



2016 TOWN OF JOHNSTOWN DOWNTOWN FAÇADE GRANT PROGRAM

APPLICATION

Applicant: _____ Property Owner: _____

Applicant Address: _____

Telephone: _____ E-mail address for correspondence: _____

Project Physical Address: _____

Name of Business: _____

Project Start Date*: _____ Project Completion Date*: _____

Project Description:

Total Cost of Project (attach contractor's bid): \$ _____

Amount Requested (not to exceed 50% of the total cost, or \$10,000): \$ _____

- Applicants will receive approval notification by e-mail or regular mail at the address provided above.
• Work completed prior to grant approval is not eligible for funding.
• Reimbursements occur after the project completion, upon submission of appropriate forms and documents, and following inspection by Town Planner and Building Inspector.
• All required permits are the responsibility of the owner / applicant.
• Proposed work will be reviewed by the Design Review Committee.
• * The project will be completed within 180 days (6 months) of approval.

Signed: _____
Property Owner(s)

Date

Signed: _____
Applicant(s)

Date

Send all application materials to:
John Franklin, Town Planner
Town of Johnstown,
450 S. Parish Ave.
Johnstown, CO 80534



1 original and 1 copy of the following:

_____ Complete Application

_____ Written project description (if not on the application)

_____ Scaled drawings of proposed improvements

_____ Color photographs of existing conditions; including the area for improvements (include color samples and materials to be used)

_____ Contractor and material cost estimates

_____ Letter of commitment for matching funds

_____ Written approval by property owner, if applicable