



**City of Lake City - Growth Management**  
173 NW Hillsboro St. Lake City, FL 32055  
Ph: 386-719-5754 Email: Planning@lcfla.com

## **FAÇADE GRANT PROGRAM**

### Application for Funding Assistance

#### **SECTION 1 — APPLICANT INFORMATION**

**Applicant / Property Owner Name:**

\_\_\_\_\_

**Business / Organization (if applicable):** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Type of Applicant:**

- ☐ Property Owner
- ☐ Developer (with Owner Authorization)
- ☐ Business Tenant (with Owner Authorization)

**Primary Contact (if different):** \_\_\_\_\_

\_\_\_\_\_

#### **SECTION 2 — PROPERTY INFORMATION**

**Project Address:** \_\_\_\_\_

**Parcel ID Number(s):** \_\_\_\_\_

**Current Use of Property:** \_\_\_\_\_

**Zoning District:** \_\_\_\_\_ **Future Land Use:** \_\_\_\_\_

**Is the property located within the CRA boundary?**

- ☐ Yes
- ☐ No (Not eligible for funding)

**Ownership Status:**

- ☐ Sole Ownership
- ☐ Joint Ownership

- ☐ Under Contract / Purchase Agreement
- ☐ Other: \_\_\_\_\_

Attach the following (required):

- ☐ Proof of ownership OR owner authorization
- ☐ Copy of property record card
- ☐ Project location map

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### SECTION 3 — PROJECT DESCRIPTION

**Provide a detailed narrative of the proposed redevelopment project:**

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**Project Type (check all that apply):**

- ☐ Residential Façade Grant
- ☐ Commercial Façade Grant

**Project Summary:**

**Total square footage:** \_\_\_\_\_

**Number of proposed units (if residential):** \_\_\_\_\_

**Commercial square footage (if applicable):** \_\_\_\_\_

**Intended use(s):** \_\_\_\_\_

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### SECTION 4 — PROJECT BUDGET

**Estimated Total Project Cost:** \$\_\_\_\_\_

**CRA Grant Amount Requested:** \$\_\_\_\_\_

**Applicant Match Contribution:** \$\_\_\_\_\_

(Minimum match per program guidelines required.)

**Budget Breakdown (Attach contractor estimates):**

Cost Item	Estimated Cost
Site Work / Preparation	\$_____

<b>Cost Item</b>	<b>Estimated Cost</b>
Demolition	\$ _____
Utility / Infrastructure	\$ _____
Building Construction	\$ _____
Design / Engineering	\$ _____
Exterior / Façade	\$ _____
Environmental Remediation	\$ _____
Other	\$ _____
<b>TOTAL</b>	<b>\$ _____</b>

Attach the following (required):

- ☐ Contractor estimates or proposals
  - ☐ Construction budget
  - ☐ Project pro forma (optional for small projects)
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## SECTION 5 — PROJECT SCHEDULE

**Anticipated Construction Start Date:** \_\_\_\_\_

**Anticipated Completion Date:** \_\_\_\_\_

**Is the project phased?**

- ☐ Yes (Attach phasing plan)
  - ☐ No
- 

## SECTION 6 — REQUIRED ATTACHMENTS CHECKLIST

- ☐ Proof of Ownership or Owner Authorization
  - ☐ Site Plan / Survey
  - ☐ Architectural or Building Plans (if applicable)
  - ☐ Contractor Estimates
  - ☐ Photos of Existing Property
  - ☐ Project Timeline / Schedule
  - ☐ Completed W-9 Form
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## SECTION 7 — APPLICANT CERTIFICATIONS

By signing below, the Applicant certifies that:

1. All information provided in this application is true and correct.

2. The Applicant has reviewed the CRA Infill Redevelopment Grant Program Guidelines.
3. No construction work has begun prior to CRA Board approval.
4. The Applicant understands this is a **reimbursement-only program**.
5. The Applicant agrees to maintain the improvements for the period required by CRA policy.
6. The Applicant agrees to allow CRA staff reasonable access to inspect the project.
7. The Applicant acknowledges that submission of this application does not guarantee funding.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

State of Florida

County of \_\_\_\_\_

Sworn to and subscribed before me in my physical presence this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_ (Applicant Name) \_\_\_\_ who is personally known to me or \_\_\_\_ who produced \_\_\_\_\_ as identification.

Notary Public: \_\_\_\_\_

Notary Printed Name: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

(Notary Seal)

## SECTION 8 — CRA STAFF USE ONLY

**Received By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Application Complete:** ☐ Yes ☐ No

**Eligible / Ineligible:** ☐ Eligible ☐ Ineligible

**CRA Review Notes:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### CRA Board Action:

- ☐ Approved
- ☐ Denied

- **Approved Amount:** \$\_\_\_\_\_
- **Meeting Date:** \_\_\_\_\_

**CRA Executive Director Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

### **Evaluation criteria & scoring**

Staff scoring matrix so applicants know priorities.

Applications must achieve 80 points out of 100 to be considered CRA Board approval:

1. Consistence with CRA Plan & reduction of slum/blight — 25 pts.
2. Private investment leverage (higher match/less CRA per \$ private invested, see scoring table below) - 25 pts.
3. Project readiness & permit status — 10 pts.
4. Economic benefit / job creation & tax base impact — 25 pts.
5. Community/Neighbor Support Letter — 5 pts.
6. Demonstrates positive impact within community — 10 pts.