



NORTH MONROE FAÇADE IMPROVEMENT PROGRAM APPLICATION

Primary Contact Information			
Primary Contact Name:	Primary Contact Phone:	Primary Contact Email:	Primary Contact Address:
Primary Contact is the: <input type="checkbox"/> Property Owner <input type="checkbox"/> Commercial Tenant			Note: If you are not the property owner, you must have the property owner or an authorized representative co-sign this application.
Checklist			
Attachments: <input type="checkbox"/> Copy of conceptual drawing of proposed work <input type="checkbox"/> Two or more photos of building can be emailed to northmonroe@spokanecity.org <input type="checkbox"/> Copies of estimate or bid from licensed contractor(s) detailing all work items and costs			
Business Information			
Name of Business:		Type of Business:	
Business Address:		Business License Number:	
How long has this business been at the current location?		When does your current lease expire?	
Business Owner's Name:		Business Owner's Phone Number:	
Business Owner's Address:		Business Owner's Mailing Address:	
Building and Property Information			
Property Owner's Name:		Property Owner's Phone Number:	
Property Owner's Email Address:		Property Owner's Mailing Address:	
Current Use of Building:		Number of Businesses Located within Building:	
Supplemental Questions			
Do the proposed façade improvements meet the eligibility criteria?	<input type="checkbox"/> Yes <input type="checkbox"/> No	See Eligible Façade Improvements in the North Monroe Façade Improvement Program – Program Information Guidelines and Requirements.	
Does your project need Design Assistance?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Applicants may meet with City of Spokane Urban Design staff for guidance on design before submitting an application.	
Are the municipal taxes and utilities current?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Municipal taxes and utilities must be current.	
Is there any structural damage to the building?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, building must be inspected prior to work.	
Are there any active code enforcement violations?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please list: _____	
Project Information			
Please provide a description of the building to be rehabilitated. Attach additional pages for continued description if needed.			

Please provide a description of the work proposed for the Façade Improvement Program. Attach additional pages for continued description if needed.	
Estimated Project Completion Date: _____	
Funding Information	
Grant Amount Requested: _____	Funding Source for the Match: _____
Total Estimated Cost of Improvements: _____	Source of Cost Estimate: _____
Note: Proof of payment (invoices, receipts, etc.) is required after project is complete to receive grant funding	
Signatures	
Signature of Applicant: _____ Date: _____	
Printed Name of Applicant: _____	
Signature of Property Owner (Required If Different from Applicant): _____ Date: _____	
Printed Name of Property Owner: _____	

This is a first come, first served selection process and all applications are subject to approval. Information on this program can be found in North Monroe Façade Improvement Program – Program Information Guidelines and Requirements. For questions regarding this program, please contact Boris Borisov at (509) 625-6300 or northmonroe@spokanecity.org

Applications can be submitted starting on April 9, 2018, at 8:00 a.m.

Submission Options

#1: Email completed applications along with drawings/plans to: northmonroe@spokanecity.org

#2: Drop off in person:

City Hall, 3rd Floor, Planning & Development Services Receptionist
 808 W. Spokane Falls Blvd
 Spokane, WA 99201

For Office Use Only:

Date Application Received: _____

Time Received: _____

Received By: _____