## **FACADE GRANT APPLICATION**



125 Fifth Ave West, Suite 200 - Hendersonville, NC 28792-4328 Phone (828) 233-3216 - Fax (828) 697-3014 www.hvlnc.gov

## HENDERSONVILLE DOWNTOWN ECONOMIC DEVELOPMENT DEPARTMENT

The following are required to constitute a complete application:

- 1) This form, including the property owner's signature.
- 2) Sketches, photos, plans, etc. necessary to clearly explain the scope of the project.
- 3) Copies of cost estimates for labor and materials.

| Date                      | Address of Project Property  |
|---------------------------|--|
|                           |  |
| Owner Address             | Owner Phone #  |
| Grant Applicant Name      | (if other than owner)  |
| Applicant Address         | Applicant Phone #  |
| Anticipated Project Co    | st (please attach project estimates)   |
| Project Start Date        | Project Completion Date  |
| Details of Proposed Pr    | oject (please attach project plans)  |
|                           |  |
| application must be revie | estand the Facade Grant must be used in the manner descirbed in this application and the wed by the Downtown Economic Development Director and appropriate Advisory Committee prior work. I understand that failure to comply with the approved application may result in the forfeiture |
| Owner's Signature         | Applicant's Signature  |
|                           | Official Use:  |