

## PLANNING DEPARTMENT

## FACADE GRANT APPLICATION

(Historically designated properties may require a COA)

## APPLICANT: **PROPERTY INFORMATION:** CURRENT TENANT (BUSINESS NAME) ADDRESS PIN USE ZONING LANDMARK STATUS Landmark District: Non-Contributing **District: Contributing** None Other: **APPLICANT INFORMATION:** MAILING ADDRESS **PRIMARY CONTACT** CITY, STATE, ZIP PHONE # FAX # OTHER # (CELL, ETC.)

OTHER APPLICANTS RELATIONSHIP	& INTERESTED PART NAME	TIES: COMPANY	MAILING ADDRESS	PHONE # AND FAX #
Owner				
Contractor				
Architect				
Agent/ Attorney				

## IMPROVEMENT INFORMATION: ESTIMATED COST OF IMPROVEMENTS^^ REQUESTED AMOUNT OF GRANT++

Please reference the checklist which states estimates must be itemized and include a brief description explaining the scope of work for each improvement itemized.

++The maximum grant amount is 50% of the total project cost, not to exceed \$150,000 in reimbursements or incentives per project. See program description for eligible improvements.

I hereby affirm that I have full legal capacity to authorize the filing of this application and that all information and exhibits herewith submitted are true and correct to the best of my knowledge. The owner invites Village representatives to make all reasonable inspections, investigations and take pictures of the subject property during the processing period of this request.

I understand that this is a voluntary program. I also understand that the Village has the right and discretion to approve or deny any project or portions thereof.

I authorize the use of any pictures involving this project by the Village of Plainfield.

SIGNATURE OF APPLICANT	DATE	
SIGNATURE OF OWNER, <b>REQUIRED</b> IF NOT APPLICANT	DATE	
<b>FACADE GRANT APPLICATION REQUIREMENTS:</b> Schedule a pre-application meeting with Planning Staff at (815) 439-2824	prior to filling out the application	
Review Facade Improvement Program Description		
Pre-application meeting with Planning Staff. (Staff Initials	Date)	
One (1) original completed facade grant application form.		
Historic photograph (photocopy is acceptable) of the facade(s) to Check with the Plainfield Historical Society, 23826 W. Main St., Plainfield, IL		
Current photograph(s) of facade and particular area(s) to be enh Submit in digital format (TIF, GIF, or JPEGs are acceptable formats & photo		
Brief narrative description of the project. This should include a description of the building's current status and the are performed, and the general methodologies to be employed (i.e. chemical cle sure the narrative provides a thorough description.		
<ul> <li>Twenty (20) sets of drawings of the proposed work (to scale). The accompanies a Rehabilitation Grant Application.</li> <li>All reduced copies must be legible.</li> <li>Architectural renderings not required, but encouraged in order to provide Drawings may not be necessary for projects such as tuck pointing or provide the accompanies of the provide the provided of the prov</li></ul>	de a good understanding of the proposed finished product.	
One (1) electronic copy of the drawings. Acceptable formats include PDF, TIF, GIF or JPEGs. One (1) .pdf file is pre	eferred.	
<ul> <li>Two (2) different contractor's estimates.</li> <li>Estimates must include only the work proposed for the facade. Eligible</li> <li>The estimate must include a brief description and methodology of the simply be a list of items. If the narrative description of the project adec aspect does need to be included to meet this required application item</li> </ul>	work to be done (include drawings if necessary), it can not quately details the contractor's work and methodology, this	
Existing and proposed service/use of the building.		
Required signatures. Signature of the owner is required, if the applicant is not the owner.		
Submitted permit application? No Yes If yes, please indicate date submitted &	what type	
Color/material samples, if requested by staff at pre-application m	neeting.	