Downtown Wayland Façade Grant Business Worksheet

Façade Grant: Business Worksheet							
Point of	First and Last Name:						
Contact	Email:						
	Cell Number:		Office Number:				
	Best Way of Contact:	☐ Email	☐ Cell Phone	e 🗆 Office Phone			
	Building Role:	☐ Owner	☐ Employee	Renter			
Business	Legal Business Name:						
Information	DBA (If Applicable):						
	Street Address:			City:			
	State:			Zip Code:			
	Please Sel	ect All Eligibl	e Expenses th	nat Pertain to Your Project:			
	☐ Painting and Professional Façade Cleaning (Either a Paint Only Project or As Part of a Larger Façade Project) ☐ Masonry Repairs and Tuckpointing ☐ Restoration of Exterior Finishes and Materials ☐ Exterior Lighting (Does Not Include Landscape Lighting. Lights Must be Connected to the Building) ☐ Awnings (May be used as a Design Element if Features are Compatible with Original Building Design and Compliment the Architectural Features) ☐ Doors and/or Entryways ☐ Second-Floor Entryways and Exits and/or Exterior Stairs ☐ Window Replacement and/or Repair ☐ Storefront Rehabilitation ☐ Exterior Carpentry ☐ Handicap Accessibility ☐ Non-Historic Façade Removal						

	Please Select the Type of Financing Needed:						
	☐ Paint Only. The Property Owner or Tenant May Be Reimbursed for the Cost of Paint and Labor on a 50/50 Basis up to a Maximum Reimbursement of \$3,000.						
	☐ Rehabilitation. Grants of up to \$20,000 Per Facade are Available for Qualified Applicants. Applicants Must Provide a Minimum Twenty Percent (20%) Match of the Total Project Cost. The Minimum Grant allowable for Any Project is \$1,000.						
	Please Describe the Façade (Side, Back, Front):						
	Please List Details of What Will Be Completed with This Grant Funding:						
	Please List the Companies You Have Received Quotes From and						
	What the Quote Includes:						
Quote Details							
Project Scope	Please Describe the Scope of the Project in Which You Are Seeking Funds for. Include Specific Expenses and Actions and How it Aligns with the Budget and Cos Estimates Provided Within This Application. Describe Why These Funds are Needed for This Project to Come to Fruition:						
	Proposed Start Date:						
	Proposed Completion Date:						

Grant &	Requested Grant Amount:		\$					
Private Investment Project Totals	Private Investment Amount: (A Minimum 20% Match is Required)		\$					
	Total Amount:		\$					
	Source(s) of Private Investment:							
	Provide a Detailed List of Supplies, Cost of Labor, and Items to Be Purchased to Support Future Reimbursement Requests. Be Specific by Providing Vendor, Items, Quantity, ar Cost. Please Note Which Quote They Are by Stating "Quote One" or "Quote Two."							
	Vendor Item / Quantity				Cost			
	(Insert Additional Lines as Needed)							
	*Attach Project Cost Estimates from Third Parties with a Minimum of Two Quotes. **Provide a Minimum of Three Photos to Represent the Scope of the Facade Request.							
Additional MEDC Program Requirements	unding Eligibility: I Have Not Received Any Funding from Vayland Main Street for a Façade Grant Improvement in the ast.		☐ No, I have not received Façade Grant funding previously.					
	Ineligible Business Types: The Program Guidelines outline Several Ineligible Business Types. Businesses that are Eligible for this Program are a part of the Wayland Downtown Development TIF plan.				☐ Yes, I received Façade Grant funding on://			
					☐ Yes, I am an Eligible Business			

	Wayland Façade Grant Program: I Understand That My Submission of an Application Does Not Constitute a Guarantee for Funding Under the Wayland Downtown Façade Improvement Program. I certify that All Information is True and Accurate to the Best of My Knowledge and, if Approved, Work Will Be Completed.	☐ Yes, I am an Eligible Business	
	Reimbursement Grant Program: The Wayland Façade Grant Program is a Reimbursement Grant Program Provided by Wayland Main Street and Funded Through the TIF Program.	☐ Yes, I have reviewed the Façade Grant Program	
	Compliance & Post-Grant Reporting: If Awarded, Businesses Will Be Required to Complete Compliance Requirements and Post-Grant Reporting.	☐ Yes, I Understand	
	Third Party Cost Estimate (Required Attachment): I Have Gathered and Will Submit a Project Cost Estimate for Proposed Work that Includes Scope and Total Cost in a Separate Document.	☐ Yes, I Understand	
	Photos (Required Attachment): I Have Provided a Minimum of Three Photos that Represent the Scope of the Grant Program Request (Including At Least One Exterior Photo and At Least One Interior Photo of the Space.	☐ Yes, I Have Included These with My Application Submission	
	City of Wayland Zoning and Code Requirements: I Have Provided Communication that this Project Does Fall Within All Codes and Zoning Requirements for Downtown Wayland with Wayland's Coding Company PCI in Dorr.	☐ Yes, I Have Included These with My Application Submission	
	Required Rendering Attached: I Have Provided a Minimum of One Design Rendering or Picture of the Final Project.	☐ Yes, I Have Included These with My Application Submission	