



# CITY OF HYATTSVILLE

Commercial Facade Improvement Program Application



**Due Date: July 12, 2016 (4 P.M.)**

**(301) 985-5013  
4310 Gallatin Street  
Hyattsville, MD 20781**

**CITY OF HYATTSVILLE**  
**COMMERCIAL FACADE IMPROVEMENT PROGRAM**  
GRANT APPLICATION

**Project Address:** \_\_\_\_\_

**Doing Business As:** \_\_\_\_\_

**Applicant Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Specific Scope of Proposed Improvements:**

*Window or Door Replacement*

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

*Masonry*

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

*Signage, Awning or Lighting*

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

*Other*

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

**Property Ownership**

1. Do you own or lease the property on which the façade improvements will be made? (Check one) Own \_\_\_\_ Lease \_\_\_\_\_ Purchase Agreement \_\_\_\_\_
  
2. If you lease, has the property owner agreed to these proposed improvements and signed the **Statement of Permission** on page 5 of this application? \_\_\_\_\_
  
3. If you lease, what is the expiration date of the lease? \_\_\_\_\_
  
4. If you lease retail space, please provide the name, address, telephone number and email address for the owner of record for the leasehold property: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
5. How long have you been a tenant of and/or owned this property? \_\_\_\_\_ Yrs.
  
6. If you own and if the property is vacant, how long has the property remained vacant and for what reason? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
7. What will be the estimated total or square feet lease rate after the façade improvements are complete? \_\_\_\_\_

**Project Funding Information**

Approved projects are eligible to receive a dollar-for-dollar matching grant, with a minimum grant of \$10,000 and a maximum grant of \$45,000 per building.

Applicants are required to provide a cash match for the total project, which may include both capital improvements and architectural/engineering design services (Other).

1. Proposed source and amount of Applicant Equity:

Private Equity: \$ \_\_\_\_\_

Bank or Other Loan: \$ \_\_\_\_\_

Other: \$ \_\_\_\_\_

**Grant Request:** \$ \_\_\_\_\_ (**\$10,000 - \$45,000**)

**Total Project Cost:** \$ \_\_\_\_\_

2. For Projects requiring Bank Loans: Has a loan been secured? Yes \_\_\_\_\_ No \_\_\_\_\_

a. If No, has an application or request been made to the bank at this time? Yes \_\_\_\_\_  
No \_\_\_\_\_

b. If Yes, please provide the name of bank and contact information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Is the business or property in default or delinquent on any outstanding debt concerning your business operations or location costs? Yes \_\_\_\_\_ No \_\_\_\_\_. If yes, to what is the length of time and amount delinquent? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Please provide the following information about your business/property:

Total Full-Time Employees: \_\_\_\_\_ Total Part-Time Employees: \_\_\_\_\_

Anticipated New F/T Employees: \_\_\_\_\_ Anticipated New P/T Employees: \_\_\_\_\_

Total linear feet to be improved: \_\_\_\_\_

**Bidding Contractor Information**

1. Owner/CEO: \_\_\_\_\_

Doing Business As: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Relevant Licenses: \_\_\_\_\_

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

2. Owner/CEO: \_\_\_\_\_

Doing Business As: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Relevant Licenses: \_\_\_\_\_

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

3. Owner/CEO: \_\_\_\_\_

Doing Business As: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Relevant Licenses: \_\_\_\_\_

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

**Selected Contractor:** \_\_\_\_\_

**Application Checklist:**

Paper copies of each of the following items **MUST** be included with your submitted application. **DO NOT STAPLE TOGETHER:**

- \_\_\_\_\_ Completed Commercial Façade Improvement Program Application
- \_\_\_\_\_ Color photographs of current façade from sidewalk or street
- \_\_\_\_\_ Conceptual or architectural rendering of proposed work, and specific scope of work
- \_\_\_\_\_ Name, address, license number, phone number and email address of firm or licensed architect that prepared the conceptual design.
- \_\_\_\_\_ Itemized cost estimate from licensed contractor
- \_\_\_\_\_ Proof of insurance and necessary business licenses for selected contractor
- \_\_\_\_\_ Photocopy of fire and extended insurance coverage for building and property
- \_\_\_\_\_ Photocopy of current City of Hyattsville Business License
- \_\_\_\_\_ Documentation that states that subject property is up-to-date on Hyattsville and Prince George’s County taxes
- \_\_\_\_\_ If leased, a Statement of Permission for the proposed improvements signed by the owner of record agreeing to the proposed work.
- \_\_\_\_\_ Reviewed the City of Hyattsville Commercial Façade Improvement Program Guidelines and signed the statement below

**Statement of Permission**

I hereby consent to the conditions outlined in the City of Hyattsville Commercial Façade Improvement Program Guidelines and if selected for funding, agree to participate in this program as proposed in this application including the contribution of a minimum of 50% of the total project funding.

**Applicant**

**Building/Property Owner (if other than applicant)**

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**APPLICATIONS MUST BE SUBMITTED IN A SEALED ENVELOPE  
BY 4:00 PM, ON TUESDAY, July 12th, 2016 TO:**

**COMMERCIAL FAÇADE IMPROVEMENT PROGRAM  
CITY OF HYATTSVILLE  
DEPARTMENT OF COMMUNITY & ECONOMIC DEVELOPMENT  
4310 GALLATIN STREET  
HYATTSVILLE, MARYLAND 20781**

**Grant Review Official Use Only**

Date of Application Receipt: \_\_\_\_\_

Target Funding Area:

West Hyattsville TDOZ ( )

Prince George's Plaza TDOZ ( )

Route One/Gateway DDOZ ( )

Hyattsville Business License Number: \_\_\_\_\_

ADA or Building Code Compliance Modification: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Vacant/Occupied Property: \_\_\_\_\_

Environmental Review Submit: \_\_\_\_\_

Environ Review Approval: \_\_\_\_\_

Approval for Funding: \_\_\_\_\_

Recommended Award Amount: \_\_\_\_\_

Selected Contractor Approval: \_\_\_\_\_

Award Letter Issued: \_\_\_\_\_

Grant Agreement Execution: \_\_\_\_\_

Notice to Proceed Issued: \_\_\_\_\_

Site Inspection Completed: \_\_\_\_\_

Total Linear Ft. of Improved Façade: \_\_\_\_\_

Total Private Investment: \_\_\_\_\_

Request for Payment Approved: \_\_\_\_\_

Project Complete: \_\_\_\_\_