TOWN OF BRISTOL, INDIANA

Main Street Grant Program — Application for Assistance

Bristol Town Council | PO Box 122, Bristol, IN 46507 | (574) 848-7007

SECTION 1 GRANT TIER SELECTION

☐ **TIER 1: SIGN REPLACEMENT** — Up to $2,000 Maximum

25% Town match. The Town contributes 25% of eligible sign replacement costs (fabrication and installation of new exterior signage), up to a $2,000 maximum grant award.

☐ **TIER 2: FULL FAÇADE MAKEOVER**

Up to 50% Town match available. Covers paint, masonry, windows, doors, awnings, signage, and lighting improvements. Match percentage (up to 50%) determined by committee review of submitted project narrative supporting the Town's investment priorities.

Applicant must own or lease the property and operate a business at the location. Town match levels vary by tier — see tier descriptions above for details.

SECTION 2 APPLICANT INFORMATION

BUSINESS NAME _____

BUSINESS TYPE (LLC, SOLE PROP., ETC.) _____

OWNER / APPLICANT NAME _____

PHONE _____

EMAIL ADDRESS _____

YEARS IN BUSINESS _____

MAILING ADDRESS _____

CITY / STATE / ZIP _____

SECTION 3 PROPERTY DETAILS

PROPERTY ADDRESS (IF DIFFERENT FROM ABOVE) _____

BUILDING OWNER NAME (IF DIFFERENT) _____

OWNER PHONE _____

PROPERTY OWNER CO-SIGNING?

☐ Yes ☐ No

DOES THE BUILDING HAVE HISTORIC SIGNIFICANCE?

☐ Yes ☐ No

— (Tier 2 applicants only; if yes, briefly describe:) _____

YEAR BUILT (APPROX.) _____

SECTION 4 PROJECT DESCRIPTION

DESCRIBE THE PROPOSED IMPROVEMENTS

SCOPE OF WORK (CHECK ALL THAT APPLY):

☐ Signage ☐ Paint / Exterior Finish ☐ Masonry / Tuckpointing ☐ Windows ☐ Doors ☐ Awning / Canopy ☐ Lighting

☐ Accessibility Improvements ☐ Other: _____

Supporting documents, drawings, photographs, and contractor estimates may be attached to this application. Please label all attachments with the applicant's business name and reference the section they support.

TIER 2 APPLICANTS ONLY — PROJECT INVESTMENT NARRATIVE

Describe how this project supports the Town of Bristol's investment in the Main Street corridor. Address the project's impact on neighboring properties, economic vitality, historic character, visibility, and long-term sustainability. *(Required for Tier 2; used by Town Council to determine Town match percentage.)*

SECTION 5 CONTRACTOR ESTIMATES & PROJECT COSTS

ITEM / SCOPE OF WORK	CONTRACTOR NAME	ESTIMATED COST

TOTAL ESTIMATED PROJECT COST $

Minimum one (1) written contractor estimate required for Tier 1 and Tier 2 applications. Tier 2 projects where the requested Town match exceeds $15,000 require a minimum of two (2) competing contractor estimates.

SECTION 6 FINANCIAL SUMMARY

PROJECT FUNDING

Total Project Cost: $ _____

Grant Amount Requested: $ _____

Applicant Matching Funds: $ _____

Other Funding Sources: $ _____

SOURCE OF MATCHING FUNDS

☐ Personal Savings ☐ Business Revenue ☐ Bank Loan

☐ Other: _____

Have matching funds been secured?

☐ Yes ☐ No

If yes, attach documentation.

SECTION 7 PROJECT TIMELINE

ESTIMATED START DATE _____

ESTIMATED COMPLETION DATE _____

Work may not begin prior to written grant approval. Projects must be completed within 12 months of award.

SECTION 8 REQUIRED CERTIFICATIONS

I/We hereby certify that all information provided in this application is true and accurate to the best of my/our knowledge. I/We understand that grant funds are contingent upon program availability, committee review, and compliance with all Town of Bristol requirements. I/We agree that the Town may inspect the completed work prior to disbursement of funds.

APPLICANT SIGNATURE _____ **DATE** _____

PRINTED NAME _____ **TITLE** _____

PROPERTY OWNER SIGNATURE (IF DIFFERENT) _____ **DATE** _____

PRINTED NAME _____ **TITLE** _____

Submit completed applications by dropping off in person at Town Hall or by email to **mikeyoder@bristol.in.gov** | Questions? Call **(574) 848-7007**

FOR OFFICE USE ONLY

☐ Complete ☐ Incomplete Reviewed by: _____ Date: _____

☐ Approved ☐ Denied Committee Notes: _____