



Historic District Living Grant

Date:		
Application fee:	\$50.00	<input type="checkbox"/> Paid

Contact Information

Name	
Mailing Address	
City, State, Zip	
Home Phone	
Cell Phone	
E-Mail Address	

Project Information

Property Address (Applying property)	
City, State, Zip	
Full Name of Legal Ownership Entity	
Mailing Address (If Different from above)	
City, State, Zip	

Property Information

Approximate Square Footage	
Approximate age of Property	
Number of Floors	
County Assessed Value	\$
Utility delinquency on property?	<input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No If none, please initial _____
Tax delinquency on property?	<input type="checkbox"/> Yes \$ _____ <input type="checkbox"/> No If none, please initial _____

Please attach a high resolution photo of the applying property to this application

Proposed Rehabilitation

- Please attach anticipated expenses (e.g. contractor quotes). Receipts prior to application submission date, will not be accepted
- Please attach a detailed explanation as to where applicant(s) will acquire match amount. If applicant(s) is not covering match amount from personal funds, please explain how applicant(s) match, will be financed. Please provide contact name(s) and information of financial institute being utilized for match amount.
- Please provide a timetable for the project, not exceeding twelve (12) months.
- Please provide an explanation as to how applying property will profit
- Please attach a detailed narrative of how the proposed project serves the needs of the community (Please note, the Historic District Review Board (HDRB) may permit applicant(s) to testify in support of an application, but shall be under no responsibility so to do). Please keep in mind that this grant application is competitive; therefore, the more information provided in this section, the better positioned applicant(s) will be.



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Legal Information

Any unresolved personal/business/judgments and/or unsettled lawsuits? Yes / No

If yes, please explain below:

Has the business, and/or any of the principals, been involved in bankruptcy and/or insolvency proceedings? Yes / No

If yes, please provide date of bankruptcy; Applicant's Attorney; a brief explanation:

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that submission of any false statements, omissions, or other misrepresentations made by me on this application may result in immediate dismissal of application.

Name (printed)	
Signature	
Date	

** Please supply the following attachments, with submission of HDLG Application: Building permit; Hazard insurance documentation; Copy of current deed; Personal financial statement (form attached); high resolution photo of the applying property **