



CITY OF MCHENRY

APPLICATION FOR FAÇADE GRANT

Date:

Program administered through the City of McHenry Economic Development Department. Funds reviewed and distributed on a "first come, first serve" basis.

Read all instructions provided before completing. If additional space is needed, attach additional pages. Type or use black ink.

SECTION 1: Applicant / Permittee Information

| | | | |
|---------------------------------------|--------------------------------|------------------------------|----------|
| Applicant Name (Ind., Org. or Entity) | Authorized Representative | Title | |
| Mailing Address | City | State | ZIP Code |
| Email Address | Phone Number (incl. area code) | Fax Number (incl. area code) | |

SECTION 2: Landowner Information (complete these fields when project site owner is different than applicant)

| | | | |
|----------------------------|--------------------------------|------------------------------|----------|
| Name (Ind. Org. or Entity) | Contact Person | Title | |
| Mailing Address | City | State | ZIP Code |
| Email Address | Phone Number (incl. area code) | Fax Number (incl. area code) | |

SECTION 3: Project or Site Location

| | |
|-----------------------------|------------|
| Project Address/Description | Parcel No. |
|-----------------------------|------------|

SECTION 4: Project Information

| | | | |
|---|----------------------|--------------------------------|----------------------|
| Project Description: | | | |
| Estimated Start Date: | | Estimated Completion Date: | |
| Existing Façade Photo (attach): | | Design Drawing (attach): | |
| <i>Fill in below form with cost estimates based on category. Attach quotes to this application.</i> | | | |
| Category | Cost Estimate | Category | Cost Estimate |
| | | | |
| | | | |
| | | | |
| Total Eligible Expenses: | | Requested Grant Amount: | |

SECTION 5: Certification and Permission

Certification: I hereby certify that I am the owner or authorized representative of the owner of the property which is the subject of this Permit Application. I certify that the information contained in this form and attachments is true and accurate. I certify that the project will be in compliance with all permit conditions. I understand that failure to comply with any or all of the provisions of the permit may result in permit revocation and a fine and/or forfeiture under the provisions of applicable laws.

Permission: I hereby give the City permission to enter and inspect the property at reasonable times, to evaluate this notice and application, and to determine compliance with any resulting permit coverage.

| | | |
|--|-------|--------------|
| Name of Owner/Authorized Representative (please print) | Title | Phone Number |
| Signature of Applicant | | Date Signed |