



Downtown Belton Main Street Façade Improvement Grant Program

Application

Applicant Name: _____ **Date:** _____

Mailing Address: _____ **City:** _____ **Zip:** _____

Applicant Phone #: _____ **Applicant Email:** _____

Name of Business: _____

Address where work will be performed: _____

Status of Applicant: Building Owner
 Tenant: **Building Owner's Name:** _____
Building Owner's Phone: _____

Date of Building Construction (Age of Building): _____

Number of Stories _____ **Is Building Located on a Corner?** Yes No

Is this property listed on National Register of Historic Places? Yes No

Is the first floor of the building currently occupied? Yes No

Name of Business: _____

Are any upper stories currently occupied? Yes No

Name of Business and/or Occupant: _____

Type: Retail Service Professional Residential Other

Phone Number of Occupants: _____

Proposed Start Date: _____ **Expected Completion Date:** _____

Type of Work Proposed (Check all that apply):
 Cleaning Window/Door Repair

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- Masonry Repair
- Painting
- Signage
- Awnings
- Building Front Improvements
- Removal of materials
- Cornice Repair
- Reconfiguring of Doors
- Display Lighting
- Other

Total cost of proposed grant project: \$ _____

Amount of grant funds being requested: \$ _____

Amount of Matching funds being committed: \$ _____

General Contractor Name: _____

Mailing Address: _____ City: _____ Zip: _____

Contact Phone #: _____ Business License #: _____

Subcontractors	Name	Phone #	Belton Business License	
Electrical:	_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Sign:	_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Masonry:	_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other:	_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No

For Sign Projects Only:

Projecting Sign Wall Sign Awning Total # Existing Signs _____

Existing Signs on Property No Yes If yes, what type?

Repair/replacement of existing sign? No Yes

If yes, describe: _____

Illuminated from internal source Illuminated by separate ground lighting

Non-illuminated Blinking or Flashing Sign

Sign Dimensions: Height: _____ Width: _____ Area _____ Sq Ft

Wall Dimensions: **Height:** _____ **Width:** _____ **Area:** _____ **Sq Ft**

The cumulative size of all signs cannot exceed 30% of the wall on which they are attached.

For Awnings and Projecting Signs Only:

Distance between leading edge or sign/awning and curb line: _____

FOR ALL APPLICATION, PLEASE ATTACH THE FOLLOWING ITEMS TO COMPLETED FORM

- Legal description of property where work will be performed
 - Written description regarding the existing condition of building with photographs of current building condition
 - A detailed written scope of proposed work:
 1. For signs and awnings, include description that includes, but is not limited to: size, color, logo, attachment to building (including screws/bolt size, length, location, etc.), and electrical information for lighted signs
 2. For masonry repair: describe process of cleaning or repair
 3. For painting: provide type of paint and color, including photo of proposed look
 4. For window and door repair: include description of existing and proposed positioning and design
 5. Include photos of before and architectural sketches for proposed after look when possible
 - Detailed cost estimate of proposed work using attached budget worksheet (Must receive quote from at least two contractors)
 - Two copies of every plan, drawing and specifications being submitted
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I have carefully read and understand ALL rules and guidelines of the Downtown Belton Main Street Façade Improvement Program included in this application. I understand that the Downtown Advisory Board must review AND approve the application prior to beginning construction. I understand that failure to comply with the rules and guidelines specified within this application can result in refusal of fund reimbursement. I understand that my project must be inspected and approved by the City of Belton and the Downtown Belton Main Street Board prior to receiving the reimbursement. I understand that any changes made to the original project application must first be approved by the Design Committee. Failure to gain approval before continuing work can result in disqualification from the program. I affirm that the information provided in this application is true and accurate to the best of my knowledge.

I acknowledge that the Downtown Belton Main Street Board is not liable to the applicant, owner or third parties for any obligations or claims arising from this project or application

I have read and understand the conditions of the Downtown Belton Main Street Façade Improvement Grant Program Rules and Guidelines and agree to these conditions.

Applicant Signature: _____ **Date:** _____

Building Owner Signature: _____ **Date:** _____

Estimate Summary Sheet

Please attach all bids to this application on the official letterhead of the contractor providing the bids. The bids should be categorized into the type of work being done based on the checklist on page 1.

Address of Property to be Improved: _____

Itemized Description of Work: _____

Bid #1 Submitted By: _____ Amount: _____

Bid #2 Submitted By: _____ Amount: _____

Itemized Description of Work: _____

Bid #1 Submitted By: _____ Amount: _____

Bid #2 Submitted By: _____ Amount: _____

Itemized Description of Work: _____

Bid #1 Submitted By: _____ Amount: _____

Bid #2 Submitted By: _____ Amount: _____

Itemized Description of Work: _____

Bid #1 Submitted By: _____ Amount: _____

Bid #2 Submitted By: _____ Amount: _____

Please circle or highlight the bid you prefer for each itemized description of work listed above.

At the end of project, proof of payment via invoices and receipts, as well as before and after photos will be required to receive reimbursement.

Budget Worksheet

Applicant Name: _____ Date _____

Name of Business: _____

Address where work will be performed: _____

	Column A: Amount Paid for By Grant Funds	Column B: Amount Paid for By Applicant Match Funds	Column C: Total Cost (A + B)
Cost of Materials			
Awning			
Sign			
Supplies			
Other (please detail)			
Contractor Costs			
Masonry Repair			
Tuck Pointing			
Electrical			
Carpentry			
Windows/Doors			
Painting			
Removal			
Other (please detail)			
Equipment Rental Fees			
Other Expenses (Please Detail)			
Column Totals			