

Henrietta Growth Corporation Façade Grant Application/Agreement

Applicant: _____ **Property Owner** _____

Applicant Address _____

Telephone _____ **E-mail address for correspondence** _____

Project Physical Address: _____

Name of Business _____

Project Start Date* _____ **Project Completion Date*** _____

Project Description: _____

Contractor & Contact Info _____

Total Cost of Project (attach contractor's bid) \$ _____

Amount Requested (50% of total not to exceed \$2500 per facade) \$ _____

- Applicants will receive approval notification by e-mail or regular mail at the addresses provided above.
- Work completed prior to grant approval is not eligible for funding
- Façade grants and design will be as approved by the Henrietta Growth Corporation Board of Directors.
- *The project will be completed within 180 days of approval.
- Reimbursement will occur after project completion and upon submission of appropriate forms and documents as outlined in the guidelines.
- All required permits are the responsibility of the owner/applicant.

Signed _____

Property Owner(s) Date

Signed _____

Applicant Date

Send all materials to: Sammie Hatfield – Henrietta Growth Corporation – 101 N. Main – Henrietta, TX