SAMPLE Maryland DHCD Façade Improvement Program Application

Maryland Department of Housing and Community Development Sample Façade Improvement Program Application

Overview

The Façade Improvement Program provides funding to support consistent, attractive designs for commercial corridors in order to bolster economic vitality and stimulate new private investments. Applicants must complete the following application and attach all required documents in order to be considered for competitive review. Projects most likely to be successful during competitive review will:

- Contribute to the overall harmony and/or attractiveness of the community's-built environment
- Support goals outlined in the Sustainable Communities Action Plan
- Conform with any other relevant local plans or guidelines (such as those of a Local Historic District)
- Improve and/or restore historical features
- Include a timeline for completion in less than 120 days from the date of award
- Support businesses that serve important community needs
- Create significant revitalization impact with minimal investment
- Include matching funds from business owners
- Support legacy and minority businesses
- Demonstrate a commitment to excellent design

Required Attachments

The following information must be submitted with this application in order to be considered for funding.

- ____ Evidence of site control (copy of deed including all attachments and legal description, purchase contract, or lease agreement).
- ____ Photographs that show existing conditions of the building to be improved.
- ____ Written consent from the landlord and lessee (as applicable).
- ____ A project description and two cost estimates for proposed improvements (including detailed sketches of improvements, if appropriate).
- A screenshot from the Maryland Department of Assessments and Taxation website showing that your business is in good standing with the State as of the date of your application (<u>Business Express Entity Search</u>).

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General Information

Applicant Name	
Business Name	
Project/Business Address	
Phone Number	
Email Address	
Property owner's name and a	address (if different)
Property owner's phone num	ber and email address
•	erty owner, please have the property owner or an authorized oplication where indicated in the General Conditions.
Proposed Façade Improveme	ents
Please describe the proposed a detailed description of eligit	d improvements to the property. Refer to the program guidelines for ble uses of funds.
Proposed Improvement:	
Total Project Cost:	
Start Date:	Estimated Completion Date:
Signature:	Date:

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General Conditions

- 1. The applicant is not an agent, employee or subcontractor of [Political Subdivision].
- 2. The applicant shall be solely responsible for all the safety conditions and compliance with all safety regulations, building codes, building permits, Historic Preservation Commission requirements, ordinances, and other applicable regulations.
- 3. Work completed prior to the receipt of a letter of commitment is ineligible for funding.
- 4. The applicant will not seek to hold [*Political Subdivision*] and/or its agents, employees, officers and/or directors liable for any property damage, personal injury, or other loss related in any way to the Façade Improvement Project.
- 5. The applicant agrees to provide evidence of expenditures for all approved improvements, such as receipts or canceled checks, to the program administrators.
- 6. The applicant shall satisfy any requirements detailed in policy documents associated with the Maryland Department of Housing and Community Development's Maryland Façade Improvement Program (MFIP).
- The applicant shall be responsible for maintaining valid and sufficient insurance coverage for property damage and personal injury relating to the Façade Improvement Project.
- 8. The applicant agrees to return a pro-rated amount of the grant money received if the improvement is removed within two years.
- 9. The applicant agrees to maintain the property and improvements including, but not limited to, promptly removing graffiti, sweeping, and shoveling in front of the property.

Applicant Signature: _____ Date: _____

If the Applicant is not the property owner, the property owner or an authorized representative		
must review and sign below. As the owner of the property at		
have reviewed the above application and authorize the operator of		
to perform the improvements described above.		

Signature of property owner	
or authorized representative:	Date:
Signature of lessee	
or authorized representative:	Date: