

**REVOLVING LOAN FUND
APPLICATION
UPDATED 3/2004**

Date Received: _____
(for office use only)

Received By: _____
(for office use only)

Please read instructions before completing this form.

APPLICANT IDENTIFICATION

Applicant Name: _____

Social Security No. _____
or Tax I.D. No. _____

Applicant Is:

Individual _____

Corporation _____

Partnership _____

If corporation or partnership, list names and % ownership of all owners.

- 1.
- 2.
- 3.
- 4.

Applicant Address: _____

Telephone: _____ Office

_____ Home

_____ Fax

_____ E-Mail Address

Identify others who will be contractually liable for repayment of loan:

Name Address Telephone

| | | |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

PROJECT IDENTIFICATION

Project Address: _____

Date Building Was Constructed: _____

Legal Description: _____

Property Owner's Name: _____

Owner's Address: _____

Owner's Telephone: _____

Is Applicant a Tenant? Yes: _____ No: _____
(If yes, attach Lease Agreement)

Structure's Current Use: _____ vacant
 _____ commercial
 _____ residential
 _____ mixed use

Project Will Result In: _____ new office space
 _____ new residential
 _____ new mixed use
 _____ new retail or restaurant

Completed Project Will Provide For _____ New Jobs.

Provide Brief Description of New Use Below:

HISTORICAL STATUS

Is the building located in the downtown National Register District? _____

Is the building a “contributing” building in the district? _____

Is the building individually listed on the National Register? _____

Does the building have a “state” historic marker? _____

Does the building have a local HC (Historical Cultural) designation? _____

*Attach current & historic photographs of building facade.

DESIGN INFORMATION

*Please provide site plans for any work to be completed on the interior or exterior.

*Please submit colored renderings of work to be completed on facade.

In the categories below and on the following pages, please submit a detailed description of proposed work. If not applicable, simply write “NA”.

Describe existing exterior facade materials proposed to be removed:

Describe window frame and glass treatment (repair, replacement, etc.):

Storefront: _____

Upper Floors: _____

Transoms: _____

Window glass treatment:

Storefront: _____

Upper Floors: _____

Transoms: _____

Preparation of substrate to receive paint:

Paint colors and location:

Door treatment (repair, replacement, etc.):

Signage:

Number of signs for facade: _____

Size: _____ Colors: _____

Illuminated? Yes () No () How? _____

Location: _____

Materials: _____

Please describe any repair that will be completed on the roof, gutters, down spouts, etc:

Describe work to be completed on each elevation (exterior wall) of the building:

Describe parking facilities, number of vehicles accommodated:

Describe accessibility accommodations:

Description of interior work to be completed:

Brick and mortar (including tuckpointing) or stucco repair:

Brick and mortar or stucco cleaning, do not sandblast:

Cornice treatment:

Awnings:

Storefront repair and/or replacement:

Estimated time of construction (month) _____ until (month) _____
_____ (year).

FINANCIAL INFORMATION

1. Amount requested from Revolving Loan Fund \$ _____
2. Matching funds and if applicable, other funding \$ _____
3. Total project cost \$ _____

Percentage of loan for exterior work: _____ %

Percentage of loan for interior work: _____ %

Loan amortization requested (maximum 10 years): _____

Source of Revolving Loan Payment: _____

Proposed collateral:

Value: _____

Source of valuation: _____

Date of valuation: _____

Matching funds will come from.....
Matching funds must be dollar for dollar of loan request

*Is a document proving the applicant is a “qualified borrower” from this financial institution attached?_____

The undersigned certifies that the information contained in this application and attachments has been carefully read and is true and correct. I understand that members of the Board of Directors and the Finance and Design Review Committee may “review” the project before, during and after construction, and that Main Street may place signage at the site stating that applicant has utilized the Main Street incentive program.

Signature of Applicant

Date

FOR MAIN STREET USE ONLY

1. Date of Finance and Design Review Committee _____

Committee Members Present:

Outcome: _____

Information requested by Main Street Finance and Design Review Committee:

2. If needed, date of second Finance and Design Review Committee:

Committee Members Present:

Outcome: _____

Information requested by Main Street Finance and Design Review Committee:

3. Date of Board of Directors meeting: _____

Board Members Present:

Outcome: _____

Information requested by Main Street Board of Directors:

4. Check given to applicant: _____