

MATCHING GRANT PROGRAM FAÇADE APPLICATION

Applicant Name:	Property Owner Name:
Business Name:	
Property Address:	
Telephone and Email:	
<u>Type of Façade Improvement Planned (note all that apply).</u>	
SIGNAGE & LIGHTING: Removal New Alter Sign: Provide a color rendering of the design chosen with the dime	•
\Box Indicate how & where the sign will be hung on the building and ho	w the architectural style of the building will be complemented.
Lighting: Provide images of fixture(s) with style & color and how th	e architectural style of the building will be complemented.
PAINT: Approximate square feet of area: Provide samples of the colors chosen. Define the primary and acc Indicate where each color will be used and how the architectural Submit at least one written estimate from painter of your choice.	ent color(s).
AWNINGS: Approximate dimension/size of area: Provide information about color, style, and size of selected awning Indicate where on the building the awning will be placed, how this functionality of the space.	j.
MAJOR FAÇADE ALTERATION: Structural Alteration: Provide a rendering of major changes including paint, siding, door Submit a written estimate from at least one contractor, including	s, windows, and awning colors where applicable.
SIDEWALK FRONTAGE, PATIO(S) & OTHER OUTDOOR SPACES Approximate square feet of area:	
Provide a rendering of the space with color, design element, and	the dimensions listed.
Space must comply with the Americans with Disabilities Act, ADA	(at least 36" pathways through or around the space).
□ Indicate how this will highlight the architectural style of the building	ng and how it will improve the functionality of the space.
\square Note how this change will invite customers to your business and he	ow many customers can utilize the space at one time.
ALL PROJECTS PROPOSED:	
 Submit a budget showing contributions (monetary and in-kind) from Submit documentation indicating design and size comply with Ciric Submit at least one written estimate for materials and/or labor. To be eligible, tenants need to provide a notarized Authorization Submit signed Matching Grant Program Façade Release and Hold Submit a copy of your current Occupational License and Certification Have insurance claims been submitted for the project(s) associated 	y codes. for Work from the property owner. d Harmless Agreement (page two of this application). ite of Use, if applicable.
OTHER WORK: (explain)	
Total Cost of Project: A	mount Requested (Not to exceed \$3,500.00):
I hereby submit the attached plans, current photos, and specification	s/color samples for the proposed project, and understand that these must

I hereby submit the attached plans, current photos, and specifications/color samples for the proposed project, and understand that these must be approved. No work should begin until I have received written approval. I further understand that the project must be completed within six (6) months and those grant monies will not be paid until the project is complete. I agree to leave the completed project in its approved design and colors for a period of five (5) years from the date of completion.



MATCHING GRANT PROGRAM FAÇADE RELEASE AND HOLD HARMLESS AGREEMENT

Re	lease executed on the day of	, 20,
by	,	,
	(Property Owner/Tenant/Releaser/Business Owner)	
of		, Hinesville, GA 31313.

(Street Address)

In consideration of being granted monies for restoration, modifications, signage, or other physical changes to the property located at the above address, the Releasor(s), understands that they are solely responsible for providing their contractors, and assure that those contractors are fully insured and licensed and have obtained all necessary permits by City regulations. The Releasor(s) waives, releases, discharges, and covenants not to sue the Hinesville Downtown Development Authority for loss or damage, and claims or damages therefore, on account of any work that has been performed in accordance with City or State guidelines.

Releasor(s) agrees that this release, waiver, and indemnity agreement is intended to be as broad and inclusive as permitted by the laws of the State of Georgia and that if any portion of the agreement is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Releasor(s) further states that it has carefully read the above release and knows the contents of the release and signs this release as its own free act.

Releasor(s) obligations and duties hereunder shall in no manner be limited or restricted by the maintaining of any insurance coverage related to the above-referenced event.

This release contains the entire agreement between the parties to this agreement and the terms of this release are contractual and not a mere recital.

Dated this	_ day of	, 20
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Property Owner Name

Business Owner Name

Property Owner Signature

Business Owner Signature

For more information or questions:

- 912-877-4332
- mainstreet@hinesvilledowntown.com
- I15 East M.L. King Jr. Drive Hinesville, GA 31313