



Thurmont Main Street Designated Community Legacy Grant (CLG) Program Application For Façade Grant

Checklist

Please assemble the application package in the sequence indicated below and label each item. Check off each item to ensure you are submitting the **required** material, including:

- Non-refundable \$35 application fee attached payable to the Town of Thurmont
- Completed Application
- A minimum of two color photographs that show existing building conditions
- Detailed sketches or drawings of the proposed improvements (including placement, color, dimensions and materials)
- A bid from licensed contractor on contractor letterhead detailing the proposed work
- Additional information (optional)
- Application must be postmarked by March 28, 2018, or physically received by 4 PM, March 28, 2018.**

Prior to submitting an application, applicants can meet with the Thurmont Economic Development Manager or CAO. This is voluntary and a service available to you for assistance, and not a requirement for applying.

I have:

- Met and discussed my proposed project with:
 - Thurmont Economic Development Manager or CAO
 - Date of Meeting: _____
- Did not meet with the Thurmont Economic Development Manager in regards to my project

General Information

Name of Applicant: _____

Name of Business: _____

Project/Business Address: _____

Phone Number: _____ Fax Number: _____

E-mail address: _____

Type of Business: _____

Applicant is the:

- Property Owner
- Business Owner
- Other: _____

How long has the business been at the current location? _____

When does your current lease expire? _____

Do you have the option to renew your lease and do you intend to do so? What are the terms?

Property owner's name (if different from applicant): _____

Property owner's address: _____

Property owner's phone number/email: _____

Note: If you are not the property owner, the property owner or an authorized representative must co-sign this application where indicated in the "General Conditions" section of this application.

Project Details

Please describe below, or via a supplemental attachment, the proposed improvements to the property. The following required information must accompany this application:

- Minimum of two color photographs that show existing building conditions
- Detailed sketches or drawings of the proposed improvements (including placement, color, dimensions and materials)
- A bid from licensed contractors on contractor letterhead detailing the proposed work

Description of proposed improvements (e.g., new doors/windows, signs, lighting, paint, etc.):

Proposed Project Budget: _____

Describe how this project will enhance the downtown, including how it will:

- Improve your business or increase your chances for success
- Correct an existing problem such as deterioration of a structure
- Improve the façade of your business
- Facilitate the retention or expansion of an existing business downtown
- Facilitate the establishment of a new business to downtown
- Improve public safety or access
- Enhance Thurmont’s Main Street (beautification, foot traffic, etc.)
- Allow the Town of Thurmont and Main Street to meet their goals of revitalizing downtown

How much funding assistance are you requesting? _____

Proposed start date: _____

Estimated completion date: _____

(Note: Any project submitted for funding must be completed within twelve (12) months of the grant award.)

In conjunction with this project, are you completing any other renovation/rehabilitation work to the property (interior or exterior) not related to the façade grant?

- No
- Yes

If answer is “yes” to above question, describe additional work:

Estimated cost of additional work to the property: _____

General Conditions

- It is expressly understood and agreed that the applicant shall be solely responsible for all safety conditions and compliance with all safety regulations, building codes, ordinances, permitting requirements, and other applicable regulations.
- It is expressly understood and agreed that work completed prior to final approval of grant award is ineligible for funding.
- It is expressly understood and agreed that the applicant will not seek to hold The Town of Thurmont, Main Street, Inc., and/or its agents, employees, officers and/or directors liable for any property damage, personal injury, or other loss relating in any way to the Community Legacy Grant Program.
- The applicant shall be responsible for maintaining valid and sufficient insurance coverage for property damage and personal injury liability in compliance with the State of Maryland.
- The applicant agrees to maintain the property and improvements, including, but not limited to, promptly removing graffiti and trash, and sweeping and shoveling in front of the property.
- The applicant authorizes The Town of Thurmont to promote an approved project, including but not limited to, displaying a sign at the site, during and after construction, and using photographs and descriptions of the project in Main Street’s materials and press releases.
- The applicant has read and understands the *Thurmont Main Street Community Legacy Grant Program Overview* document outlining program guidelines and procedures.
- The applicant understands that the Town of Thurmont reserves the right to make changes in conditions of the Community Legacy Grant Program as warranted.

Signature of applicant: _____

Date: _____

If applicant is not the property owner, the property owner or an authorized representative must review and co-sign this application below.

Owner Authorization

As owner of the property at (insert address) _____

I have reviewed the above application and authorize the operator of _____ at said address to perform the improvements described above as part of the Thurmont Main Street Community Legacy Grant Program.

Signature of property owner or authorized representative:

Date: _____

Where to send your Application:

Thank-you for completing a Thurmont Main Street Façade Grant Application. You may mail or drop this application to the Main Street Center, 11 Water Street in the mail slot to the left of the front door, or The Town of Thurmont PO Box 17, 615 East Main Street, Attn: Vickie Grinder, or email to vgrinder@thurmontstaff.com

If you have any questions, please contact Vickie at vgrinder@thurmontstaff.com, or call 240.626.9980

Application must be postmarked by March 28, 2018, or physically received by 4 PM, March 28, 2018.

Applications will be reviewed in the order they are received.

Town of Thurmont use only:

Date application received: _____

Application approved by: _____

Date: _____

Completed projected date: _____

Date canceled check, pictures, and report were submitted to DHCD: _____

Date reimbursement check issued: _____