

*Application for Newport News
Fort Eustis Gateway /
Warwick Corridor Business
Improvement Grant Program*

(Name of Applicant)

(Date Submitted)

(Signature of Applicant)

(Grant Amount Requested)

I. PROJECT APPLICANT (Owner of Property)

A. Contact Applicant's Legal Name: _____
Street Address: _____
City, State, Zip _____
Telephone Number: _____
Contact Person(s)/Title: _____

Address of Property Involved in Project:

B. Is applicant a subsidiary or direct or indirect affiliate of any other organization?
 Yes No

C. All Property Owners are to be listed below:

<u>Name</u>	<u>Home Address</u>	<u>Telephone number</u>	<u>Social Security #</u>	<u>Ownership</u>
_____	_____	_____	_____	_____%
_____	_____	_____	_____	_____%
_____	_____	_____	_____	_____%
_____	_____	_____	_____	_____%
_____	_____	_____	_____	_____%
_____	_____	_____	_____	_____%

D. Does any individual person or organization not listed above hold any interest in the property, directly or indirectly?
 Yes No

E. Please list below each occupant of the facility in question, together with a description of the type of business use and percentage of occupancy of the facility to be financed.

A Occupant	B Type of Business	% Occupancy	Lease Term*	Anticipated/ Active Rent

*Provide Copy of Lease(s)

G. Property Information:

Location: _____

Property Owner: _____

*Assessment: Land _____
 Improvements _____
 Total _____

*(If unsure contact Staff)

Appraisal Amount: _____
 (if within last 3 years)

Date of Appraisal _____

II. PROBABLE CONTRACTOR(S) INVOLVED IN PROJECT:

Name: _____
Street _____
City, State, Zip _____
Telephone _____
Contact Person _____

Name: _____
Street _____
City, State, Zip _____
Telephone _____
Contact Person _____

Name: _____
Street _____
City, State, Zip _____
Telephone _____
Contact Person _____

OTHER PROFESSIONAL PARTIES INVOLVED IN PROJECT:

(ex: Accountants, Lawyers, etc.)

Name: _____
Street _____
City, State, Zip _____
Telephone _____
Contact Person _____

Name: _____
Street _____
City, State, Zip _____
Telephone _____
Contact Person _____

Name: _____
Street _____
City, State, Zip _____
Telephone _____
Contact Person _____

Primary Contact for Project Information:

Name: _____
Telephone: _____
Email: _____

Please specify costs for work items as categorized below:

Item	Description	Amount
<i>Exterior Improvements</i>		
Signage		\$
Awning/Canopy		\$
Siding/Shutters		\$
Bricking		\$
Roof Improvements		\$
Exterior Painting		\$
Windows/Doors		\$
Exterior Lighting		\$
Handicap Modifications/Ramps		\$
Security Cameras		\$
Parking Improvements		\$
Landscaping		\$
Other		\$
TOTAL		\$

Has any construction, rehabilitation, or renovation activity occurred to date which is included in the total project cost? Yes No

If Yes, please summarize the extent of the activity undertaken and identify what percent it represents of the total work to be done.

Zoning and Infrastructure:

The proposed use of the project meets all governmental zoning and subdivision regulations. Yes No

There are adequate utilities, sewage and drainage available to the building per City requirements. Yes No

There is adequate off-street parking to meet the needs of the building/business per City requirements. Yes No

IV. AMOUNT AND SOURCE OF OTHER FUNDS INVOLVED IN PROJECT

Bank _____	Amount _____
Equity _____	Amount _____
Investors _____	Amount _____
Other _____	Amount _____

PROJECT BENEFITS

How will this grant help the business and the Warwick Corridor?: _____

Any other Benefits to City?: _____

Please read the following and sign the application form below.

All property/business owners, partners, etc. must sign this application form. If there are any questions, please call us at 926-8074 or 926-3793.

Name (Print) _____

Name (Print) _____

Signature _____

Signature _____

Date _____

Date _____

E-mail _____

E-mail _____

Name (Print) _____

Name (Print) _____

Signature _____

Signature _____

Date _____

Date _____

E-mail _____

E-mail _____

PUBLIC INFORMATION DISCLOSURE

The undersigned understands and agrees that all information furnished in connection with his application for Fort Eustis Gateway/Warwick Corridor Business Improvement Grant Program involves the use of public funds and as such may be made public pursuant to the statutes of the United States of America and the Commonwealth of Virginia.

Applicant's Signature

Date

Applicant's Signature

Date

Applicant's Signature

Date

Applicant's Signature

Date

REQUIRED ATTACHMENTS TO APPLICATION

- Application Fee \$75 – Non-Refundable.
- Such non-financial information or supporting information necessary to substantiate the application, including, but not limited to:
 - Estimates, quotations, receipts, contracts, orders, invoices, leases, sales agreements, documentation from architects, engineers, contractors, suppliers, or others involved in the sale, lease or construction of fixed assets, if any, for project including schedules of implementation.
- Any History or Relevant Information on Applicant and/or Property.

Please provide as much of this information as possible and add any additional information that will assist our staff review committee in evaluating your grant request.