Clawson DDA Business Assistance Grant Application

| Assessor Parcel Number(s) | | | | |
|--|--------------------|---------------------------|--------------|--|
| Name of Business at Project | | | | |
| City of Clawson Business Lic | cense Number | | | |
| | | | | |
| APPLICANT INFORMATION | <u> 1</u> | | | |
| Name of Applicant | | | | |
| le proprietorship partnership corporation | | | | |
| Applicant Business Address | | | | |
| Contact Information: | | | | |
| Business Phone | | Cell | | |
| Email | | | | |
| Is Applicant the property owr | ner or a tenant? | Owner | Ienant | |
| Lease Expiration Date Option to Extend:yes | no How I | ong vre | | |
| Option to Extendyes_ | 110 110W1 | Long yrs | | |
| PROPERTY INFORMATION | I | | | |
| THO EITH IN OTHER | <u>.</u> | | | |
| Property Owner's Name (if d | ifferent from appl | icant) | | |
| Property Owners Address | | | | |
| Contact Information: | | | | |
| Business Phone | | Cell | | |
| Email | | | | |
| | | | | |
| TYPE OF GRANT | | | | |
| Technical Assistance: | | | | |
| Physical Improvemen | t: | | | |
| Sign | | | | |
| Facade; check | all that apply | | | |
| front | side_ | rear | | |
| | | | | |
| If the grant sought is a Techr | nical Assistance C | arant, how will the funds | be utilized? | |
| | | | | |
| | | | | |
| | | | | |
| Estimated Cost for Technical | ASSISTANCE | \$ | | |

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If the grant sought is a Physical Improvement Grant, what type of exterior improvement is proposed? Please place a check mark beside the improvements you are making and give estimated costs for each.

| | Check Below | Estimated Cost | | |
|---|---------------------------------|--------------------------|--|--|
| Signage | | | | |
| Facade repair | | | | |
| Awning | | | | |
| Lighting | | | | |
| Window replacement or repair | | | | |
| Door replacement or repair | | | | |
| Masonry cleaning and repair | | | | |
| Re-design of storefront | | | | |
| Hardscape | | | | |
| Other | | | | |
| If Other, please describe: | | | | |
| Total Estimated Cost of Physical Impro | ovements: \$ | | | |
| *Note: Facade Grant Applicants leas permission from the property owner t an awareness of the rules and requir | to apply for a facade grant. Th | | | |
| Have all of the necessary financial resources been secured including these grant funds which would be reimbursed to you? Yes No | | | | |
| f applying for a Facade Improvement Maintenance Agreement with the Clav maintained Yes No | = = = | | | |
| certify that the information contained correct and accurate as of this date. | in this application is, to t | he best of my knowledge, | | |
| Name | | ate | | |

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The following attachments should accompany any Business Assistance Grant:

- completed grant application form
- •copy of a valid city business license, if a business owner
- ·evidence of ownership or copy of executed lease
- •proof of payment of property (real & personal) taxes, utilities and other city accounts
- •specifications needed to understand the scope of the project, including architectural plans and/or sketches as needed

Physical Improvement Grants will also require the following:

- copy of certificate of property & liability insurance
- •three cost estimates from licensed contractors not obligated to accept the lowest
- •color schemes proposed for the exterior improvements
- •applicants leasing their space must provide a notarized letter with permission from the property owner indicating an awareness of the rules and requirements of the program