

# HISTORICAL COMMERCIAL FAÇADE GRANT APPLICATION

To be eligible to apply for the Evansville Historic Commercial Façade Grant (HCFG) Program you must be a property or business owner within the city of Evansville's Promise Zone seeking exterior improvements to a structure that is to be used for commercial purposes and deemed a contribution to the historic fabric of the district. All improvements to said structure must comply with the grant program guidelines, design guidelines, and local zoning code in order to be eligible for funding. Evansville Historic Commercial Façade Grant Program guidelines are available for review at [www.evansville.in.gov/dmd](http://www.evansville.in.gov/dmd).

**APPLICANT INFORMATION:** Please indicate the name of the Property Owner, Business Owner and primary Contact for this project. If they are one and the same for all, only complete 1.) Name and check all three positions. If there is more than one person involved, please indicate appropriately.

1.) Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Position: \_\_\_\_\_ Property Owner \_\_\_\_\_ Business Owner \_\_\_\_\_ Contact Person

2.) Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Position: \_\_\_\_\_ Property Owner \_\_\_\_\_ Business Owner \_\_\_\_\_ Contact Person

3.) Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Position: \_\_\_\_\_ Property Owner \_\_\_\_\_ Business Owner \_\_\_\_\_ Contact Person

**BUILDING INFORMATION:** Please answer these questions in regards to the building to be rehabilitated. Proof of ownership and taxes paid should be attached.

Street Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Year Built: \_\_\_\_\_ Zoned: \_\_\_\_\_

Are there any code violations against this property (circle one) Yes No

If yes, please describe and/or attach documentation \_\_\_\_\_

Are property taxes paid to date (circle one) Yes No

Is the Building: Occupied, with how many tenants \_\_\_\_\_ or  
Vacant and not habitable \_\_\_\_\_ or Vacant & habitable \_\_\_\_\_

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**BUSINESS INFORMATION:** If a business is currently operating from the site or there is a business with a signed lease to occupy the building after renovations, please indicate the business information and supply a copy of the lease(s).

1.) Business Name: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Year Established at this location: \_\_\_\_\_ # of Employees: \_\_\_\_\_

Is this the business' only location (circle one)    Yes    No

Currently occupying premises (circle one)    Yes    No, plans to occupy on (date) \_\_\_\_\_

2.) Business Name: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Year Established at this location: \_\_\_\_\_ # of Employees: \_\_\_\_\_

Is this the business' only location (circle one)    Yes    No

Currently occupying premises (circle one)    Yes    No, plans to occupy on (date) \_\_\_\_\_

**PAST GRANT INFORMATION:** Has the property owner or any of the businesses located on this property received any previous funding (of any kind) from the City of Evansville?    Yes    No

If yes, please answer the following

1.) Recipient: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Fund Amount: \_\_\_\_\_ Year Awarded: \_\_\_\_\_

Name of Program: \_\_\_\_\_

2.) Recipient: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Fund Amount: \_\_\_\_\_ Year Awarded: \_\_\_\_\_

Name of Program: \_\_\_\_\_

3.) Recipient: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Fund Amount: \_\_\_\_\_ Year Awarded: \_\_\_\_\_

Name of Program: \_\_\_\_\_

# HISTORICAL COMMERCIAL FAÇADE GRANT APPLICATION

## LEGAL AUTHORIZATION FROM THE OWNER:

As the legal owner of the property located at \_\_\_\_\_, I hereby grant authorization to complete the façade improvements indicated on this application. **My proof of ownership is attached, along with proof that my property taxes due are paid.**

\_\_\_\_\_  
Signature of Property Owner                      Printed Name                      Date

\_\_\_\_\_  
Signature of Property Owner                      Printed Name                      Date

## I acknowledge the following:

- All statements provided in the application are, to the best of my knowledge, true and any misrepresentation will void any subsequent Grant Agreement and or/funding.
- The Historic Commercial Façade Grant (HCFG) Program must be used for the project described in this application. A Grant Agreement must be signed before entering into any contracts, purchasing any materials, or performing any work included in the façade grant project. I understand that failure to comply with the Grant Agreement may result in losing my eligibility to receive funds.
- The City of Evansville Department of Metropolitan Development (DMD) is obligated only to administer the grant procedures and is not liable to the applicant, owner, or third parties for any obligations or claims of any nature growing out of, arising out of, or otherwise related to the project or application undertaken by the applicant and/or owner. Additionally, all required permits are the responsibility of the owner/applicant.
- Acceptable proofs of payment of an eligible invoice include: 1 - A copy of the front and back of a cancelled check (this is the preferred method of the proof of payment); 2 - A cash payment receipt from the vendor/contractor containing the vendor/contractor's name, the date the payment was made, the amount paid, a memo line stating what the payment is purchasing, and a signature of the vendor/contractor's representative; 3 - A credit card statement showing the facade grant eligible charges, along with a print-out showing payment of these charges.
- Any unapproved changes to project plans as stated in the approved scope of work will void the grant and result in non-payment of funds. If changes to the scope of work are necessary, it is the responsibility of the Grant Recipient to immediately contact the DMD in writing for additional project review and written approval before continuing with the project.
- Funding awards cannot generally be increased after notification of the initial award; however, the DMD may consider an increase dependent upon the reason for the desired increase and the availability of funds.
- Reimbursement will occur after project completion or after each phase is completed (if phases are approved) and upon submission of appropriate invoices and proof of payment documents as outlined in the guidelines.
- If the Grant Agreement is not signed within 90 days of the grant application due date, the applicant understands that the grant funds and the grant approval are at risk of being revoked. Extensions due to extenuating circumstances may be given at the discretion of the Grant Administrator.

\_\_\_\_\_  
Signature of Applicant/Owner                      Printed Name                      Date

\_\_\_\_\_  
Signature of Applicant/Owner                      Printed Name                      Date

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## PROJECT INFORMATION

A detailed **scope of work and cost estimate** must be included for the application to be complete. It must adequately describe the work to be done, services needed, and products required in completing the façade grant project.

### Scope of Work and Cost Estimate Façade Eligible Costs Only (*Sample*)

1. Windows:	
• Replace all four (4) storefront windows on the first story, west side.	
• Windows to match existing size of approximately 5' x 8'.	
• Windows to be dual pane, clear glass, with no tinting.	
	\$3,500.00
2. Front Door:	
• Replace the front door on the west side with a commercial grade door.	
• Door to be ¾ glass and ¼ wood, with painted wood trim.	
	\$500.00
3. Paint west side of building:	
• Scrape west side of building and remove all loose material.	
• Prime all areas that reveal original cinderblock surface with a latex primer.	
• Paint entire west side of building with two finish coats of a high grade exterior latex paint.	
• Paint window and door frames in complimentary accent color of high grade exterior paint.	
• Colors to be determined by FDC.	
	\$3,000.00
4. Lighting:	
• Install 2 period appropriate lighting fixture flanking front west side entrance.	
• Fixture to be approved by FDC.	
	\$800.00
5. Signage:	
• Design and Install metal sign above front door.	
• Sign should be approximately 2.5' x 3', two sided	
• Sign should be suspended from wrought iron bracket	
• Design and Install 15" x 18" decal to window right of front door	
	<u>\$1,350.00</u>
Total Eligible Project Cost:	\$9,150.00
Grant Amount Request:	\$4,575.00

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## **PROJECT NARRATIVE** (please limit Project Narrative to 4 pages)

**Provide a description of the improvements that are to be made with grant proceeds to upgrade the building for commercial usage. Include information as to how these façade changes will benefit the business and the community. For business start-ups, please attach a business plan and two years of financial projections.**

**If in the last year you have made building improvements to the façade, site, or interior of your property or place of business that will not be included in costs associated with the grant or if you plan to do such improvements within the next 12 months, please give a brief description and accounting of costs. It is important to include these activities as it demonstrates an additional investment and increased leverage towards the funds supplied by the City.**

What are the total costs of improvements already made? \_\_\_\_\_

What are the estimated of costs of improvements expected to be made? \_\_\_\_\_

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## **TIMELINE**

Please indicate a proposed timeline for the project taking into account, design review, issue of bid requests, permitting and actual construction. It is desired that all Grant Agreements will be signed within two months of initial grant award and all approved projects will start construction within two months of signing the Grant Agreement. All activities, including receipt of grant funds, are expected to be completed within one year.

### **WARNING**

Project improvements that are part of this Historic Commercial Façade Grant application shall not be started prior to the applicant having a signed Grant Agreement and Purchase Order from DMD. This includes entering into any agreements or contracts with contractors or purchasing materials for these improvements. Starting the project prior to having a signed Grant Agreement with the City will result in either a total or partial loss of awarded grant funds.

### **Timeline (*Sample*)**

Submit Grant	October 31, 2019
Receive Preliminary Notice of Grant Approval (4 weeks)	December 2, 2019
Refine Design with FDC & Prepare Bid Specifications (2 weeks)	December 13, 2019
Bids Request (3 weeks)	January 3, 2019
Sign Grant (1 week)	January 10, 2020
Receive Notice to Proceed (1 week)	January 17, 2020
Order & Receive Materials (4 weeks)	February 14, 2020
Secure Permits (2 week)	February 28, 2020
Replace Door	March 6, 2020
Replace Windows	March 6, 2020
Paint Façade (1 week)	March 13, 2020
Install Lighting	March 20, 2020
Install signage	March 27, 2020
Grant Administrator Inspects work	March 31, 2020
Submit Detailed Invoices to City for Reimbursement	April 10, 2020
Receive Reimbursement	April 30, 2020

# HISTORICAL COMMERCIAL FAÇADE GRANT APPLICATION

## APPLICATION CHECKLIST

Item	Check When Complete	Office Use Only
Applicant verified property is within Promise Zone		
Applicant has verified that property contributes to the historic fabric of the neighborhood in which it is located		
Completed Application		
Schedule A: Signed Legal Authorization from the Owner		
Schedule B: Obtained detailed Scope of Work & Cost Estimate		
Schedule C: Included a photograph of building showing façade and areas to be improved under the grant		
Schedule D: Provided sketches or drawings of proposed work to be performed		
Schedule E: Provided a narrative of proposed improvements to be included in the grant and any additional improvements to the structure and site		
Schedule F: Completed a Timeline		
Schedule G: Provided Proof of Ownership - copy of deed		
If applicant is not the owner of building, include a letter of consent from owner allowing for grant		
Schedule H: Attach proof of Property Tax Paid to Date		
Schedule I: Provide copy of lease agreements with tenants		
Schedule J: Include a Financial Commitment Letter demonstrating 50% of project costs are available		
Schedule K: Attach a Business Plan including description of business, brief description of market competition and 2 years of income projection		