

# Clawson DDA Business Assistance Grant Application

Address of Property \_\_\_\_\_  
Assessor Parcel Number(s) \_\_\_\_\_  
Name of Business at Project Address \_\_\_\_\_  
City of Clawson Business License Number \_\_\_\_\_

## **APPLICANT INFORMATION**

Name of Applicant \_\_\_\_\_  
sole proprietorship \_\_\_\_\_ partnership \_\_\_\_\_ corporation \_\_\_\_\_  
Applicant Business Address \_\_\_\_\_

Contact Information:  
Business Phone \_\_\_\_\_ Cell \_\_\_\_\_  
Email \_\_\_\_\_  
Is Applicant the property owner or a tenant? \_\_\_\_\_ Owner \_\_\_\_\_ Tenant  
Lease Expiration Date \_\_\_\_\_  
Option to Extend: \_\_\_\_\_ yes \_\_\_\_\_ no    How Long \_\_\_\_\_ yrs

## **PROPERTY INFORMATION**

Property Owner's Name (if different from applicant) \_\_\_\_\_  
Property Owners Address \_\_\_\_\_  
Contact Information:  
Business Phone \_\_\_\_\_ Cell \_\_\_\_\_  
Email \_\_\_\_\_

## **TYPE OF GRANT**

Technical Assistance: \_\_\_\_\_  
Physical Improvement:  
Sign \_\_\_\_\_  
Facade; check all that apply  
front \_\_\_\_\_ side \_\_\_\_\_ rear \_\_\_\_\_

If the grant sought is a Technical Assistance Grant, how will the funds be utilized?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Estimated Cost for Technical Assistance                    \$ \_\_\_\_\_

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If the grant sought is a Physical Improvement Grant, what type of exterior improvement is proposed? Please place a check mark beside the improvements you are making and give estimated costs for each.

	Check Below	Estimated Cost
Signage		
Facade repair		
Awning		
Lighting		
Window replacement or repair		
Door replacement or repair		
Masonry cleaning and repair		
Re-design of storefront		
Hardscape		
Other		

If Other, please describe: \_\_\_\_\_

Total Estimated Cost of Physical Improvements: \$ \_\_\_\_\_

**\*Note:** Facade Grant Applicants leasing their space must provide a notarized letter with permission from the property owner to apply for a facade grant. The letter must indicate an awareness of the rules and requirements of the program.

Have all of the necessary financial resources been secured including these grant funds which would be reimbursed to you? \_\_\_\_\_ Yes \_\_\_\_\_ No

If applying for a Facade Improvement Grant, I agree to sign a Facade Improvement Maintenance Agreement with the Clawson DDA to ensure that the improvements are maintained. \_\_\_\_\_ Yes \_\_\_\_\_ No

I certify that the information contained in this application is, to the best of my knowledge, correct and accurate as of this date.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

## **Clawson DDA Business Assistance Grant Application**

The following attachments should accompany any Business Assistance Grant:

- completed grant application form
- copy of a valid city business license, if a business owner
- evidence of ownership or copy of executed lease
- proof of payment of property (real & personal) taxes, utilities and other city accounts
- specifications needed to understand the scope of the project, including architectural plans and/or sketches as needed

Physical Improvement Grants will also require the following:

- copy of certificate of property & liability insurance
- three cost estimates from licensed contractors - not obligated to accept the lowest
- color schemes proposed for the exterior improvements
- applicants leasing their space must provide a notarized letter with permission from the property owner indicating an awareness of the rules and requirements of the program