

5. RETENTION/RECRUITMENT OF JOBS:

Number of employees at time of application: _____ Number projected in two years: _____

6. BRIEF DESCRIPTION OF PROPOSED STOREFRONT IMPROVEMENTS:

7. WILL YOU BE WORKING WITH YOUR OWN ARCHITECT OR ONE PROVIDED BY THE CITY?

City-provided

Other – Name: _____

Phone: _____

8. ESTIMATED COST OF STOREFRONT IMPROVEMENTS: \$ _____

9. IN ADDITION TO THE PROPOSED STOREFRONT IMPROVEMENTS, IS INTERIOR OR OTHER WORK ALSO PROPOSED? Yes No

Estimated cost of other work: \$ _____

Total estimated cost of all work: \$ _____

10. SOURCE(S) OF MATCHING FUNDS (the City may withhold approval of this application until information satisfactory to the DSIP is provided):

11. BEAVERTON BUSINESS LICENSE:

a) Are you required to have a City of Beaverton Business License? Yes No

b) If yes, please enclose a copy of the License. If no, please explain why not:

12. The applicant understands that the City of Beaverton must approve the proposed exterior storefront improvements. Certain changes or modifications may be required by these agencies or by the City of Beaverton prior to final approval. A commitment of funds will not be processed prior to the City's receipt and approval of Storefront staff has received the necessary bids for the approved work. Any work commenced prior to a commitment letter being issued will not be eligible for reimbursement, and any work deviating from the approved work must be *pre-approved* by the City in order for the work to be eligible for reimbursement.

CERTIFICATION BY APPLICANT

The applicant certifies that all information in this application, and all information furnished in support of this application, is given for the purpose of obtaining a Storefront grant and is true and complete to the best of the applicant's knowledge and belief. If the applicant is not the owner of the property to be rehabilitated, or if the applicant is not the sole owner of the property, the applicant certifies that he/she has the authority to sign and enter into an agreement to perform the rehabilitation work on the property. Evidence of this authority must be attached. Verification of any of the information contained in this application may be obtained by the City of Beaverton from any available source.

Applicant Signature: _____ Date: _____

PLEASE RETURN APPLICATION TOGETHER WITH A COPY OF THE CURRENT CITY OF BEAVERTON BUSINESS LICENSE TO:

Community Development Block Grant Program
Attn: Andrea Lindberg
Mayor's Office
City of Beaverton
PO Box 4755
4755 SW Griffith Drive
Beaverton, OR 97076
503-526-2533 – Telephone
503-526-2479– Fax