DOWNTOWN SOUTH BEND, INC.

2018 INTERIOR IMPROVEMENT GRANT FULL APPLICATION



APPLICANT INFORMATION (please print clearly)

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Applicant Name	2:							
Applicant's Add	ress: City:	State:	Zip:					
Applicant's Pho	ne (daytime):	Email:						
BUILDING INFORMATION								
Building Addres	s:							
Are you the building owner? Yes No								
If you are not t	he building own	er, you must have	e the build	ing owner	fill out the fo	ollowing:		
Building Owner's Name:								
Building Owner's Address:								
Building Owners Phone (daytime):								
I understand ar	nd agree to the p	roject as detaile	d in this ag	reement.				
Signature of Bu	ilding Owner:					Date:		
PROJECT INI	FORMATION							
Please provide	e the following	attachments ¹ :						
1.								
2. I	2. Project estimate(s) from at least two licensed contractors							

- 3. A completed DTSB Contractor Pre-qualification Review Form for <u>each</u> contractor
- 4. The executive summary of your business plan
- 5. A copy of your lease agreement or letter of intent

PROJECT COST

Estimated Project Cost: \$
Grant Request: \$

(Based on Tier 1 or Tier 2 amount per square foot per lease year up to maximum grant of \$5,000)

PROJECT SCHEDULE 2

Anticipated Starting Date:

Anticipated Completion Date:

¹ Your application will not be considered complete if any of the attachments are missing.

² In order to receive reimbursement your projects must be completed within 90-days. Projects begun after 10/15/18 must be completed no later than 12/14/18.

APPLICANT'S CERTIFICATION

The Applicant certifies that all information in this application and all information furnished in support of this application, given for the purpose of obtaining an Interior Improvement Grant under the DTSB (Downtown South Bend) Interior Improvement Grant Program are true and complete to the best of the Applicant's knowledge and belief. I have read and understand the procedures and agree to follow the Interior Improvement Grant Process. I am submitting documentation as requested.

Applicant's Signature:	Date:

MAIL THIS APPLICATION WITH ATTACHMENTS TO:

DTSB

Attn: Director, Downtown Business Engagement 217 S. Michigan South Bend, IN 46601

> Phone: 574.968.7291 Fax: 574.233.7382

Or email to: lpinson@downtownsouthbend.com