



# CITY OF DUNEDIN

## Commercial Building Grant Program Application

PURPOSE OF GRANT: \_\_\_\_\_ FAÇADE IMPROVEMENT  
 (Check applicable) \_\_\_\_\_ DEMOLITION  
 \_\_\_\_\_ UNDERGROUND UTILITIES

**I. APPLICANT INFORMATION**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_ HOME/CELL PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**II. PROPERTY OWNER INFORMATION (IF DIFFERENT FROM ABOVE)**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_ HOME/CELL PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**III. PROJECT SITE**

PROPERTY ADDRESS: \_\_\_\_\_

USE OF PROPERTY: \_\_\_\_\_

PARCEL NO.: \_\_\_\_\_  
                   SEC   TWP   RGE   SUB DIV   BLK   LOT

FLOOD ZONE: \_\_\_\_\_ FLOOD MAP PANEL NO.: \_\_\_\_\_

ZONING DISTRICT: \_\_\_\_\_ LAND USE DISTRICT: \_\_\_\_\_

HAS THE BUILDING(S) ON YOUR SITE BEEN CHECKED FOR:  
 LEAD-BASED PAINT? YES \_\_\_\_\_ NO \_\_\_\_\_ ASBESTOS? YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, PLEASE PROVIDE DETAILS OF FINDINGS: \_\_\_\_\_

WHEN WAS THE OLDEST PORTION OF THE STRUCTURE BUILT? \_\_\_\_\_

ESTIMATED DATE OF PROJECT COMPLETION: \_\_\_\_\_

**IV. PROJECT PROPOSAL**

(DESCRIBE THE PROPOSED SCOPE OF WORK. ATTACH ADDITIONAL SHEET IF NECESSARY)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**V. PROJECT BUDGET**

(SUBMIT ITEMIZED BUDGET INDICATING AMOUNT AND USE OF FUNDS REQUESTED)

<u>WORK ITEM</u>	<u>COST</u>	<u>PROGRAM MATCH</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
TOTALS		_____

**VI. ATTACHMENTS**

1. ATTACH PHOTO(S) OF THE SITE AND FAÇADE TO BE IMPROVED OR DEMOLISHED.
2. ATTACH A SITE PLAN OR SKETCH OF THE PROPOSED IMPROVEMENT(S).
3. ATTACH ARCHITECT'S ESTIMATE OF PROJECT'S COST. ALTERNATIVELY, YOU MAY SUBMIT (2) COMPETITIVE CONTRACTOR'S BIDS.

**VII. AFFIDAVIT**

I (WE), THE UNDERSIGNED, ATTEST TO MY (OUR) OWNERSHIP OF THE PROPERTY LOCATED AT \_\_\_\_\_ AND HEREBY AUTHORIZE \_\_\_\_\_ TO ACT AS MY (OUR) AGENT FOR THE LIMITED AND EXPRESS PURPOSE OF PARTICIPATING IN THE CITY OF DUNEDIN COMMERCIAL BUILDING GRANT PROGRAM. I (WE) HAVE REVIEWED AND APPROVE OF THE ALTERATIONS TO BE MADE ON THE PROPERTY AS PROPOSED IN THE GRANT APPLICATION.

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS \_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_ BY \_\_\_\_\_, WHO IS PERSONALLY KNOWN TO ME OR WHO HAS PRODUCED \_\_\_\_\_ AS IDENTIFICATION AND WHO (DID/DID NOT) TAKE AN OATH.

TITLE HOLDER \_\_\_\_\_ NOTARY NAME \_\_\_\_\_

TITLE HOLDER \_\_\_\_\_ NOTARY NAME \_\_\_\_\_

SERIAL NUMBER \_\_\_\_\_

I SWEAR THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS, TO THE BEST OF MY KNOWLEDGE, TRUE AND COMPLETE. I FURTHER AGREE TO ABIDE BY THE TERMS AND CONDITIONS OF THIS PROGRAM AS PRESENTED IN THE PROGRAM DESCRIPTION.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**PRIOR APPROVAL BY THE CRA/ECONOMIC DEVELOPMENT DEPARTMENT IS REQUIRED BEFORE BEGINNING ANY WORK.** Mail your application to City of Dunedin, Planning & Development Department, P.O. Box 1348, Dunedin, FL 34697-1348, or deliver to 737 Loudon Street, 2nd Floor. Contact Persons: Robert Ironsmith/Joan McHale at 727/298-3198. The City of Dunedin CRA/Economic Development Department retains the right to reject applications which are not consistent with the intent of this program.