

RENEW KAUKAUNA GRANT APPLICATION

Downtown Beautification



PLEASE FILL OUT COMPLETELY AND SIGN

Blade Sign Mural Planter

Project Name: Flow Family Chiropractic Blade Sign

Project Address: 144 E 2nd St, Kaukauna

Owner Name: Rachel Elliott

Telephone: 920-460-9553

Email: dr.rachel.w@flowfamilychiropractic.com

Brief Description of Business: Chiropractor

List all owners, directors, or partners having 20% or greater interest:

Rachel Elliott

Project Description:

Blade Sign for my business

PLEASE CHECK ALL THAT APPLY

1. Property is Zoned Commercial Core District
2. You are not delinquent on any debt owed to the City
3. Your property is not owned in part or in whole by a tax exempt agency
4. Your property does not have any open code violations
5. The updates or work has not started
6. All work will be completed by a professional contractor
7. Yourself or a family member will not complete the work

Project Financing and Costs

Project Cost	175.00
Personal Funds	175.00
Lender Funds	0.00
Grant Funds Requested	175.00

APPLICATION FORM CHECKLIST

Please review this checklist prior to submitting your loan application to ensure all needed information is included.

1	Completed Application Form	
2	Description of Need	
3	Quotes/Estimates	
4	Financial Statements (proof of availability to complete project)	
5	Project Timeline	
6	Commitment from Private Lenders (if applicable)	
7	Exterior Improvement Visuals (if applicable)	
8		
9		

Application Agreement

The applicant certifies that all information in this application, and all information furnished in support of this application, is given for the purpose of obtaining a loan under the Renew Kaukauna Program and is true and complete to the best of the applicant's knowledge.

The applicant further certifies that they are the owner of the property or the owner has agreed to the work described in this application.

The applicant further certifies that the loan proceeds will be used for the work and materials identified in this application and will abide with all provisions and guidelines of the Renew Kaukauna Program.

The applicant further authorizes disclosure of all financial information submitted in connection with this application by and between the Redevelopment Authority of the City of Kaukauna and any lender agreeing to participate with the applicant's loan through this program.

Paul Elliston
Signature of Applicant

9-18-23
Date

Clay Eting
Signature of Owner

9/18/2023
Date