



City of Utica Façade Improvement Loan Program Application

APPLICANT INFORMATION

Name of Applicant: _____ Application Date: _____

Telephone #'s: Work: _____ Home: _____ Cell: _____

Email: _____

Applicant Mailing Address: _____

Address of Property to be Improved: _____

Name & Type of Business: _____ Business ID#: _____

PROPERTY OWNER INFORMATION

Name of Owner: _____ Telephone #: _____

Owner Mailing Address: _____

Please attach a description of the proposed improvements to the property. Include sketches, plans, Code violation reports (if applicable) and current and/or historic photos if available.

Check applicable proposed improvements:

- | | |
|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| <input type="checkbox"/> Exterior painting | <input type="checkbox"/> Removal of inappropriate exterior finishes or materials |
| <input type="checkbox"/> Exterior building and sign lighting | <input type="checkbox"/> Awnings, new repairs or replacement |
| <input type="checkbox"/> Display area lighting | <input type="checkbox"/> Recessing/Reconfiguring exterior doors or entrances; new doors |
| <input type="checkbox"/> Sidewalks, stairs, steps, railings | <input type="checkbox"/> Window boxes, permanent planters |
| <input type="checkbox"/> Restoration of exterior finishes or materials | <input type="checkbox"/> Signs (new, repairing or replacing) |
| <input type="checkbox"/> Repairing or replacing windows | |

I hereby affirm that I have full legal capacity to authorize the filing of this application and that all information and exhibits herewith submitted are true and correct to the best of my knowledge. The owner invites City representatives to make all reasonable inspections, investigations and take pictures of the subject property during the process period associated with this application. I authorize the use of any pictures taken by the City of Utica. I also understand that in order for my request for funds to be approved, I must agree to work with, and follow the recommendations of the Department of Urban & Economic Development, and before starting any work, following approval of this application, I must complete a Downtown Façade Grant Program Agreement.

Signature of Applicant

Date

Signature of Owner

Date

Date Received: _____

Department of Urban and Economic Development

Program Coordinators: Jack Spaeth or Patti DeCarr

Phone: (315) 792-0181