



## FAÇADE GRANT APPLICATION

\_\_\_\_\_  
Name of Applicant

\_\_\_\_\_  
Co-Applicant

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Fax Number

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Project Address

\_\_\_\_\_  
What is/are the existing business at the Project Address?

Does the Applicant own the building? Yes \_\_\_\_\_ No \_\_\_\_\_ If "No," please include a letter of permission from the property owner with this application.

The Project will involve the Building's: Exterior \_\_\_\_\_ Sign \_\_\_\_\_ Both \_\_\_\_\_

Estimated project starting date: \_\_\_\_\_ Estimated project completion date: \_\_\_\_\_

Estimated total cost of Project: \_\_\_\_\_

Will the Applicant be using the services of an architect? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please list name and address of architect:

\_\_\_\_\_

Describe briefly any additional investment that is planned as part of this overall project. Please include costs.

\_\_\_\_\_

---

**NOTE:** Please attach additional documentation as outlined in Section IV of the grant description.

The undersigned Applicant affirms that the information submitted herein and attached is true and accurate to the best of Applicant's knowledge; and, that Applicant has read and understands the conditions outlined in the *Main Street Clinton Façade Grant Guidelines & Application* and agrees to abide by its conditions.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Signed: \_\_\_\_\_

Date: \_\_\_\_\_