



Downtown Grant Improvement Program Application

Applicant Information

Name of Business: _____

Business Address: _____

Business Owner Applicant Full Name: _____

Applicant Mailing Address (if different from above): _____

City, State, Zip: _____

Email: _____

Phone: _____

Property Owner Information

Full Name: _____

Property Owner Address: _____

City, State, Zip: _____

Email: _____

Phone: _____

Property Information

Property Address: _____

Assessor's Parcel Number: _____

Total Site Acreage: _____

Building Square Footage: _____



City of Fort Bragg

Economic Development Department

416 N Franklin St, Fort Bragg, CA 95437

Phone: 707-961-2823

Website: city.fortbragg.com

Current Use: _____

Number of Commercial Units: _____

Number of Residential Units: _____

Number of Current Tenants: _____

Lease Expiration Date: _____

Project Description

Provide a short project description below and list any additional attachments.

Estimated Total Cost of Improvements: _____

Funding/Reimbursement Amount Requested (maximum 50% of above or \$20,000, whichever is less): _____



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Acknowledgements and Certifications

- I hereby acknowledge that I must comply with California Labor Code Prevailing Wage Requirements for the improvements under this program as outlined by the Program Guidelines.
- I hereby acknowledge that I will obtain plan approval and any applicable Planning and Building Permits from the City of Fort Bragg and the County of Mendocino and will comply with all City and County policies and ordinances including business permit requirements.
- I hereby acknowledge that I will obtain Commercial General Liability Insurance and a policy of Worker's Compensation Insurance as outlined by the Program Guidelines.
- I hereby acknowledge that I am responsible for ongoing maintenance of the improvements for three (three) years following the completion of the project under this program.
- I hereby acknowledge that a detailed scope of work is required and will be provided with this application in order to be considered for the program.
- I hereby acknowledge that I have read and understand the Program Guidelines and accept them.
- I hereby acknowledge that acceptance of the application does not represent a complete application or guarantee of funding.
- I certify that I possess a Business License and all applicable permits to operate my business at the address listed.
- I certify that there are no active Code Enforcement cases against my business.
- I certify that I have no account in arrears with the City of Fort Bragg.
- I certify that the information provided within this application is, to the best of my knowledge, true and complete.

Print Applicant Name: _____

Applicant Signature: _____

Date: _____

Print Property Owner Name: _____

Property Owner Signature: _____

Date: _____



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Additional Information to be Submitted with Application

Check Each Completed Item

- ☐ Total Anticipated Budget: \$ _____
- ☐ Design Services Grant Requested? Y__N__. Amount: \$ _____ (Maximum \$1,000)
- ☐ Total Anticipated Grant Request (Maximum 50% of total cost, Limit of \$1,000 to \$20,000):
\$ _____
- ☐ Itemized List of Proposed Improvements
- ☐ Completed Bids, Based on Prevailing Wage, From Three Contractors For Work Specified on the Itemized List (Construction projects only)
- ☐ Photographs of Existing Conditions
- ☐ Drawings and/or Modified Photographs Showing Proposed Improvements
- ☐ Paint and Material Samples (if applicable)
- ☐ Proof of Ownership of Property and Executed Lease
- ☐ Executed Lease (if applicable)
- ☐ Current Business License (Business Owner only)
- ☐ Photo Release Form (Optional)
- ☐ Consent to Release Information (Optional)
- ☐ Authorization to Record Lien on property (Property Owner Only)
- ☐ Proprietary Information Certification (Optional)



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Lien Authorization

I, _____ (print name), as owner of the building at
_____(PIN _____) do hereby give permission for the City of Fort
Bragg to record a lien on this property in the amount of \$_____ for a Downtown
Improvement Grant. Said lien shall run to the City of Fort Bragg, and shall be released at the
end of the third year after which it is recorded. Said lien may be foreclosed on by the City if the
property is sold prior to the three (3) year term for a prorated amount from the original lien date
on a calendar year basis. Said lien shall be secondary to any primary mortgage lien on the
property.

Owner Signature

Date

Printed Name



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Proprietary Information Certification

I, _____ (print name), do hereby attest that the financial information provided with this grant application is proprietary, privileged and confidential, and disclosure of the trade secrets, commercial and financial information contained within will cause competitive harm to my business interests.

Signature

Date

Printed Name



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City Use Only

Date and Time Received: _____

Application and Attachments Complete Y/ N

Active BLY Y/ N

Active Code Enforcement Case Y/ N

Applied for Permits Y/ N

Date Application Confirmation Letter and Email Sent: _____

GAC Date: _____

GAC Approval Y/ N

Director Approval Y/ N

Agreement

Exhibit A Exhibit B Exhibit C Exhibit D

Dates Permit(s) Issued: _____

Expected Start Date: _____

Expected Completion Date: _____

Date Receipts Received: _____

Date Notice of Occupancy Received: _____

Date Check Request Submitted to Finance: _____