TOWN OF BERLIN

240 Kensington Road Berlin, CT 06037 (860) 828-7005

Economic Development

FAÇADE IMPROVEMENT PROGRAM APPLICATION

Instruction: Please complete all items carefully and accurately to the best of your knowledge.

Property Owner(s) Name	(Titleholder):			
Owner Type: (Check O	ne)			
	Proprietors Corporation		Partnership	
Mailing Address:				
City:	State:	Zip:	: <u></u>	
Phone	Fax		_ e-mail	
Federal Tax Id No	Bu	siness Tax Id N	0	
Name of Current Busines				
	S S			
Γotal Amount of Outstan Type 1 st Mortgage Holder 2 nd Mortgage Holder Other Liens	S S		Maturity Date_	Balance_
Гуре I st Mortgage Holder ^{Pnd} Mortgage Holder	To Whom	Amount	Maturity Date_	Balance_

7.	TYPE	OF IMPROVE	<u>MENTS</u>	PROPOSED	<u>)</u> :			
		Awnings		New Signs		Lighting		Painting
		Windows		Doors		Landscaping		Gutters
		Sign Removal		Siding		Canopy		Sidewalks
-						24		
						Other		-
S	ignage _							
Т	OTAL _							
A	MOUNT	Γ OF GRANT RE	QUEST	÷		(Up to Ma	aximum S	\$50,000)
S	OURCE	S OF FUNDING	FOR TO	TAL PROJEC	CT:			
C	Owner:							
]	Bank: _							
(D	Other:	FAÇADE GRAN	т.					
		Cost:						
I.	DIFA	SE ATTACH TI	UE EOI	I OWING A	S DAD'	Γ OF THIS APPL	ICATIO	M.
a	. Descrip	otion of improven	nents (ex	terior, signage	e, landso	caping) and how w	ork will b	be accomplished
b	. Brief co	ompany profile						
c	_	property owner and is required.	d busine	ess owner are i	not the s	same a letter of sup	port fron	n the property
d	. Сору о	of lease for curren	t or prop	osed business	location	n (if applicant is les	ssee)	
e	. Estimat	tes for all renovat	ions					
f.	. Copy of	f deed to real prop	perty					
VII.	EA CA	DE IMPROVE	MENIT (C) DEOUECT	7			
					_			
Give						s) being requested ogram's Policies ar		

I certify that the information in this application is to Façade Improvement Program.	tue and complete and 1 agree to participate in t
The undersigned hereby authorizes the Town of Bercontained in this application.	rlin to independently verify the information
Owner (s) Signature (Must be Notarized)	
Lessee(s) Signature, if applicant (Must be Notarized	
STATE OF CONNECTICUT)	
COUNTY OF)	
The foregoing instrument was subscribed to and sw 2013.	orn to before me thisday of
	Notary Public
	My Commission Expires:

ADDITIONAL DOCUMENTATION

Please submit the following items along with the application form:

- Copy of deed and mortgage documents for subject property.
- Complete the attached Tax Affidavit showing that all Town taxes due on all property owned by the same owner are paid in full and return to:

Economic Development Director Berlin, CT 06109

- Copy of Certificate of Insurance on subject property.
- Copy of lease (s) between owner and merchant (s) or business person (s), if applicable.

TO BE DETERMINED LATER, If Applicable

- Evidence of availability of funds for the matching 50% of the total cost of construction as required by the Façade Improvement Program.
- Evidence documenting the mortgages and other encumbrances on the property including the current principal balance.
- Other financial information to support that the applicant will maintain the improvements for a period of five years after completion of the project.
- Final plans and specifications for the work.
- Multiple cost estimates.
- Copy of contract(s) between the property owner/tenant and the contractors and suppliers for the project.

NOTICE

Funds for the façade and landscape grant program are being provided through a grant from the State of Connecticut. The Applicant will be required to enter into an agreement with the Town that will include provisions that the Applicant will agree not to discriminate and that the applicant will make a good faith effort to use State registered woman owned and/or minority business enterprises. This link on the State of Connecticut Department of Administrative Services web site can help you find small and minority businesses to consider as contractors or suppliers for the project; http://www.biznet.ct.gov/SupplierDiversity/SDSearch.aspx

FACADE IMPROVEMENT TAX PAYMENT VERIFICATION

NAME OF BUSINESS/PROPERTY OV	VNER:			_	
Form of Business: Sale Proprietorship	Partnership	Corporation	LLC		
List the Names of the Principal (s) of the C	Organization:				
Business/Property Owner Certification: I certify personal property located in the Town of Berlin			art to any real, m	notor vehicles or	
	TO BE COMPLETED BY TAX COLLECTOR				
	Are Taxes Current Yes No	Amount Delinquent	Number of Tax years Delinquent	Is there a Repayment or Repayment Yes No	
ADDRESS: REAL PROPERTY					
		\$			
		\$ \$			
		Φ			
MOTOR VEHICLE					
		\$			
		\$			
		\$			
PERSONAL PROPERTY		\$			
(Include Latest Filed Declaration Form)					
		\$			
		Φ			
AUTHORIZED SIGNATURE	Additional Comments:				
TITLE					
DATE					
		av Dent-Signature	Date		