



**Wilkinsburg Community Development Corporation**

**Façade Renovation Program**

**A fee of \$50.00 must accompany this application. This fee is refundable only if your application is not chosen for funding. Checks should be made payable to the Wilkinsburg Community Development Corporation.**

**APPLICANT INFORMATION**

Name of Applicant: \_\_\_\_\_ Application Date: \_\_\_\_\_

Telephone: Work: \_\_\_\_\_ Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Applicant Mailing Address: \_\_\_\_\_

Address of Building: \_\_\_\_\_

Name and Type of Business: \_\_\_\_\_

Federal Tax ID or Social Security Number: \_\_\_\_\_

**PROPERTY OWNER INFORMATION (if different from Applicant)**

Name of Owner: \_\_\_\_\_ Telephone: \_\_\_\_\_

Owner Mailing Address: \_\_\_\_\_

Proposed Improvements (check all that apply):

- |   |  |
|---|--|
| <input type="checkbox"/> Canopy/Awnings                   | <input type="checkbox"/> Signage                               |
| <input type="checkbox"/> Windows/Doors                    | <input type="checkbox"/> Exterior Lighting                     |
| <input type="checkbox"/> Improvements to entrances        | <input type="checkbox"/> Display Lighting                      |
| <input type="checkbox"/> Tuck pointing/Masonry Repairs    | <input type="checkbox"/> Restoration of Architectural Features |
| <input type="checkbox"/> Painting                         | <input type="checkbox"/> Security Gates                        |
| <input type="checkbox"/> Window Boxes, Permanent Planters | <input type="checkbox"/> Landscaping Elements                  |

Other (please specify) \_\_\_\_\_

**Describe the scope and purpose of the work to be done:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Preliminary Cost Estimate: \$ \_\_\_\_\_ CCDC Grant Request: \$ \_\_\_\_\_

**How would you like to handle payment?**

CCDC pays contractors directly

CCDC reimburses you, once you have paid contractors

**NOTE: DO NOT START ANY IMPROVEMENTS UNTIL YOU HAVE BEEN NOTIFIED THAT YOUR GRANT HAS BEEN APPROVED BY THE FAÇADE IMPROVEMENT PROGRAM COMMITTEE.**

**Statement of Understanding:**

- A. I agree to comply with the guidelines and procedures of the Carnegie Community Development Façade Improvement Program.
- B. I understand that I must submit detailed cost documentation, copies of bids, contracts, invoices, receipts and contractor's final waiver of lien upon completion of the approved improvements.
- C. I understand that work done before approval of the grant and receipt by the CCDC of a signed Participation and Maintenance Agreements are not eligible for reimbursement.
- D. I understand the Façade Improvement grant is subject to taxation and that the CCDC is required to report the amount and recipient of said grants to the Internal Revenue Service.

*I hereby affirm that I have full legal capacity to authorize the filing of this application and that all information and exhibit herewith submitted are true and correct to the best of my knowledge. The owner invites the CCDC to make all reasonable inspections, investigations and take pictures of the subject property during the process period associated with this application. I authorize the use of any pictures taken by the CCDC.*

*I also understand that in order for my request for funds to be approved, I must agree to work with and follow the recommendations of the Façade Improvement Program Committee and before starting any work following approval of this application, I must complete and sign a Façade Grant Program Agreement.*

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Signature of Applicant

Date

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Signature of Applicant

Date

**The following items must be attached to this application in order for it to be considered complete:**

- \$50 Application Fee (refundable if your application is not approved)
- Drawings of proposed improvements
- Cost estimates or bids - consideration should be given to vendors currently doing business in Carnegie. This must include any estimates for architectural or design services, if applicable.
- If applicant is a tenant, completed "Property Owner Authorization" Form
- Projected timeline for completion (assume project start date of March 1, 2008) not to exceed 6 months

**Complete Application packets may be submitted to:**

**Wilksburg Community Development Corporation  
Attn: Façade Improvement Program  
1001 Wood Street  
Wilksburg, PA 15221**

**Complete Application packets may also be submitted electronically to:**

[tracey@wilksburgcdc.org](mailto:tracey@wilksburgcdc.org)