



Neighborhood Façade Improvement Program

Application Form

Name of Applicant: _____

Name of Business: _____

Type of Business: _____

Address of Project: _____

Applicant Contact info:

Ph: _____ Cell: _____

Fax: _____

Email: _____

Applicant is the Property Owner Business Owner Other _____

If you are not the property owner, please have the property owner or an authorized representative co-sign this application. If more than one property owner, please attach a list with names and addresses of each owner. All owners must sign the petition.

Property Owner Name: (if different) _____

Property Owner Address: _____

Property Owner Phone: _____

Property Owner Signature: _____

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Please provide a description of the scope of work to be accomplished on this façade improvement project:

Describe the type of business/businesses operating in the building to be improved:

Describe the service area of business or businesses operating in building to be improved:

Describe how the business serves the low to moderate income neighborhoods and persons:

