



**City of
Black River Falls**

TIF VI FAÇADE IMPROVEMENT GRANT PROGRAM

FOR OFFICE USE ONLY:

Date Received: _____	Amount Requested: _____
Date Reviewed: _____	Tax ID Number: _____

PROPERTY OWNER INFORMATION Check if Applicant

Name: _____ Year Purchased: _____

Address: _____

Telephone: _____ Email Address: _____

BUSINESS INFORMATION Check if Applicant

Business Name: _____

Primary Contact: _____

Address: _____

Telephone: _____

Type of Business: _____

Check the appropriate type of ownership:

- The business owns the property The business leases the property

PROPOSED IMPROVEMENTS

Describe the Storefront Façade Improvements:

Describe any other improvements, if applicable:

Estimated Cost of Improvements: \$ _____

Amount of funding from other grants: \$ _____

Grant amount requested: \$ _____

Have you engaged the services of a Contractor, Designer or Architect:

Yes No

Would you be able to complete the improvements this year:

Yes No

APPLICATION PROCESS

1. The following documents must accompany a completed application:

- a. Proof of property ownership or lease.
- b. Written consent from the property owner giving permission to conduct the façade improvements.
- c. Color photographs of existing storefront façade conditions.
- d. Two or more competitive proposals from contractors.
- e. Other supporting documentation deemed necessary by the Historic Preservation Committee or the Applicant.

2. Process after application submission

- a. A meeting will take place to go over the submitted improvement proposal to discuss grant expectations and to address grant concerns.
- b. After façade improvements are complete, the grant funds will be disbursed for reimbursement to the applicant after all of the following pieces of information have been submitted: Proof of Final Inspection by the Building Inspector (if applicable), A copy of the Final Invoice Received from Contractor, Photos of improvements, Proof of Payment to Contractor (i.e. receipt, invoice, etc.)
- c. The HPC reserves the right to refuse reimbursement in whole or part for work that does not conform to the program guidelines, the proposal submitted, and/or is not completed within 1 year of award.

APPLICANT ACKNOWLEDGEMENTS

- 1. The Applicant shall hold the City of Black River Falls, its officers, consultants, attorneys and agents harmless from any and all claims arising from or in connection with the Grant Program or its Application, including but not limited to, any legal or actual violations of any State or Federal laws.
- 2. The Applicant recognizes and agrees that the City of Black River Falls and the Historic Preservation Committee retain absolute authority and discretion to decide whether or not to accept or deny any particular Grant Applicant, and that all expenditures, obligations, costs, fees, or liabilities incurred by the Applicant in connection with the Grant Application are incurred by the Applicant at its sole risk and expense.
- 3. The Applicant acknowledges that they have read the TIF VI Façade Improvement Grant Program and understand that if the proposal is approved, they will make the above referenced improvements to the property within the specific time allowed.

The undersigned, a duly authorized representative of the Applicant, hereby certifies that the foregoing information is true, correct and complete as of the date hereof and agrees that the Applicant shall be bound by the terms and provisions herein.

APPLICANT'S SIGNATURE

DATE

PROPERTY OWNER'S SIGNATURE

DATE