

PROJECT INFORMATION

On separate sheets of paper, please describe your project in detail.

- a) What it is you want to accomplish - drawings are required
- b) How this project meets the Purpose and Priorities of the DDA Facade 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 facade 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.

_____ 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, (max \$3,000.00/\$5,500)\$ _____

12. Proposed Starting Date: _____

13. Proposed Completion Date: _____

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 Facade 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 Facade Improvement Program I will not be eligible for reimbursement of any costs associated with said improvements.
- If 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: _____