Façade Grant Application

Applicant Information

Name: _____

Mailing address: _____

Email: _____

Phone: _____

Business Information (if applicable)

Business name: _____

Business owner(s) name: _____

Mailing address: _____

Email: _____

Phone: _____

Building Information

Building address: _____

Building owner(s) name: _____

Mailing address: _____

Email: _____

Phone: _____

Project Information

Proposed façade changes (attach additional sheets if needed):

_____

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Estimated cost: _____

Amount of matching grant assistance requested: _____

Grant Guidelines

1) The grant application must be submitted in paper form by 8/15/2020 at the Crown Realty office located at 101 E. Wall St.
2) All applicants will be notified by 8/20/2020 of grant approval or disapproval.
3) The grant will be a 100% match of the recipients costs up to an agreed amount between $250 and $2,500.
4) Grant money will only cover work done to the front exterior of the building.
5) Grant money will not cover any expenses prior to grant approval.
6) The grant recipient and building owner will be required to sign an agreement.
7) The facade work must be completed within the timeline ending 11/15/2020.
8) The grant recipient will have to prove the cost of the work with receipts and/or invoices. The expenses must be based on actual costs and not donated material or "in-kind" labor.
9) The Design Committee of Love the Harrisonville Square will inspect the completed work to verify it matches the grant value plus the recipients matching cost.
10) The grant recipient will have their money reimbursed after completion of the final inspection and verification of costs.
11) The applicant shall obtain all necessary permits and approvals prior to commencing any work. All required inspections must be completed and approved by the required officials.
12) If the applicant is not the building owner, the building owner must also sign this application to acknowledge their consent and understanding of the proposed project.

Applicant's Acknowledgement

I have read and understand the attached grant guidelines. I understand that this is a matching grant program and that money is granted on a reimbursement basis following completion of work. I also understand that building improvements not approved by the Design Committee of Love the Harrisonville Square will not be funded.

Applicant's name (please print): _____

Applicant's signature: _____ Date: _____

Building Owner's Acknowledgement

I, the building owner, have read and understand the attached grant guidelines. I have been informed of the applicant's intention to perform the improvements described in the attached documentation and I approve the proposed improvements.

Building owner's name (please print): _____

Building owner's signature: _____ Date: _____

If you have questions please contact Cheryl Bush or Bob Wiseman of the Love the Harrisonville Square Design Committee:

Cheryl Bush: cherylbush44@yahoo.com | 816-797-7900

Bob Wiseman: wisemanrd@centurylink.net | 816-812-3111

Please hand deliver completed application to:

Crown Realty at 101 E. Wall St