



Village of Morton Grove - Facade Improvement Program Application

Project Address: _____

Business or Organization Name:

Applicant Information

Name: _____

Address: _____

Phone: _____ E-mail: _____

Applicant is: (please check all that apply): _____ Property Owner _____ Business Owner _____ Tenant

If applicant is NOT the property owner, please supply Property Owner information:

Name: _____

Firm (if Property Management Company): _____

Address: _____

Phone: _____ E-mail: _____

Date (year) property was purchased: _____

Applicant (please mark any that apply)

Business Owner _____ Not-for-Profit Org _____

Corporate Rep (if business has multiple locations) _____ Other (specify) _____

Business/Organization is:

New to MG _____ Existing MG _____ Existing MG/relocating _____ Existing MG/expanding _____

Lease Information (for Tenants):

Length of time business has been at this location: _____

If business is relocating, length of time business operated at previous location: _____

Length of current lease: _____ Lease Expiration date: _____

Project Overview:

Provide a brief summary of overall project and those aspects for which funding assistance is being sought:

Property Financial Assistance Information (for Owner):

Has this property or the business owner received any financial assistance (grants, sales tax sharing, TIF, etc.) from the Village in the past? _____ YES _____ NO

If yes, describe the type of assistance, date(s) of assistance/grant, and amount of assistance:

Architect/Designer (if applicable) :

Name: _____

Firm (if Property Management Company): _____

Address: _____

Phone: _____ E-mail: _____

Required For Grant Consideration

ALL OF THE FOLLOWING MUST BE SUBMITTED BY THE APPLICANT BEFORE THE GRANT APPLICATION CAN BE DEEMED COMPLETE. VILLAGE WILL NEITHER ACCEPT NOR PROCESS INCOMPLETE APPLICATIONS.

- Business description (including product/service and type of client/customer)
- Proposed project designs, facade and/or signage details, and facade elevation(s)
- Narrative description and projected budget for scope of work to be performed
- Three (3) **LIKE-BIDS** for each type of proposed work (See Program Guidelines)
- Tenant: Copy of current lease and letter from landlord acknowledging & permitting work contemplated
- Owner: evidence of title or control of property; copy of lease(s), if any; current real estate tax bill; and sign-off from Finance Department that no outstanding fees, taxes, fines exist for this property
- Photos of building exterior/facade – Minimum of two 8” x 10” color photos (hard copy and digital)
- 10 Hard copies of the application packet and electronic submission to commdev@mortongroveil.org

Statement of Understanding - Applicant

The applicant (undersigned) has read and fully understands the guidelines and procedures of the Morton Grove Façade Improvement Program and the associated Agreement, which shall be fully executed prior to the initiation of work covered by the grant program. It is understood by the applicant that three cost estimates, copies of building permits, contracts, insurance, and invoices are required documentation prior to commencement.

Applicant Signature

Date

Applicant Name (Please Print)

Company’s FIN #

If the applicant is NOT the property owner, the following must be completed by the property owner:

I, _____ (print name), certify that I am the owner of the property located at _____ (property address) and authorize the applicant to apply for a grant under the Morton Grove Façade Improvement Program and undertake the approved improvements.

Property Owner Signature

Date

FOR OFFICE USE ONLY:

Application Number: _____ Date Received: _____

Finance Dir. Certification – Applicant & property owner have no outstanding fees, fines, taxes, etc. due to MG:
 _____ (signature) _____ (date)

Estimated Cost of Project Eligible Expenses (lowest estimate from submitted quotes): _____

Total Grant Award Approved: _____ Date of EDC approval: _____

Date of Appearance Commission Review/Issuance of Appearance Certificate: _____

Date of Request for Rebate/Receipt of Req’d Final Documents, Photos: _____

Inspection to confirm completion: _____ (signature) _____ (date)

Date of Issuance of Rebate: _____