?  YES  NO

7. Is this project on a corner lot?  YES  NO

   If No, please attach a signed letter from the property owner expressing approval of the proposed project.

Amended January 2017
PROJECT INFORMATION

On separate sheets of paper, please describe your project in detail. Tell:
   a) What it is you want to accomplish - drawings are required.
   b) How this project meets the Purpose and Priorities of the DDA Façade Improvement Program as listed in the Guidelines.
   c) Who you have identified to do the work and the reason(s) for your selection, and
   d) What is the preliminary timetable for accomplishing the work. Also enclose a detailed expense budget/estimate for this project.

8. The project will involve (please check all that apply):

   _________ Repairs or replacement of windows, doors, walls, or other appropriate architectural elements
   _________ Exterior painting (Non-Maintenance)
   _________ Awnings (Historic in appearance or reflects the character of the Downtown)
   _________ Exterior Lighting
   _________ Masonry repair or restoration
   _________ Restoration of vintage elements, for example:
      ☐ Removal of historically unsuitable façade treatments
      ☐ Removal/replacement of historically unsuitable signs and/or lighting (new signs/lights must be compatible with existing architecture and the character of the Downtown)
      ☐ Repair or restoration of original brick and woodwork
   _________ Fencing/Screening
   _________ Conversion to retail or entertainment storefront

9. Additional grant up to $500 for architectural rendering.

   _________ Name of architectural firm: ______________________________

10. Total Project Budget $ ______________________________

11. Grant Request (Not To Exceed 50% of project or $2,500.00/$5,000 plus #9 for maximum of $3,000/$5,500)$ ____________

12. Proposed Starting Date: _____________________

13. Proposed Completion Date: _____________________

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14. What is (are) the existing use(s) of the building/property:

________________________________________________________________________________________

________________________________________________________________________________________

15. Will the proposed project result in a change in the use(s) of the building/property:

Yes  No

If yes, please explain:

________________________________________________________________________________________

________________________________________________________________________________________

NOTE: There is a $100 application fee, due at the time this application is submitted. This fee will be refunded if a project is not approved, or if the project is approved and completed. Applicants who receive a grant award and do not complete the project will forfeit this application fee.

THE UNDERSIGNED APPLICANT(S) AFFIRMS THAT:

☐ The information submitted herein is true and accurate to the best of my (our) knowledge.

☐ The property contained in the application is located in the Hastings DDA District.

☐ I (we) have read and understand the conditions of the Downtown Development Authority's Façade Improvement Program and agree to abide by its conditions and guidelines.

☐ If I (we) do not implement improvements submitted by me (us) on a plan approved by the Façade Improvement Program I will not be eligible for reimbursement of any costs associated with said improvements.

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☐ I (we) understand that if I (we) are found to be non-compliant with the conditions of this program, the DDA may nullify the grant award and that I (we) may not apply to this program again for a period of one (1) year following the DDA’s decision.

Signature of Applicant(s):

_________________________  __________________________

I.D.#: ______________________  I.D.#: ______________________

Date: _______________________  Date: ______________________

Federal Business Tax ID#: ______________________________

If a tenant, signature of property owner(s):

_________________________  I.D.#: ______________________

Date: ______________________

Staff Use Only

________________________________________

Scoring:

_____ New Projects (1st time applicant) [1 pt]

_____ Scope and Size of Project (Larger projects that achieve desired outcomes) [1-3pts]

_____ Implementation of DDA Approved Architectural Renderings [1 pt]

_____ Retail, Dining and Entertainment Businesses [1 pt]

_____ Project on corner lot [1 pt]

_____ Project in which the building is owner-occupied [1 pt]

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_______ Tax-paying property owner [5 pts]

_______ Project contains a high ratio of private to public dollars [1 pt]

_______ Project preserves community institutions (banks, theaters, etc.) [1 pt]

_______ Project designed to remove/replace boarded windows [1 pt]

_______ Project designed to resolve deteriorated/inappropriate/unsightly conditions that have existed for many years (boarded windows, deteriorated electrical fixtures, etc.) [1-3 pts]

_______ Project enhances pedestrian movement from the rear to the front of buildings [1 pt]

_______ Project designed to restore the historic condition of the building facade or posterior (see eligible costs: Item No. 7) [1-3 pts]

_______ Project will complete the improvement of a block or portion of a block (ex. replacement of an inappropriate facade that exists on a block containing many appropriate, well-preserved, or improved facades) [1 pt]

_______ New construction [1-5 pts]

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