

# Omro Business Improvement District Façade Improvement Grant Application

Please fill out this application and return it to: Dana Racine, 130 W. Larrabee Street, Omro, WI 54963; or fax it to (920) 685-0384; or e-mail it to: dracine@omro-wi.com.

Owner's/Tenant's Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

Address of Building: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Type of Project (Please Check All That Apply):

- Complete façade restoration
- Exterior signs attached to property owner's land or building used to advertise property owners business.
- Exterior painting
- Exterior lighting
- Exterior door or window replacement
- Ground preparation and plantings that are anticipated to survive two or more years
- Tuck pointing or cleaning of exterior brick
- Planters permanently affixed to land or building
- Outdoor seating permanently affixed to land or building
- Exterior deck for business use
- Replacement of roof, gutters or fascia
- Awnings attached to building
- Parking lot construction, resurfacing, sealing, striping once every 3 years
- Other (Please describe) \_\_\_\_\_

Description of project (Please use detail to include size, color, etc., & attach sketch or photo example, paint chips, etc., if available): \_\_\_\_\_

Total Cost of Project: \_\_\_\_\_ Do you rent or own? \_\_\_\_\_

If renting, owner's name/address: \_\_\_\_\_  
(Please attach letter of permission from owner to do any façade work).

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

\*Documentation of paid bills must accompany completed application. Reimbursable items include materials and hired labor/contractor. All eligibility and reimbursement is subject to BID Board final approval. A limited number of grants are awarded annually. All costs incurred and payment made have to happen the year of application. Only one application per property will be accepted per calendar year. Responsibility of project completion and payment of funds for the completed work is that of the owner/tenant.

<b>Office Use Only</b>	
Date Application Received by Director: _____	Initials: _____
Date Application Approved by BID Board: _____	Initials: _____
Date Application Sent to City Hall for Payment _____	Initials: _____