

City of Cayce Façade Improvement Program

The Façade Improvement Program is available to owners and tenants of buildings used for commercial purposes along the Knox Abbott, State Street and Frink Street (State to 12th) Commercial Corridors. Properties are eligible to receive up to a \$5,000 grant. This is a reimbursement grant and shall be administered on a first come first serve basis, until available funding for the program is expended. Please refer to program guidelines for eligibility requirements. To apply for a grant, please complete all three sections of this application.

I. GRANT APPLICATION

| A 1: | |
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| Applicant Name: | |
| Home Address: | |
| Email Address: | |
| Phone Number: | |
| Business Owner: Yes No | |
| Building Owner: Yes No | |
| Owner Type (Check one): Individual Prop | orietorship Partnership Corporation LLC |
| BUSINESS INFORMATION | |
| Business Name: | |
| Business Address: | |
| Mailing Address (if different from above): | |
| Tax ID Number: | DUNS Number: |
| Insurance Agent Name & Contact Information: _ | |
| PROJECT INFORMATION | |
| Proposed Project (check all that apply): | |
| Proposed Project (check all that apply): Exterior signs | Façade improvements |
| _ | ☐ Façade improvements ☐ Outdoor lighting |
| Exterior signs | |
| Exterior signs Awnings, canopies, sunshades etc Painting or exterior surface treatment Masonry/Carpentry Repairs | Outdoor lightingFencingIron bar removal/disposal |
| Exterior signs Awnings, canopies, sunshades etc Painting or exterior surface treatment Masonry/Carpentry Repairs Architectural features | Outdoor lighting Fencing Iron bar removal/disposal Entrance improvements (building/parking lot) |
| Exterior signs Awnings, canopies, sunshades etc Painting or exterior surface treatment Masonry/Carpentry Repairs Architectural features Restoration of historic features | Outdoor lighting Fencing Iron bar removal/disposal Entrance improvements (building/parking lot) Storefront modification |
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| Full Name: | |
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| LANDLORD ACKNOWLEDGEMENT I am the landlord of the building address noted in this project application and my address and phone number is noted correctly in this document. I have been informed of the Applicant's intention to perform the improvements described in this application, and I hereby authorize the tenant to apply for the proposed improvements. | |
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| <u>II.</u> | APPLICANT CERTIFICATION |
| | nd submitting this application that he, she or they will be bound by e City of Cayce Façade Improvement Program guidelines available on |
| | |
| Applicant Signature | Date |
| Applicant Signature Name of corporation (if applicable) | Date |
| Name of corporation (if applicable) | Date LICATION SUBMISSION CHECKLIST |
| Name of corporation (if applicable) III. APPL With this grant application, I have attache | LICATION SUBMISSION CHECKLIST ed the following: |
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tgray@caycesc.gov | City of Cayce, 1800 12th Street, Cayce, SC 29033