

BEAUTIFY THE BOROUGH
Spring Grove Borough Façade Improvement Grant
Application

1. Property Address: _____
2. Owner's Name: _____
Mailing Address: _____
Phone Number: _____
E-Mail _____
3. Contact Person/Project Coordinator: _____
(if different from above)
Contact Mailing Address _____
Telephone Number: _____
E-mail: _____
4. Brief description of the proposed work and reason for doing the project:

5. Total Project Cost Estimate: \$ _____
6. Amount of grant funding Requested (max. 5000): \$ _____
7. Include with this application form:
 - ☐ Description of the project, including a drawing showing building and location of proposed work, or a photo with notes showing where work will take place.
 - ☐ Two cost estimates, including type of materials proposed
 - ☐ If roof or painting involved, provide information re: colors
 - ☐ If architectural plans and specifications have been prepared for the proposed work, enclose a paper or digital copy.

8. Indicate the project elements and the approximate amount of time each element will require. Use extra sheet if needed:

Project Element	# of	Days or weeks?
1.		
2.		
3.		

Budget – Detailed Work/Cost Breakdown

There can be significant differences in cost estimates.

Please review the estimates to make sure that they both contain the same items and materials, then indicate which contractor you intend to use.

Match is 50% owner, 50% Borough funds, up to \$5000.

Any additional expense will be borne by the owner.

Contractor that will be utilized:_____

If this is not the lower bid, and there is more than \$500 difference in the bids, please indicate why you have a preference for this contractor

Line Items – Project elements <i>(e.g. cleaning/repointing brick, painting window frames, replace porch</i>	Grant Funds Requested	Applicant's Cash	Total
1.			
2.			
3.			
4.			
5.			
TOTAL			
Amt of Grant Requested: \$ _____ + Matching Contribution : \$ _____ = Total Project Cost: \$ _____			

Grant Funds recommended: for Work Group use only
\$ _____

GRANT APPLICATION AGREEMENT

I, the undersigned, have read, understand, and agree to abide by the conditions and terms that are set forth in the Spring Grove Borough **FAÇADE RESTORATION PROGRAM GUIDELINES** regarding the Spring Grove Borough grant monies.

I understand that if I do not abide by the terms and conditions set forth, this application will be null and void and any grant monies will be forfeited.

Owner

Date

Witness

Date

Date rec'd Borough Staff

Please attach photos of existing building, and any specific conditions related to the request for funding. If you have information about the history of the building, please attach it, as well.