



## Downtown Façade Improvement Program Application

### Overview

The City's pilot Facade Improvement Program was established in June 2015. There are \$50,000 in matching funds available for improvements to downtown building facades. Applications are accepted and reviewed on a rolling basis until funds are expended.

### Applicant Information

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

Address \_\_\_\_\_

\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Are you the property owner? \_\_\_\_\_

If no, please complete the following and attach a letter from property owner authorizing this application:

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

Address \_\_\_\_\_

\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

### Project Description

Building Address \_\_\_\_\_

Project Description \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**(Attach appropriate drawings, specifications, plans & profiles of proposed improvements)**

Estimated cost of proposed improvement: \_\_\_\_\_

Is the building currently occupied? \_\_\_\_\_

Is the building more than 30 years old? \_\_\_\_\_

Is the building owner a resident of the City of Wadsworth? \_\_\_\_\_

Does the building owner also own the occupying business? \_\_\_\_\_

Do the improvements address the front façade? \_\_\_\_\_

Does the financial grant request leverage more than 1:1 of applicant funds? \_\_\_\_\_

**Certifications & Acknowledgments**

I certify that the information provided above is accurate to the best of my knowledge and understand that all costs for which I seek reimbursement must be documented. Under no circumstances will the reimbursement amount exceed 50% of the total costs incurred by the applicant or \$2,500, whichever is less for eligible projects or 50% of total costs incurred or \$5,000, whichever is less for priority projects.

I understand that this application must be approved by the Façade Improvement Program Committee before any expenditures are made and that any cost incurred prior to approval by the FIPC are not eligible for reimbursement. I further acknowledge that all façade improvements shall be approved by the Architectural Design Committee of the City Planning Commission before the any work may proceed.

I understand and acknowledge that all work must be carried out in accordance with all applicable local, state, and federal laws; that I, my contractor or other party acting as my agent shall be responsible for obtaining all permits required by this project; and that the work shall be completed in substantial conformance with the proposal approved by the Façade Improvement Committee and the City of Wadsworth ("City").

I further understand in order to receive reimbursement from this program, I shall be responsible for paying the contractor(s) directly; and that I must submit copies of all invoices, payment vouchers, cancelled checks and other evidence as required to document that all parties working on this project have been paid in full.

I have reviewed the "Program Guidelines" and hereby acknowledge that no reimbursement shall be made for work that is not eligible under the guidelines or that was completed in a manner that does not comply with the guidelines. I agree to repay the City if any amounts reimbursed to me are found to have been reimbursed in error.

I hereby release the City from any liability and relinquish any claim against the City for additional compensation related to the façade improvements described above. Further, I agree to indemnify the City, and their respective officers, agents and employees, and hold the City harmless in relation to any claims related to work performed by me or on my behalf by any contractor or sub-contractors in relation to the façade improvements described above.

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

\_\_\_\_\_  
Date

For Office Use Only: Received: \_\_\_\_\_

Reviewed by Façade Committee: \_\_\_\_\_

Status: Approved Denied