

Town of Yadkinville
213 Van Buren Street
Yadkinville, NC 27055
336-679-8732

FAÇADE IMPROVEMENT GRANT APPLICATION

Information

Date of Application: _____

Applicant Name _____
Property Owner Name _____
Business Owner Name (if different) _____
Business Name _____
Phone # _____
Street Address _____
Business Mailing Address _____

Use of Building

Current use of building: _____

Proposed use of building: _____

Tier level for which you are applying (select one)

- ☐ **Tier 1:** Major facade upfit: 50% match, up to \$10,000. Includes:
- ☐ Removal of false fronts, false roof lines, or materials not original to the building
 - ☐ Historic reconstruction-restoration of storefronts, door and window openings
 - ☐ Replacement of window and doors
 - ☐ Replacement of facade materials
 - ☐ Removal of deteriorated structures

- ☐ **Tier 2:** Minor facade upfit: 50 % match, up to \$5,000. Includes:
- ☐ Exterior painting (does not include currently unpainted masonry)
 - ☐ Repair of windows and doors
 - ☐ Repair of facade materials

- ☐ **Tier 3:** Streetscape enhancements: 50% match up to \$2,500. Includes:
- ☐ Awnings
 - ☐ Exterior lighting or signage
 - ☐ Landscaping or planters
 - ☐ Benches or outdoor dining areas

Description of Proposed Renovation (Attach color drawing, color sketch, or color conceptual image of proposed renovations, specifically identifying changes and paint color for each detail of the building, along with a photo of the building as it currently exists.):

Total Estimated Cost of Façade Renovation:

Checklist for Complete Application

- ☐ 1) I have read the Town of Yadkinville Façade Improvement Program Outline and fully understand the agreement.
- ☐ 2) The owner's written permission is attached, if applicable.
- ☐ 3) Drawings, sketches, and/or pictures, including color scheme and sign design for project are attached.
- ☐ 4) I understand that façade grants are paid only when the approved project is completed in accordance with the plans and specifications submitted with the proposal. A preliminary dollar amount of the grant is determined at the time of application.
- ☐ 5) I understand that the final award amount is based on documentation of actual costs.
- ☐ 6) I understand that a project that alters submitted plans without prior approval will be disqualified for payment. Designs not completed as submitted will also be disqualified.
- ☐ 7) Funding is awarded on a fiscal year calendar that runs from July 1 – June 30. All work must be completed, inspected and all invoices must be received by June 15 of the applicable fiscal year. I understand that missing this deadline will result in the grant award be disqualified for payment.

I understand the Town of Yadkinville Façade Improvement Program must be used in the manner described in this application, and the application must be reviewed and approved by the Long Range Planning Committee prior to commencement of any project. I understand that failure to comply with the approved application may result in a forfeiture of all grant funds. Funds will be paid up to 30 days after work related receipts have been submitted to Town Hall.

Applicant Signature: _____ Date: _____