

CITY OF AUBURN
DOWNTOWN FAÇADE IMPROVEMENT GRANT PROGRAM

APPLICATION

APPLICANT INFORMATION

Name: _____

Business Name: _____

Business Address: _____

Phone: _____ Email: _____

Contact Address: _____
(if different from above): _____

Social Security Number/Tax Identification Number: _____

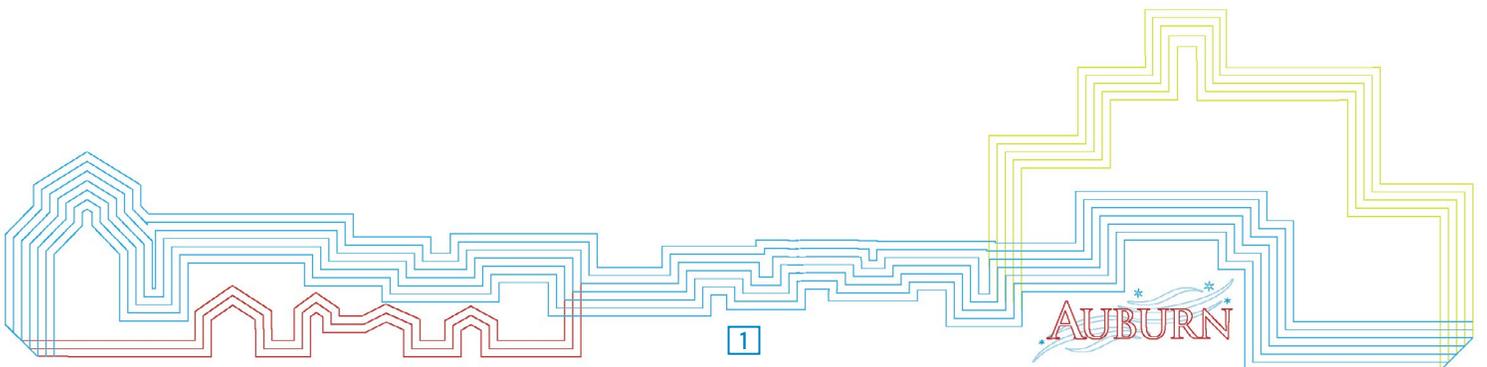
Business License Number: _____

Assessor's Parcel Number: _____

PROPERTY OWNER INFORMATION (if not applicant)

Name: _____

Phone: _____ Email: _____

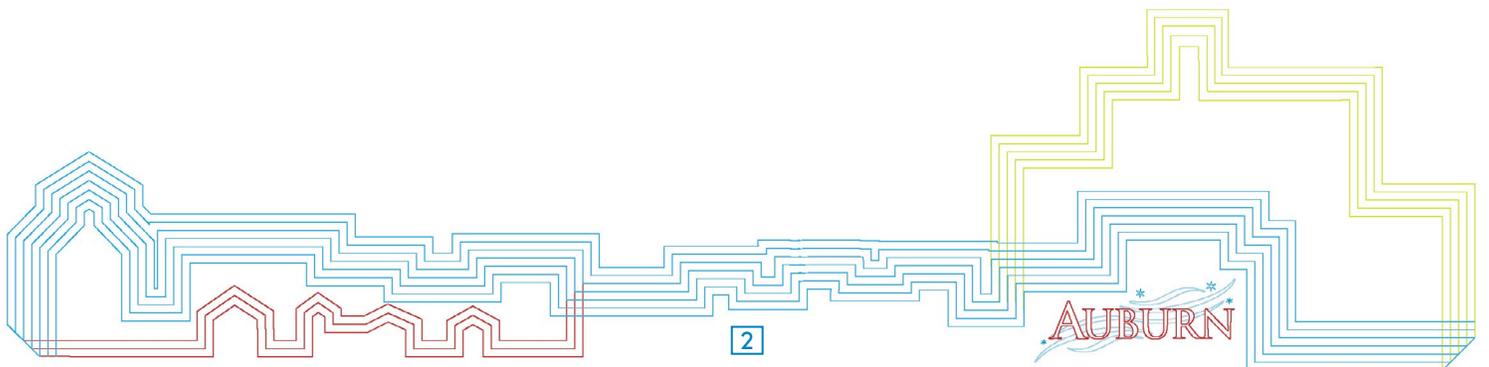


DESCRIPTION OF PROPOSED STOREFRONT IMPROVEMENTS

LIST OF IMPROVEMENT ASSOCIATED COSTS

TECHNICAL ASSISTANCE AND DESIGN SERVICES			
NAME OF COMPANY (ENGINEER, ARCHITECT, DESIGNER)	SERVICES BEING PROVIDED	FEE (EITHER FLAT OR NOT TO EXCEED)	TOTAL COSTS
		\$	\$
		\$	\$
		\$	\$
		\$	\$
TOTAL COSTS FOR TECH AND DESIGN			\$

CONSTRUCTION MATERIALS AND LABOR					
NAME OF COMPANY (CONTRACTOR, MATERIAL PROVIDER)	DESCRIPTION OF WORK	MATERIAL COSTS	LABOR COSTS	TAX	TOTAL COSTS
		\$	\$	\$	\$
		\$	\$	\$	\$
		\$	\$	\$	\$
		\$	\$	\$	\$
TOTAL COSTS FOR CONSTRUCTION					\$

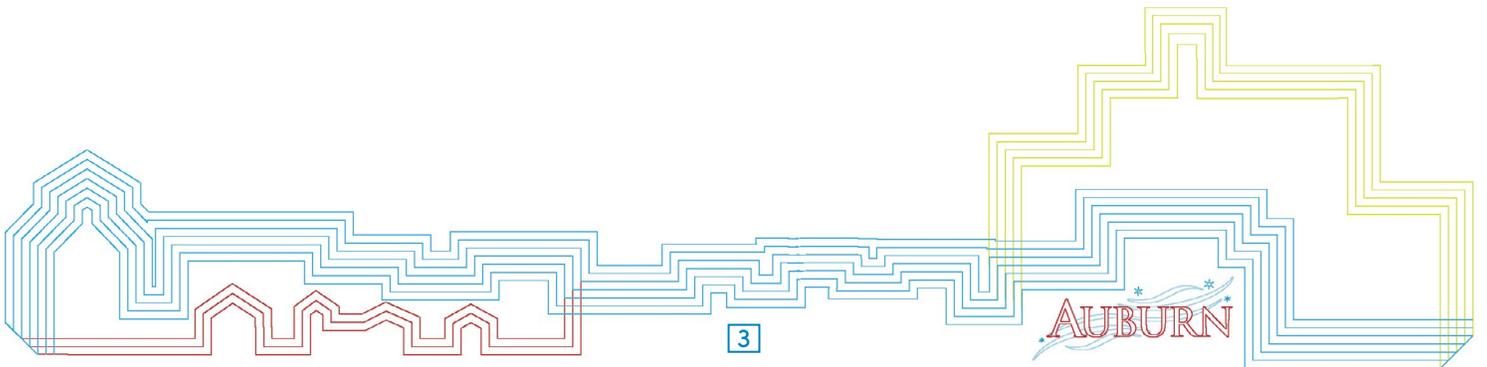


ESTIMATED TOTAL COSTS OF STOREFRONT IMPROVEMENTS		
		TOTAL COST
	DESIGN SERVICES	\$
	MATERIAL, LABOR, AND TAX COSTS	\$
	TOTAL PROJECT COSTS	\$

GRANT REQUEST		
PLEASE USE CALCULATOR PROVIDED ON WEBSITE		TOTAL COST
	TOTAL PROJECT COSTS	\$
MINUS (-)	PROPERTY AND/OR BUSINESS OWNER RESPONSIBILITY	\$
	GRANT REQUEST AMOUNT	\$

SOURCE(S) OF MATCHING FUNDS & IN-KIND CONTRIBUTIONS			
CASH/IN-KIND	DESCRIPTION OF WORK/SOURCE OF FUNDS		AMOUNT
			\$
			\$
			\$
			\$
	TOTAL OWNER RESPONSIBILITY		\$

PROJECTED PROJECT MILESTONES		
PROJECT PHASE	ANTICIPATED DATE	NUMBER OF WEEKS
Kickoff Meeting		
Permit Application		
Construction Start		
Construction Completion		
Final Inspection		
Total Project Duration		



STATEMENT OF UNDERSTANDING & CERTIFICATION BY APPLICANT

The applicant understands that the City of Auburn must approve the proposed exterior storefront improvements. During the application process, the City will require the applicant to be available for a site visit with City of Auburn officials. Certain changes or modifications may be required by the City of Auburn prior to final approval. A commitment of funds will not be processed prior to the City’s receipt and approval of bids for the established scope of work. Unless otherwise agreed, work must be approved by a licensed contractor, approved sign maker, or other recognized professional or company. Any work commenced prior to a commitment letter being issued will not be eligible for reimbursement, and any work deviating from the approved work must be pre-approved by the City in order for the work to be eligible for reimbursement.

The applicant certifies that all information in this application, and all information furnished in support of this application, is given for the purpose of obtaining a Storefront grant and is true and complete to the best of the applicant’s knowledge. If the applicant is not the owner of the property to be rehabilitated, or if the applicant is not the sole owner of the property, the applicant certifies that he/she has the authority to sign and enter into an agreement to perform the rehabilitation work on the property. Evidence of this authority must be attached. Verification of any of the information contained in this application may be obtained by the City of Auburn from any available source.

Applicant Signature: _____ Date: _____

PLEASE RETURN THE APPLICATION AND SUPPLEMENTAL INFORMATION TO:

Permit Center
City of Auburn
25 W Main Street
Auburn, WA 98001

Contact:
Lauren Flemister, Urban Design Planner
253.931.3092 – Telephone
lflemister@auburnwa.gov – Email

