

Business Enhancement Grant Application



Applicant Information

Business Name	
Contact Person	
Property Address	
City State ZIP Code	
Phone	
Fax	
E-Mail Address	
Type of Business	
Term of Lease (if applicant is not the Owner)	

Property Owner Information

Name	
Street Address	
City State ZIP Code	
Phone	
Fax	
E-Mail Address	
Years Owned	
Type of Ownership	

➡ If applicant is not the owner, complete and attach the permission agreement from property owner.

➡ Both the applicant and the property owner must complete and attach the attached affidavit.

Architect, Engineer and Contractor Information

Include the name and contact information for the architect/engineer/contractor that you are using or plan to use for the project.

Architect/Engineer/Contractor Company Name	
Contact Person	
Address	
City State ZIP Code	
Phone	
E-Mail Address	

Proposed Improvements to Property

Describe the proposed improvements to the property. Include plans and/or drawings if available at this time. Refer to the Business Enhancement Grant Program Guidelines for details on eligible and ineligible project costs:

➔ Attach a current photograph(s) clearly displaying the building and property that will be included in the improvements to your application.

Grant Request

Identify the estimated amount of your grant request below. If you have bids or proposals for the work, attach them to your application. Competitive proposals to complete the property improvements are required prior to construction. Cost incurred before final grant approval by the City, with the exception of architectural and engineering fees, are not eligible.

The City will consider an application for a grant up to fifty percent (50%) of the total eligible project cost. ADI Façade Grant funds may cover up to 25% of the owner/applicant matching funds. Review the Business Enhancement Grant Program Guidelines for additional details on eligible project costs and matching funds.

City grant funds requested for property improvement project costs:	\$	<i>50% of eligible project costs with a maximum of \$7,000</i>
ADI Façade grant (if applicable)	\$	<i>Limited to 25% of owner/applicant matching funds</i>
Owner/Applicant investment for the property improvement project costs	\$	<i>50% of eligible project costs or 25% if using ADI Façade grant funding</i>
Total property improvement project costs	\$	

Agreement and Signature

By submitting this application, I affirm that the information set forth in it is true and complete. I have read and understand the Business Enhancement Grant Program Guidelines. I understand submission of an application does not constitute a guarantee for funding from the program. If this application is accepted, the applicant will be required to enter into a Grant Agreement with the City of Appleton Community Development Department.

Name (printed)	
Signature	
Date	

Grant Review

Thank you for completing this application form and for your interest in improving the Tax Increment Financing District #11 or #12 area.

Send your completed application and attachments to the staff contact noted below. All applicants will be contacted via email, letter or by phone to acknowledge receipt of the application.

If you have questions about this application or the Business Enhancement Grant Program Guidelines, please contact:

Lily Paul, Economic Development Specialist
City of Appleton Community Development Department
100 N. Appleton Street
Appleton, WI 54911
(920) 832-6468 phone
(920) 832-6463 direct phone line
(920) 832-5994 fax
lily.paul@appletonwi.gov

Permission Agreement from Property Owner

Date: _____

City of Appleton
Community Development Department
100 N. Appleton Street
Appleton, WI 54911

Re: Application for Business Enhancement Grant at _____ (*insert address*)

Dear Community Development Director:

I hereby grant my permission to _____ (*insert applicant name*) to make application under the City of Appleton Business Enhancement Grant Program. I understand I will be required to jointly, with the applicant, enter into a Grant Agreement with the City of Appleton. I further grant my permission to _____ (*insert applicant name*) to complete the proposed improvements according to the Application.

I certify that I have received a copy of the Business Enhancement Grant Program Guidelines and Application from the applicant and I am fully aware of what is being proposed. I also certify that I am the legal owner of record and that I have the authority to grant this permission to _____ (*insert applicant name*).

Sincerely,

Signature

Printed Name

Affidavit for Business Enhancement Grant Program

We the undersigned hereby state there is no pending litigation against the City of Appleton by me, my company or any other instance in which I am directly involved.

If a grant is awarded, activities as proposed shall be completed as outlined in the Grant Agreement.

WITNESS:

Signature of Witness

Signature of Applicant

Address

Date

WITNESS:

Signature of Witness

Signature of Owner (required if the applicant is not the owner)

Address

Date