

Town of Westernport Façade Matching Grant Program

General Conditions:

1. I, the applicant, have received and understand the Façade Improvement Matching Grant Program for the Town of Westernport and understand the criteria for approval of my application.
2. I further understand and agree that this is a "GRANT PROGRAM" and that this is not a guarantee of acceptance for funding. I further understand that the process for acceptance is in three (3) stages.
3. I further understand and agree that this is a "GRANT PROGRAM" and that if rejection occurs, it does not become a debatable issue.
4. It is expressly understood and agreed that the applicant shall be solely responsible for all safety conditions and compliance with all safety regulations, building codes, ordinances, and other applicable regulations.
5. It is expressly understood and agreed that work completed prior to receiving the award letter approval may be ineligible for funding.
6. It is expressly understood and agreed that the applicant will not seek to hold the Town of Westernport, its agents, employees, officers and/or directors liable for any property damage, personal injury, or other loss related in any way to the Façade Improvement Program.
7. The applicant shall be responsible for maintaining sufficient insurance coverage for property damage and personal injury liability relating to the Façade Improvement Program.
8. The applicant agrees to maintain the property and improvements, including but not limited to promptly removing graffiti, sweeping, and shoveling in front of the property. There shall be no material changes to or adding to the façade, front, or awning of such building without approval of the Town of Westernport for a period of 2 years following the completion of the project.
9. The applicant agrees to return a pro-rated amount of the grant money received if the improvement is removed within two (2) years.
10. The applicant authorizes Town of Westernport to promote an approved project including but not limited to displaying a sign at the site, during and after construction, and using photographs and descriptions of the project in future materials and press releases.

Signature of Applicant _____ Date _____

Print Name of Applicant _____

Address of Property _____

Town of Westernport Façade Improvement Matching Grant Application

General and Background Information

Name of Applicant: _____

Mailing Address: _____

Telephone (Home): _____ Work): _____

Address of Project: _____

Current Use of Building: _____

Will this project change the zoning of the building? _____

Description of Project: _____

Estimated Project Costs: _____

Estimated date to start work: _____

Estimated completion date: _____

Include with your application, detailed plans, estimates, and materials that will be used in the project, any other supporting documentation, and photos of the current property indicating the work to be completed. Please also include your form 1040 if you intend to apply for 100% grant funding.

By signing below, the applicant acknowledges his understanding that all local and state building codes and laws will apply.

I, the applicant, have read and understand the Town of Westernport Façade Improvement Matching Grant Program and agree to abide by the conditions as set forth in this Program. I hereby affirm that all information included on this form is true and accurate to the best of my knowledge.

Signature of Applicant: _____ Date: _____

Printed Name _____