

College Park Facade Grant Application

Applicant's Name: _____

Name of Business: _____

Property Address: _____

Daytime Phone: _____ FAX: _____

Email: _____

Property Owner's Name: _____

Property Owner's Address: _____

Property Owner's Phone: _____

Check the Grant Program for which this application is being submitted:

_____ MEMBER GRANT (maximum grant of \$5,000)

_____ NON-MEMBER GRANT (maximum grant of \$2,500)

Attach the following:

- Description of proposed work
- Photographs clearly showing existing conditions
- Historic photo or postcard of building (if possible)

AGREEMENT

I understand that in order for my request for funding to be approved, I must agree to comply with the following:

1. Façade grants apply only to those structures and buildings within the Edgewater Drive Vision Plan overlay.
2. Only projects which have not received grant funds within the past five (5) years will be given consideration.
3. Maximum amount of grant monies will be considered by the scope of work.
4. General building maintenance is not eligible under this program.
5. Monies are for exterior improvements only.
6. The grant will be reimbursed upon completion of work and all paid invoices, relating to said work, documented with receipts/cancelled checks are submitted to the CPP office.
7. Any improvements NOT approved will be ineligible for funds.

8. For projects where the Applicant is not the property owner, the Applicant must have signed and notarized the **Owner's Affidavit of Consent**.
9. Grant monies will be paid directly to the Applicant, not the Contractor.
10. To hold harmless the College Park Partnership and its individual members, Downtown College Park Partnership (including its Executive Director and staff), and the City of Orlando.
11. Sign and agree to **College Park Facade Program policies, procedures and conditions**.

Signature: _____ Date: _____

To be filled out by the College Park Partnership office:

Date reviewed by the Bus. Dev. Committee: _____

Approved: _____ Amount granted: \$ _____

Approved with the following changes: _____

Approved for partial funding: _____ Amount granted: \$ _____

Denied: _____ Reason: _____

Date submitted to CPP: _____

Date reviewed by CPP: _____