



## Downtown Dover Partnership Grant Application Façade Improvement Matching Grant

Property Address and Tax Parcel ID# \_\_\_\_\_

Business Name \_\_\_\_\_

Business Address \_\_\_\_\_

Property Owner Name \_\_\_\_\_

Property Owner Address \_\_\_\_\_

Property Owner Telephone and Email \_\_\_\_\_

I hereby certify that I am the owner of the building for which this façade grant is requested, and that the foregoing applicant, in filing this application for the approval of the Downtown Dover Partnership, is acting with my consent.

Property Owner Signature \_\_\_\_\_

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

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

Applicant Address \_\_\_\_\_

Applicant Telephone and Email \_\_\_\_\_

Applicant Signature \_\_\_\_\_

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

Amount Requested (Up to 50% of eligible expenses with a Max. of \$5,000) \_\_\_\_\_

Estimated Total Cost of Project \_\_\_\_\_

Scope of Work: Describe project improvements/activities in detail. Include itemized cost estimates with samples of materials to be used, paint colors, renderings, plans, sketches, or drawings of the project area. Add attachments as needed. Photographs of existing conditions are required including overall façade view and details of work areas.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Photographs     Itemized Cost Estimates     Plans or Drawings     Materials Samples

### For Office Use Only

Grant # \_\_\_\_\_ Complete Application Rec'd \_\_\_\_\_

Application Forwarded to Committee \_\_\_\_\_ Grant Award \_\_\_\_\_

Agreement Date \_\_\_\_\_ Request for Reimbursement Rec'd \_\_\_\_\_

Work Completed & Confirmed \_\_\_\_\_ Grant Paid \_\_\_\_\_